



World Organisation
for Animal Health

**សិក្ខាសាលាស្តីពី
ការពិនិត្យមើលការអនុវត្តន៍ផែនការសកម្មភាពជាតិ និងកិច្ចសហការ
ពីការអន្តេតតាមដាន និងការចែករំលែកទិន្នន័យ AMR/AMU នៅកម្ពុជា**

“The implementation of NAP and advancing collaborations in AMR/AMU
surveillance/data sharing in Cambodia”

25-27 March 2025, Sweet Boutique Hotel, Kampot Province , Cambodia

With support from:





Progress report of AMR implementation in human health

**Workshop on reviewing the implementation of NAP and advancing collaborations in
AMR/AMU surveillance/data sharing
25-27 March 2025, Kampot**

Dr. Nay Touch
Medical officer at Communicable Disease Control Department,
Ministry of Health, Cambodia



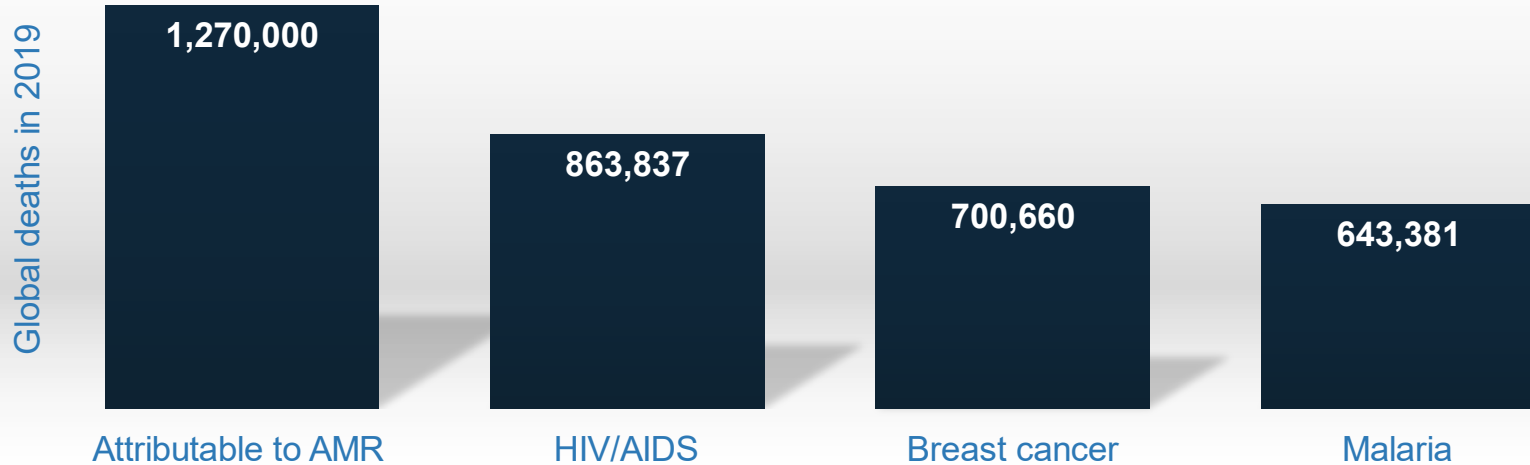


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Global burden of AMR

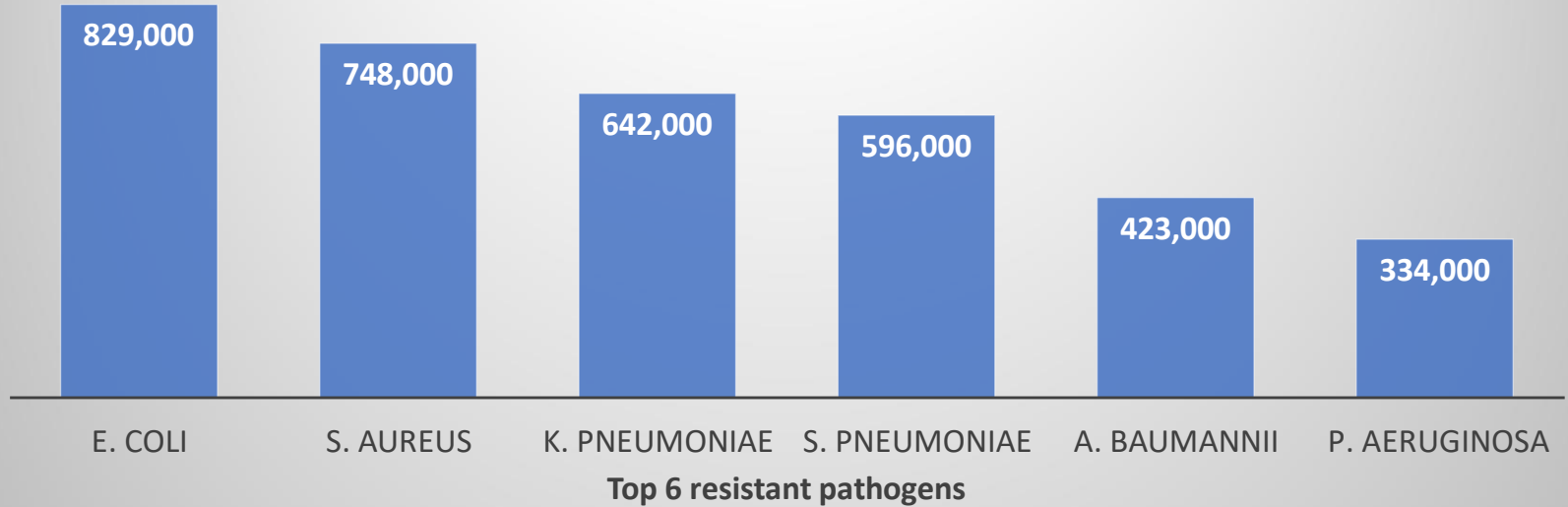
Global deaths in 2019



Global burden of bacterial antimicrobial resistance in 2019: a systematic analysis, *The Lancet*, January 2022



Global deaths with drug-resistant infection in 2019



AMR is a health security agenda which impacts health and economies

AMR infections are projected to cause:

