

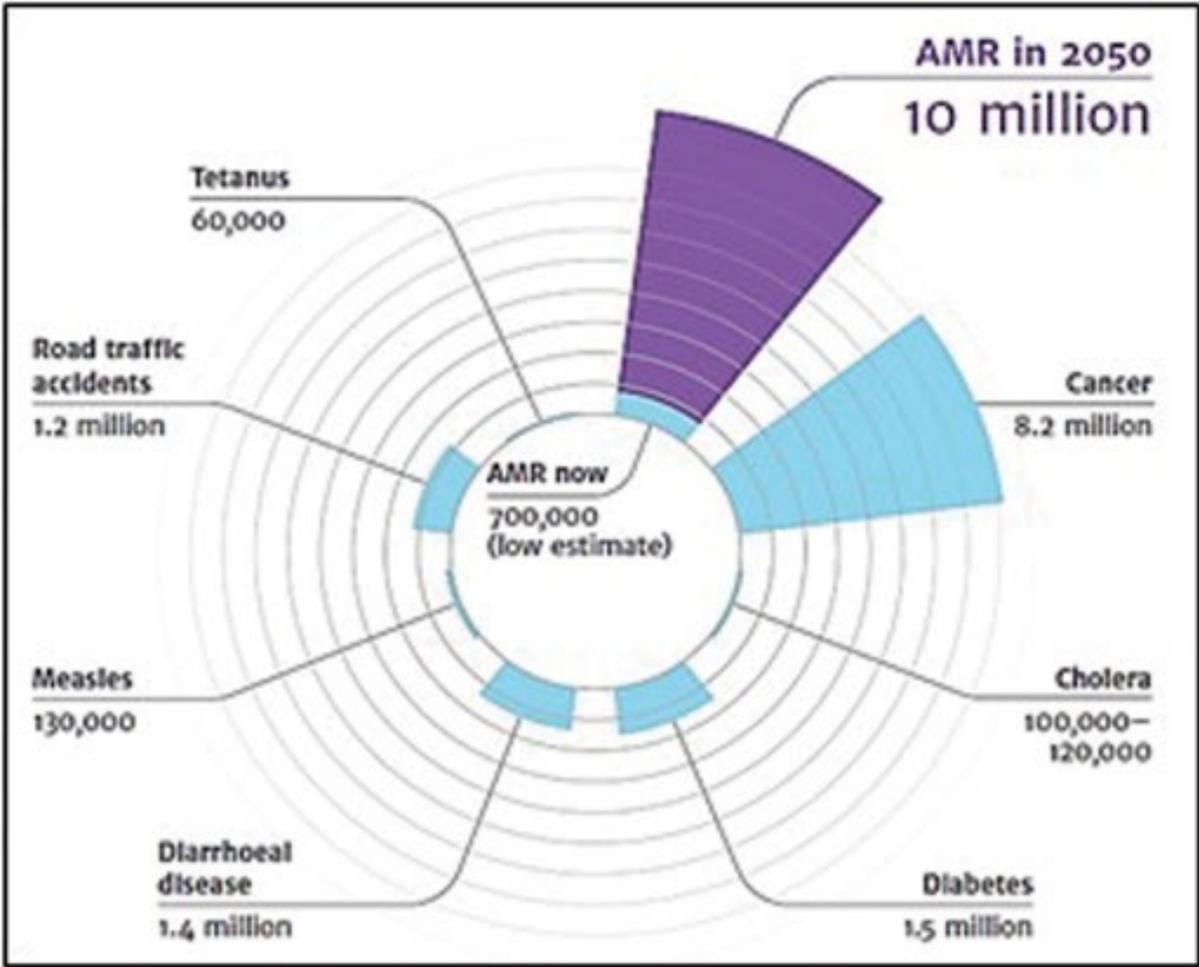
Antibiogo



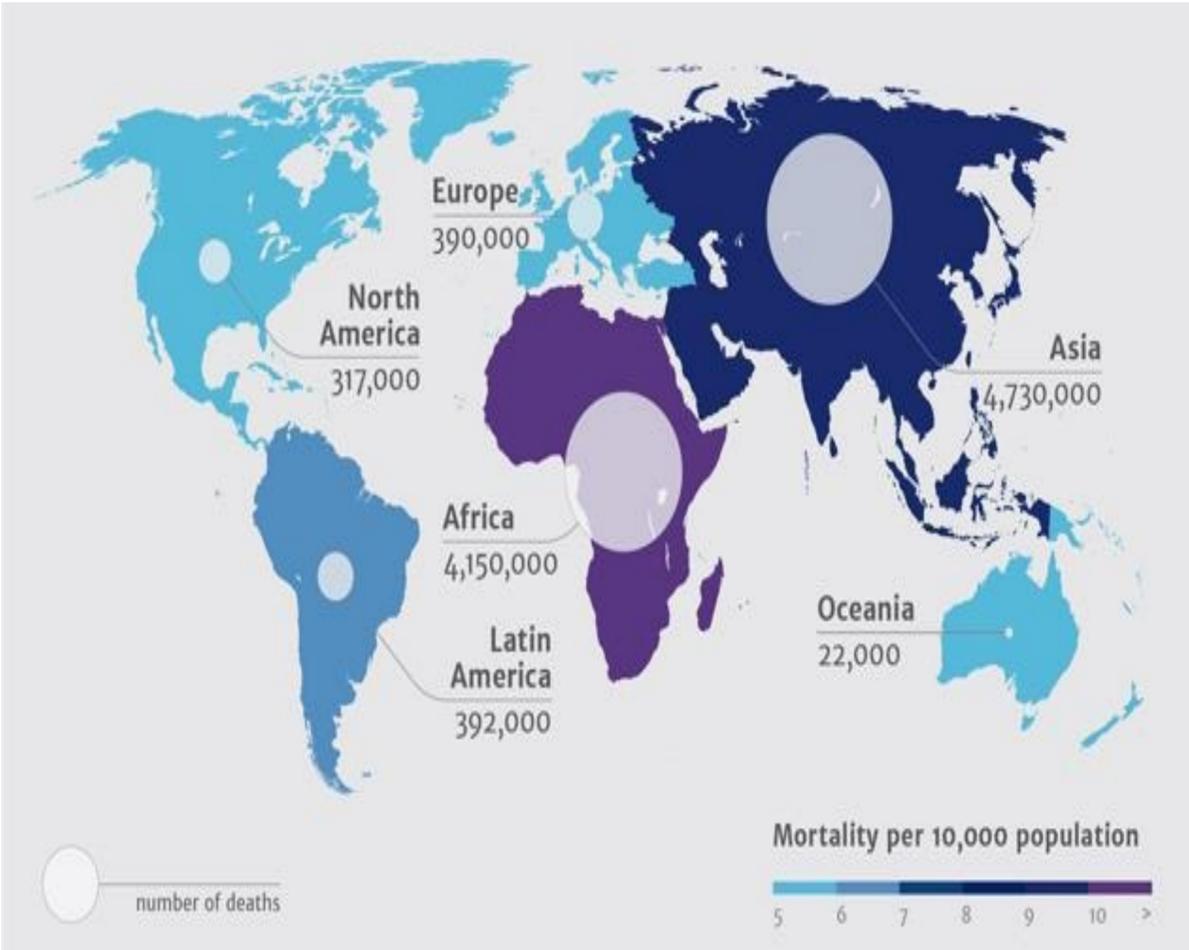
Smartphone based application to tackle antibiotic resistance in LMIC

Nada Malou · Mai. Al Asmar, Rasheed. Fakhri, Nadia. Badaro, Rupa. Kanapathipilai, Philippe. Cavaller, Andrew. Lover, Shazeer. Majeed, Yvan. Caspard, Clara. Nordon

Antimicrobial Resistance



TACKLING DRUG-RESISTANT INFECTIONS GLOBALLY: FINAL REPORT AND RECOMMENDATIONS The Review on Antimicrobial Resistance. 2014



Sugden *et al.* 2016

AMR in LMIC: the invisible threat

- The 2014 Antimicrobial Resistance Global Report on Surveillance: the largest gaps in the obtained surveillance data were seen in Africa, the Middle East : (52%) of the countries of the Region returned surveillance data (**the lowest participation rate**)

Multidisciplinary drivers: Multidisciplinary solutions

Factors responsible

Antibiotic resistance happens when bacteria change and become resistant to the antibiotics used to treat the infections they cause.