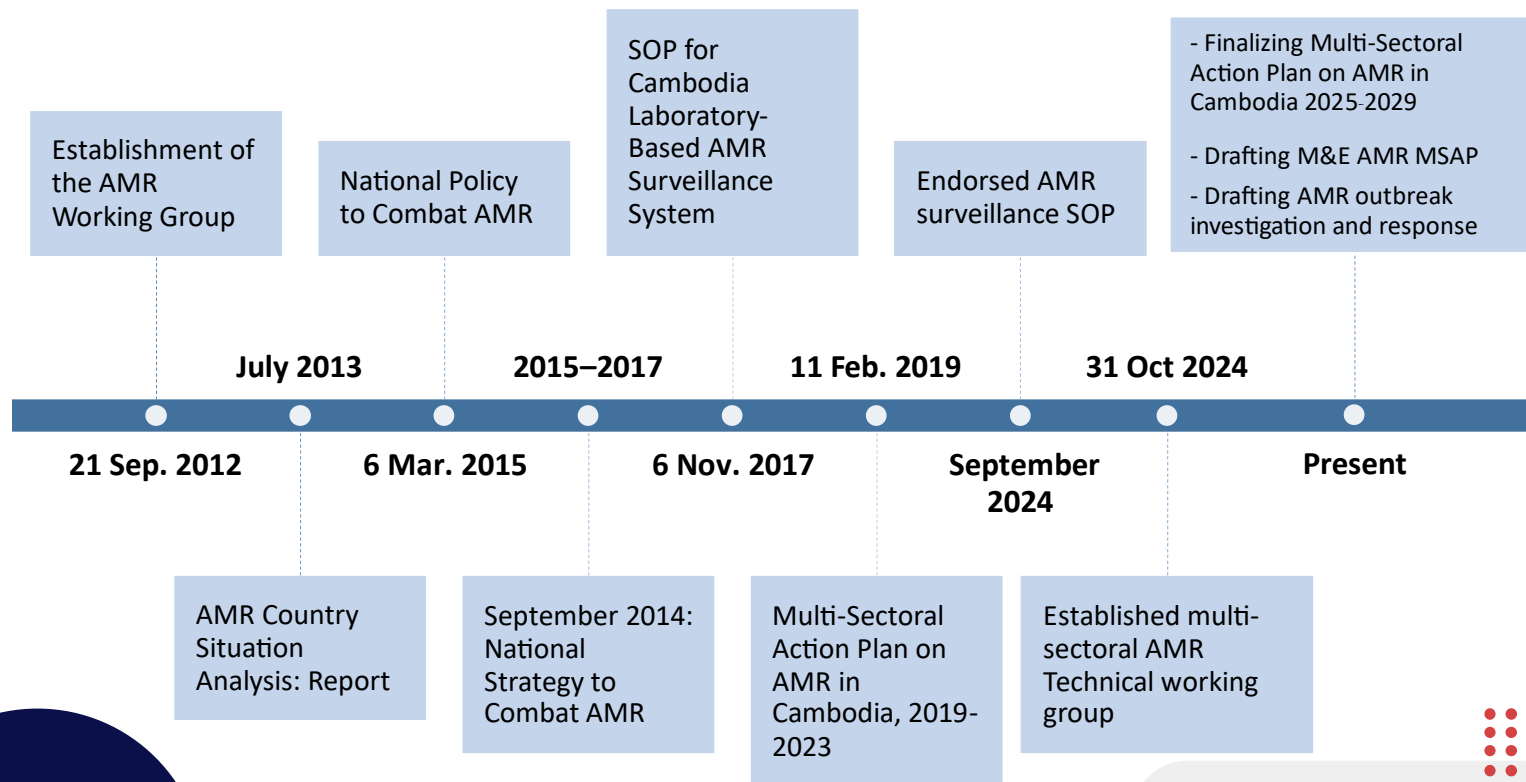
5.2
million
total excess deaths

148
billion USD
total economic cost

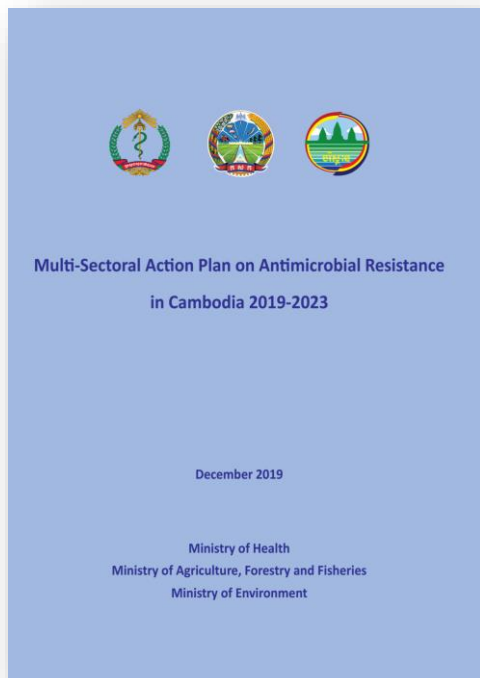
across the Western Pacific Region over the next 10 years: 2020-2030



AMR implementation timeline



Multi-Sectoral Action Plan on AMR in Cambodia



Key Strategic objectives

1. Governance and coordination to reduce antimicrobial resistance
2. Evidence generation through surveillance and laboratories (Human and Animal)
3. Rational use of antimicrobial medicines
4. Containing AMR through good practices
5. Increasing public awareness
6. Building human capacity for antimicrobial resistance
7. Research and innovation for antimicrobial resistance

Multi-Sectoral Action Plan on AMR in Cambodia



Key Strategic objectives

1. Governance and coordination to reduce antimicrobial resistance
2. Evidence generation on AMR through surveillance, research, and strengthened laboratory capacity
3. Rational use of antimicrobial medicines
4. Containing AMR through good practices
5. Prevention and control of AMR through risk communication and community engagement



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- ឯកសារ កាតប្បវត្តិ

The National One Health Strategy



10-YEAR VISION

Quality health and well-being for humans, animals and the environment

5-YEAR GOAL

Improved cross-sectoral collaboration working together
to predict, prevent, detect, and response to One Health threats in Cambodia