Over-prescribing of antibiotics



Patients not finishing their treatment



Over-use of antibiotics in livestock and fish farming



Poor infection control in hospitals and clinics

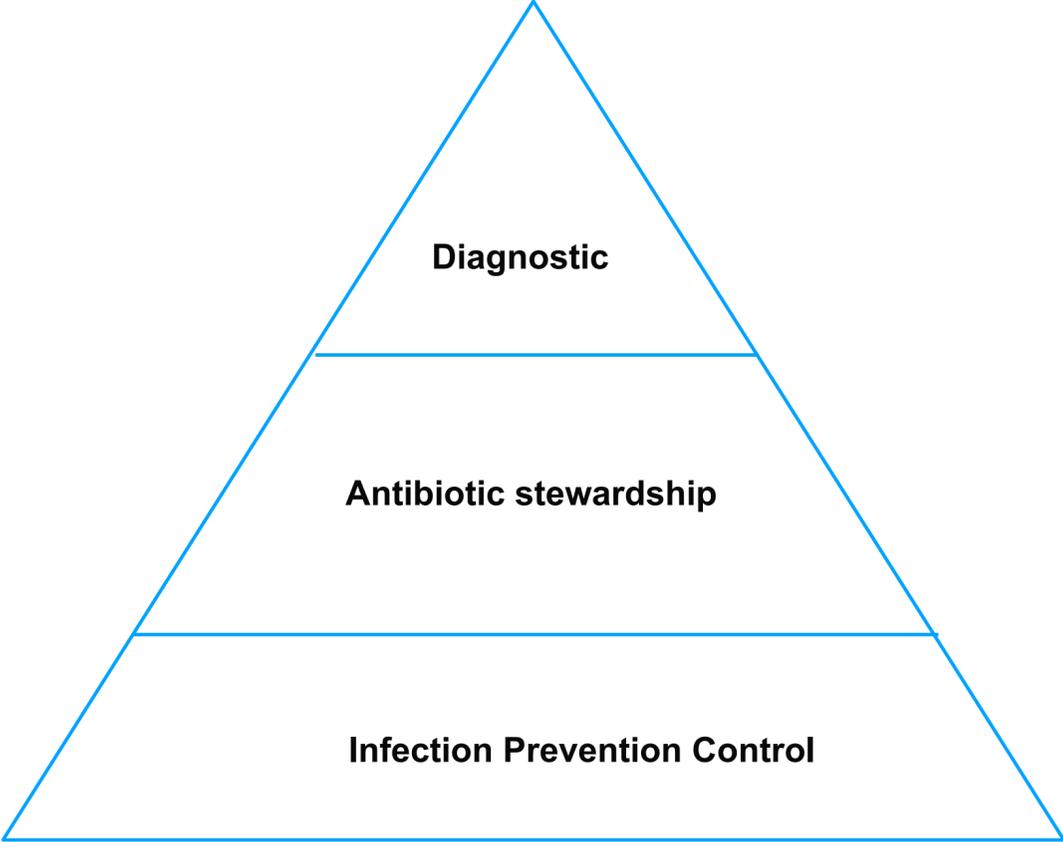


Lack of hygiene and poor sanitation



Lack of new antibiotics being developed

World Health Organisation Infographic (World Antibiotic Awareness Week 2017)



Barriers for access to Bacteriology laboratories

- Infrastructure requirements
- Supplies of reagents and consumables: cost, adaptability to local constraints
- Human Resources: Clinical microbiologist

MSF (France) strategy and experience in implementing bacteriology laboratories

Full MSF labs

- Koutiala (Mali)
- Amman(Jordan)
- Aden (Yemen)
- Bangui (CAR)
- Liberia (Monrovia)