STRATEGIC AREAS

POLICY, FINANCE
AND PLANNING

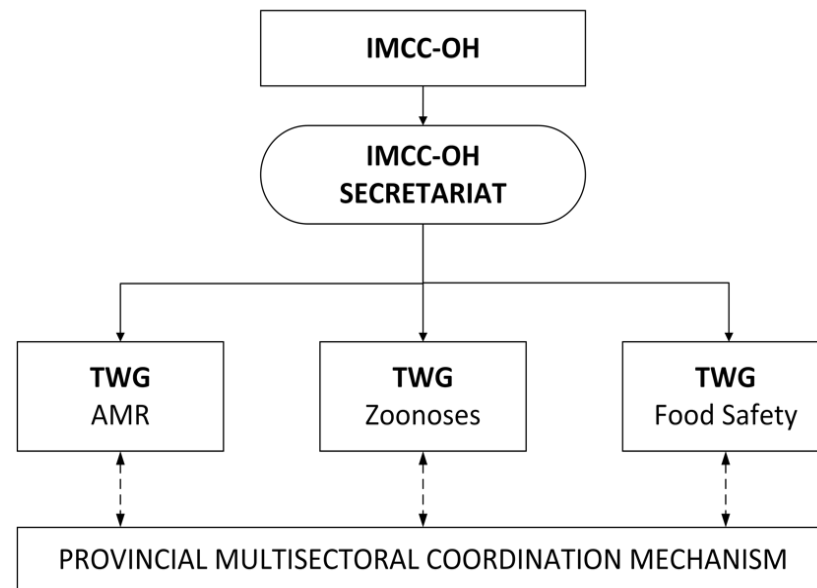
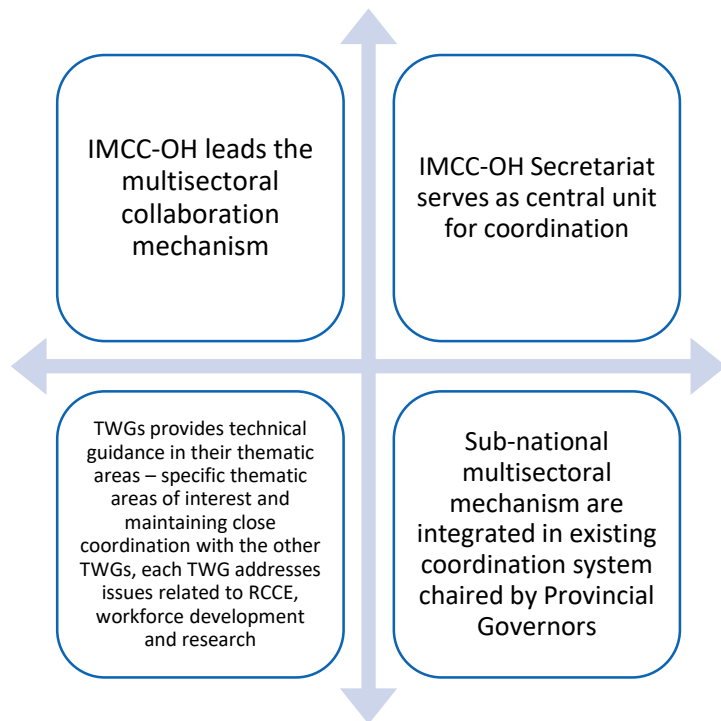
COORDINATION

COMMUNICATION

EDUCATION,
TRAINING AND
RESEARCH

SURVEILLANCE
AND RESPONSE

The One Health Governance structure in Cambodia



AMR Surveillance in Cambodia

There are total of 10 surveillance sites:

- National Pediatric Hospital (NPH)
- Calmette Hospital
- Sihanouk Hospital Center of Hope (SHCH)
- Khmer-Soviet Friendship Hospital (KSFH)
- Cambodia-China Friendship Preah Kossamak Hospital (CCFKH)
- Siem Reap Provincial Referral Hospital
- Battambang Provincial Referral Hospital
- Takeo Provincial Referral Hospital
- Kampong Cham Provincial Hospital
- Angkor Hospital for Children (AHC)



Specimen types and priority pathogens for AMR surveillance

Priority pathogens*	Specimens			
	Blood	CSF	Urine	Aspirates from normally sterile sites
Acinetobacter spp.	✓	✓		✓
E. coli	✓	✓	✓	✓
K. pneumoniae	✓	✓	✓	✓
P. aeruginosa	✓	✓		✓
S. aureus	✓	✓		✓
S. pneumoniae	✓	✓		✓
N. meningitidis	✓	✓		✓
H. influenzae	✓	✓		✓
Salmonella spp. (non-typhoidal)	✓	✓		✓
S. enterica serovar Typhi	✓			
S. enterica serovar Paratyphi A³	✓			
B. pseudomallei	✓	✓	✓	✓



Important of AMR data



Clinical Management & AMR Response

Use patient-specific AST data for treatment; empiric therapy should follow site-specific susceptibility data. Ensure collaboration among clinicians, healthcare professionals, and hospital management.



Antimicrobial Stewardship (AMS)

Use AMR data to guide essential medicine lists and regulate antibiotic use. The AMS team should review and adjust treatment with the physician.



Infection Prevention & Control (IPC)

The IPC team should review procedures and investigate transmission when needed. Strengthen IPC to reduce healthcare-associated infections (HCAIs).





National Institute of Public Health- National Reference Laboratory

- Conduct confirmatory testing including multi-drug resistant organisms, carbapenemase-producing organisms, no ability of testing for species, detection of resistant mechanism.
- Provide training to laboratory personnel at surveillance sites.
- Provide ATCC strains.
- Ensure quality assurance mechanisms are in place for data management and laboratory practice (in close collaboration with NCC).
- Coordinate EQA programs with sentinel sites.
- Maintain a list of quality microbiology supplies and suppliers.
- Assist sentinel site laboratories to procure reagent and supplies.
- Maintain a bio-repository for bacterial isolates.

Key achievement on AMS, MoH

1. **National AMS Guidelines in Health care facilities 2019**
2. **National AMS Policy in Health facilities 2023**
3. **National AMC Guidelines 2023**
4. **AMS Syllabus for Pre-Services Training**

AMS Legislation



ព្រះរាជាណាចក្រកម្ពុជា
ជាតិ សាសនា ព្រះមហាក្សត្រ

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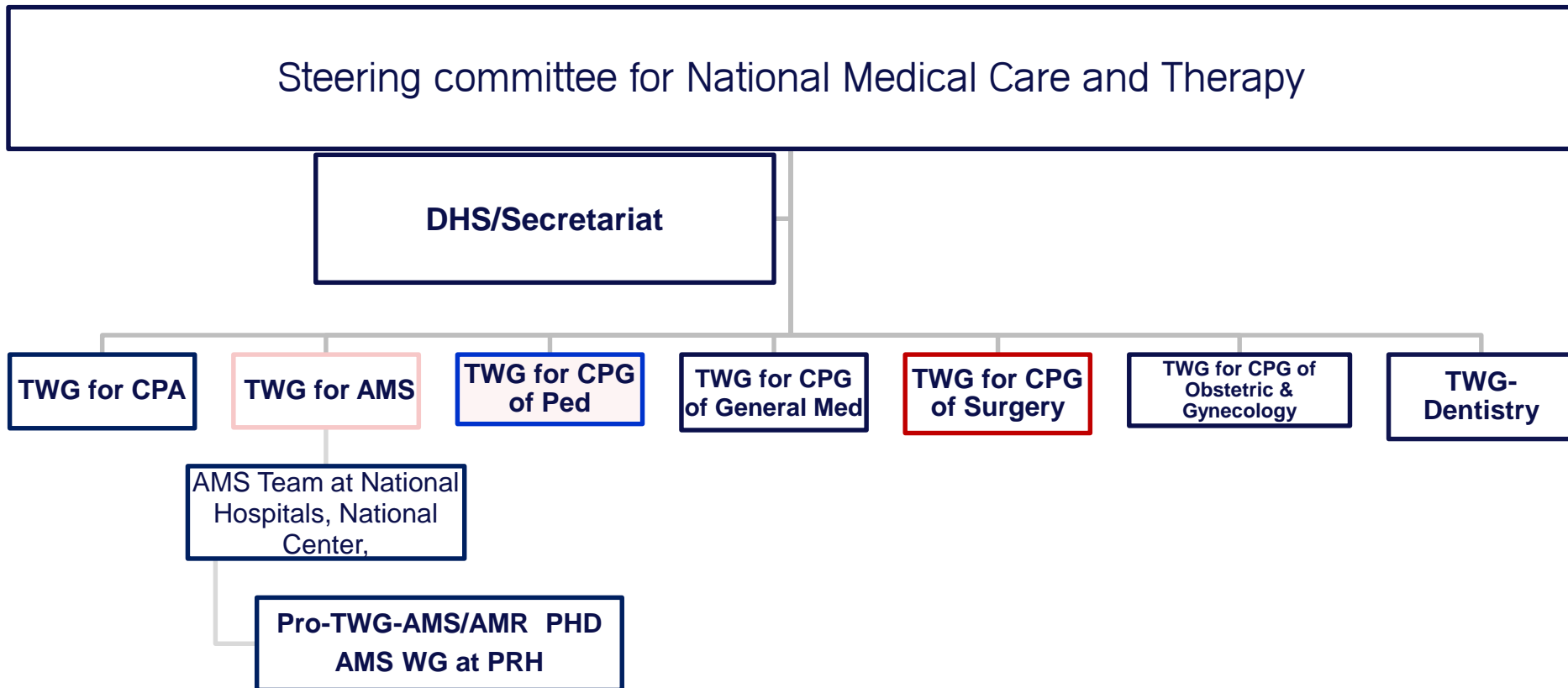