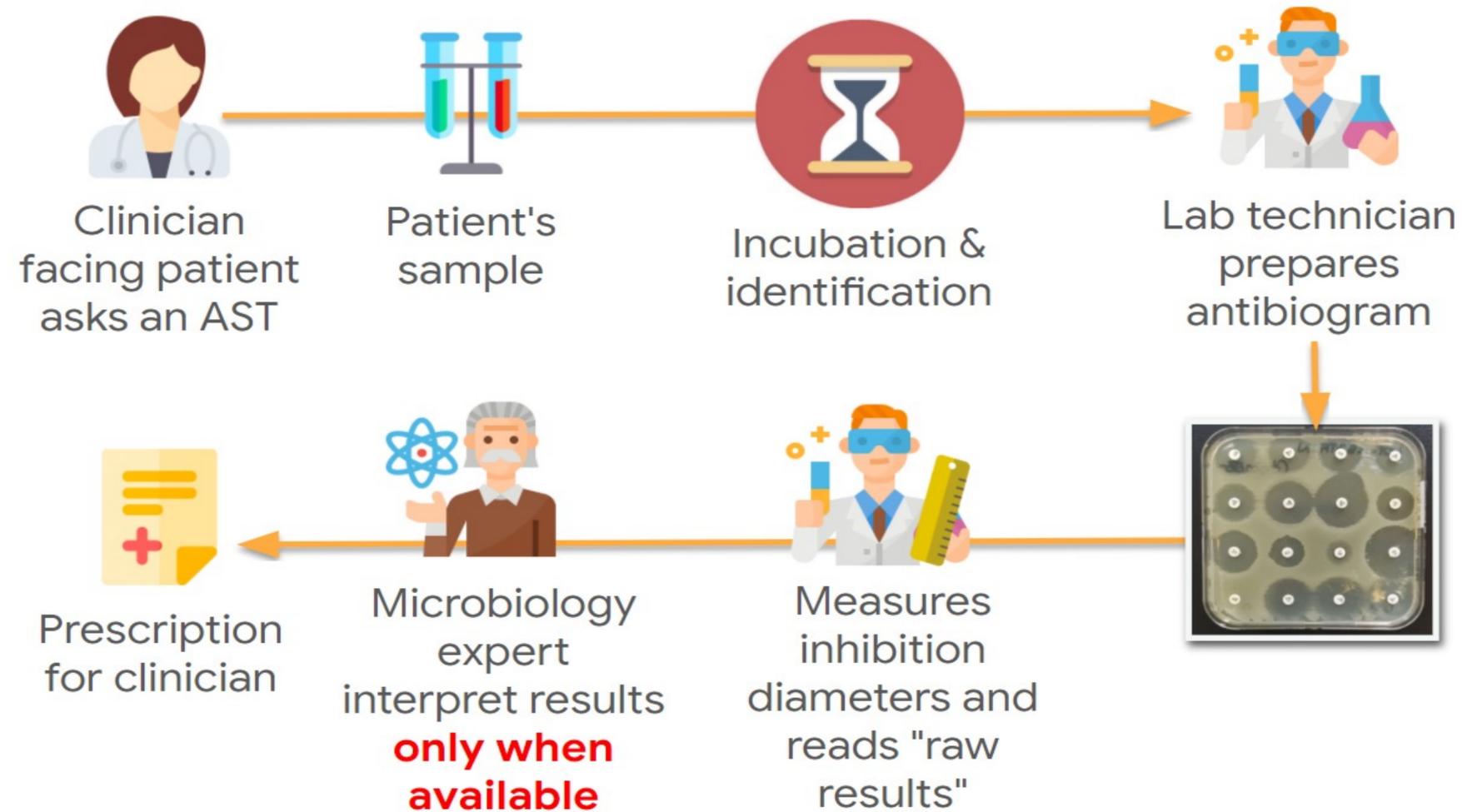
Support (local labs)

- Baghdad (Iraq)
- Gaza (Palestine)
- Zahle (Lebanon)
- Sanaa (Yemen)

External labs

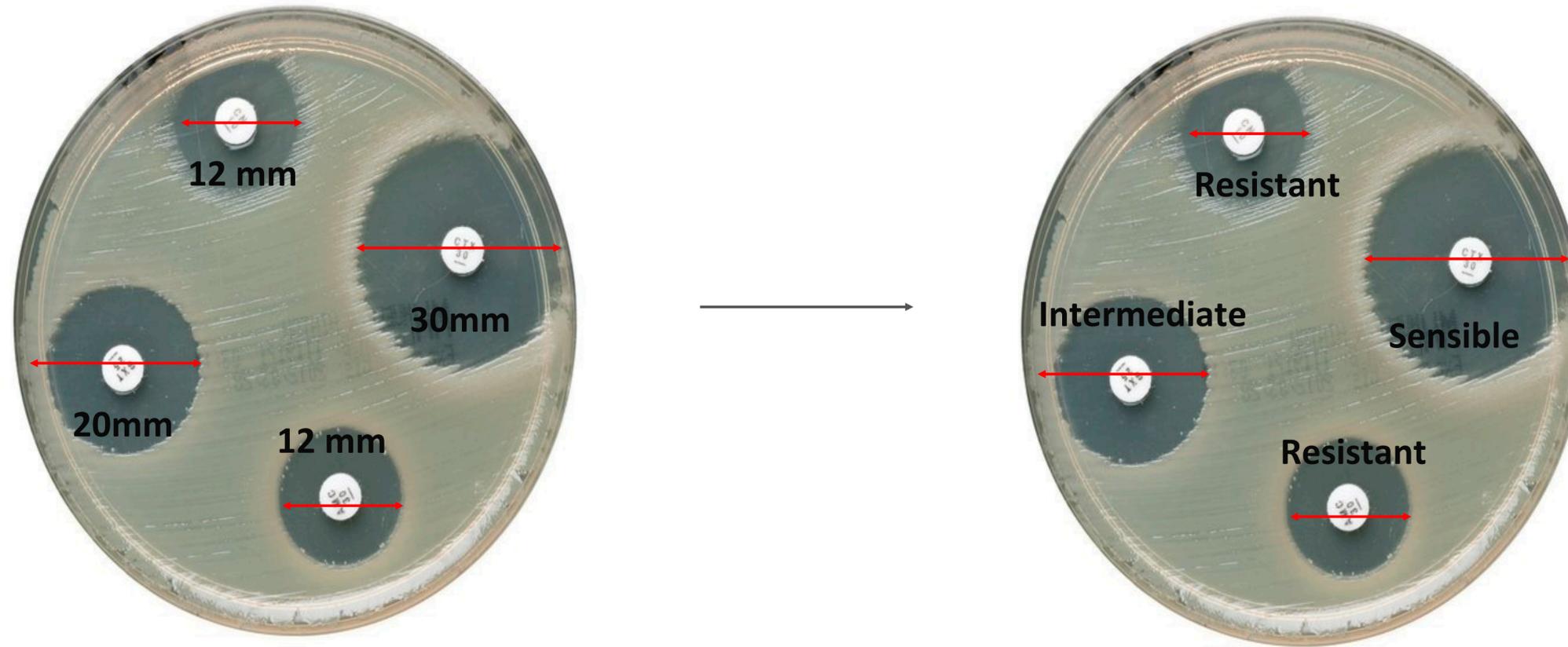
- Port au Prince (Haiti)
- Niger (Epicentre)

How to diagnose a bacterial infection?