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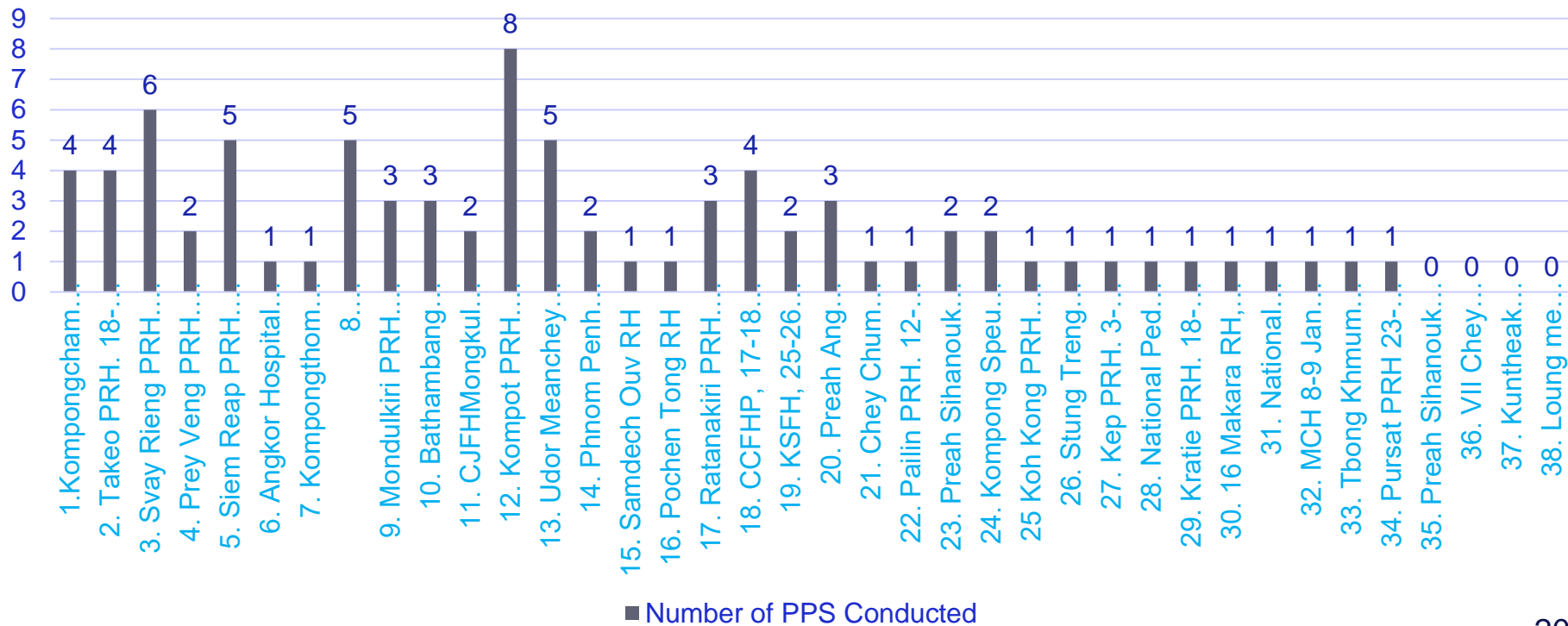
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២០១៩-២០២៣

មេធាវីសម្ព័ន្ធរបស់គណៈកម្មការសម្របសម្រួលសម្រាប់ការថែទាំព្យាបាលវេជ្ជសាស្ត្រថ្នាក់ជាតិ **(សេចក្តីសម្រេចលេខ០០៣៩ អបស.មព ចុះថ្ងៃទី១៧ ខែតុលា ឆ្នាំ២០២៣)**



AMS Working Groups of Municipal and PRH where National AMS Guidelines implemented, focused on PPS (RedCap System Recorded) Jan 2025

Number of PPS Conducted 28 Referral Hospitals (CPA1: 2;)





THANKS!