AST: Antimicrobial Suceptibility Testing

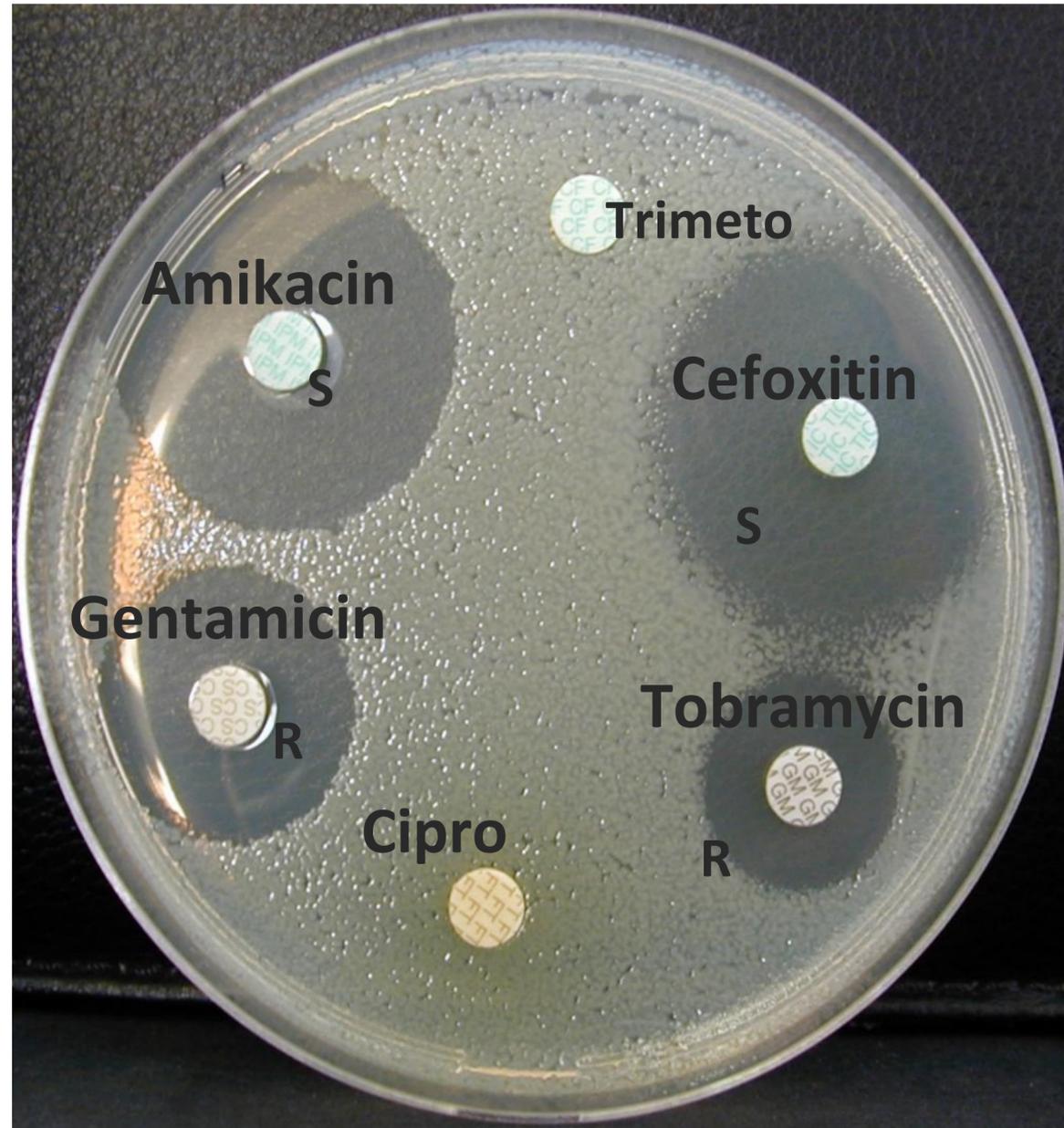
1. Measurement of Inhibition zone



Breakpoint provided by **EUCAST**: European Committee on Antimicrobial Susceptibility Testing

AST: Antimicrobial Suceptibility Testing

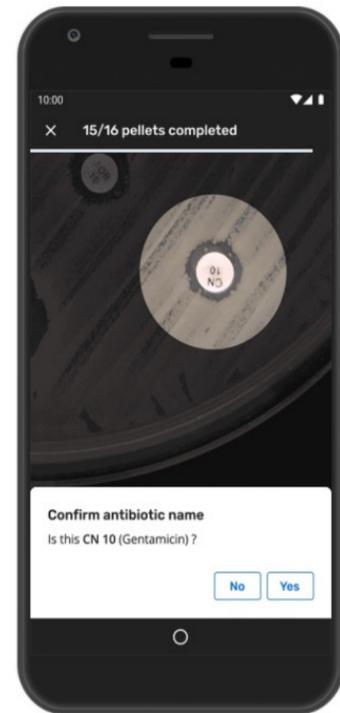
2. Interpretative reading



Antibiogo: smartphone-based app, open access, free and offline



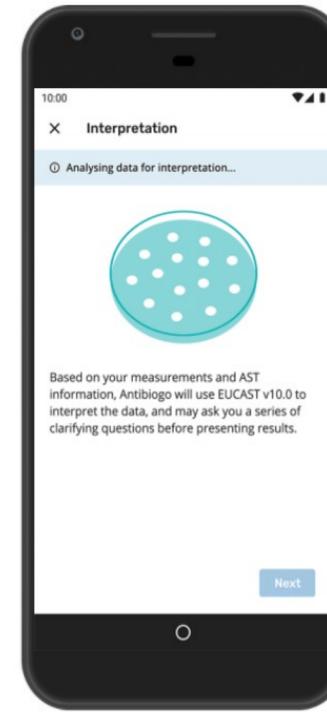
Taking picture



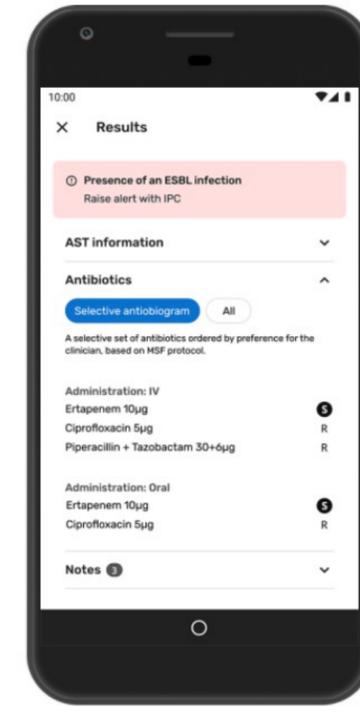
Semi automatic detection of antibiotic discs and measurement of inhibition zone



Image processing



Expert System Interpretation+ identification of resistance mechanism



Full results and selective reporting

Evaluation of AntibioGo performances

Image processing:

8 pathogenic bacteria

RSP Amman

Automatic measurement (Initial+adjusted)

AntibioGo

**Manual measurement performed by 8
laboratory technicians**

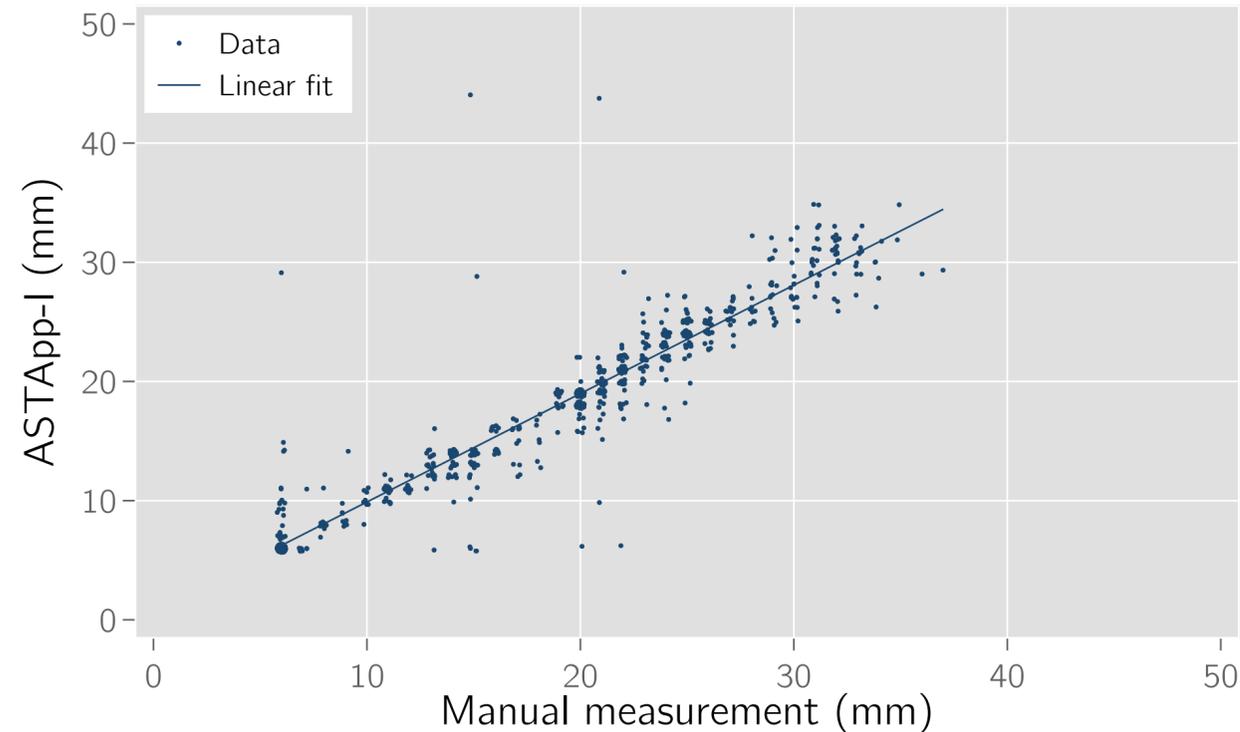
Expert System:

**71 Bacteria from Clinical samples
isolated from bones and tissues of
patients with suspicion of osteomyelitis
in RSP (Amman)**

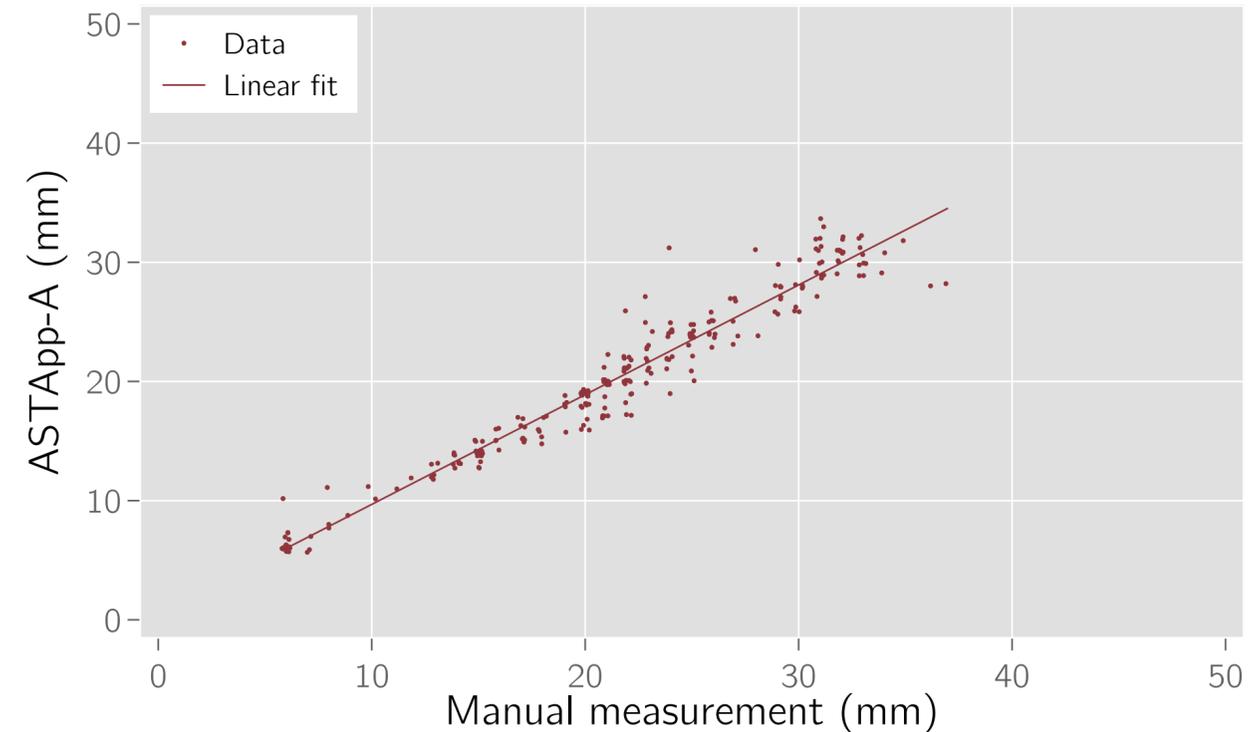
AntibioGo interpretation

External microbiologist interpretation

Image processing evaluation: Manual (Gold standard) VS Antibio



Note: Comparison of values from each individual observer
Concordance = 0.95 (95% CI: 0.94 to 0.96). (Jittered for clarity).



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Concordance = 0.96 (95% CI: 0.95 to 0.97). (Jittered for clarity).

- For each technician, measurements obtained from both Antibio modes are highly concordant with manual measurements.

Expert System evaluation. Antibioigo VS Microbiologist

A total of 1,073 antibiotic-pathogen pairs were assessed by both ES and an expert microbiologist

		Microbiologist			Total
Expert System		I	R	S	Total
	I	10	1	1	12
	R	4	500	11	515
	S	10	18	518	546
Total		24	519	530	1073



	Very major error	Major error	Minor error
Total	R (Gold standard) --- S (ES)	S (Gold standard) ---R (ES)	I (Gold standard) ---RS (ES)
N=45	18	11	16

- 95.8% concordance (95% CI: 94.6 – 97.0).
- Identification of main resistance mechanism: 90.6% concordance (95% CI: 87.9 – 93.3)
- A total of **45 combination** showed discordant readings

Challenges for the development of Antibioigo

- Translation of a medical/technical need into a technological solution
- Identification of partners for development
- Data protection: AST pictures, samples ID
- Keeping the user in the loop: NO black box
- Medical device: First time for MSF

Challenges for implementation of Antibioigo

- Different regulation from a country to another
- Acceptability /(Digital literacy)
- Certification process: which update will require a new clinical evaluation for CE IVD
- Identification of Partners for Hand over

Antibiogo: Next steps

- Second and third reading for discordant results
- Evaluation of clinical performances in 2 other sites: Koutiala (Mali), Dakar (Senegal)
- Finalization of CE IVD
- KAP survey
- Mapping of local regulation for deployment

Acknowledgments

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- *Andrew. Lover*
- *Shazeer. Majeed*
- *Yvan. Caspard*
- *Clara. Nordon*