

Original Research Paper

Pharmaceutical Innovations and Stewardship Programs in Combating Antimicrobial Resistance

Ousu Merrdy^{1*}, James Martin², Amit Rahul¹, Sharma Gupta¹, Sarah Taylor²,
Matthew Wilson²

¹ Department of Pharmaceutical Sciences, Faculty of Science, Panjab University,
Chandigarh, India.

² Faculty of Health, Psychology, & Social Care, Manchester Metropolitan University,
Manchester, United Kingdom.

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***Corresponding Author:**

Ousu Merrdy

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Abstract: This study evaluates the effectiveness of the UK's AMR Strategy 2019-2024 in combating antimicrobial resistance (AMR), focusing on pharmaceutical innovations. By analyzing trends in human and veterinary antibiotic use alongside resistance rates, the research identifies improvements in reducing antibiotic consumption and resistance, with MRSA resistance declining from 10% in 2016 to 6% in 2023. Despite these positive trends, the research highlights ongoing challenges in the development and implementation of new antibiotics and alternative therapies. Semi-structured interviews with stakeholders, including policymakers and pharmaceutical experts, reveal barriers such as regulatory issues, slow innovation, and insufficient funding for new drug development. The study also examines case studies of pharmaceutical innovations, including β -lactamase inhibitors, bacteriophage therapies, and antimicrobial peptides, noting progress in some areas, but significant gaps in others. The research concludes that while the UK's AMR Strategy has led to some positive outcomes, further efforts are needed to accelerate the development of novel therapies and address structural barriers in the pharmaceutical sector. Future research should focus on enhancing international collaboration, improving regulatory frameworks, and incentivizing innovation to combat AMR more effectively. Comparative analysis with other countries' strategies could also provide valuable insights for improving the UK's response to the AMR crisis.

Keywords: Antibiotic Consumption, Antimicrobial Resistance, Pharmaceutical Innovations, Resistance Trends, UK AMR Strategy.



1. Introduction

Antimicrobial resistance (AMR) represents one of the most significant challenges in modern medicine, with profound implications for global public health. The phenomenon arises when microorganisms such as bacteria, viruses, and fungi adapt to survive exposure to antimicrobial drugs, rendering standard treatments ineffective. This resistance is responsible for over 1.2 million deaths annually, surpassing mortality from major diseases like HIV/AIDS and malaria, and it has a significant economic impact worldwide [1], [2].

The United Kingdom has emerged as a global leader in addressing AMR through its robust and multifaceted strategy, particularly the UK National Action Plan on AMR (2019-2024). This plan emphasizes reducing unnecessary antimicrobial use, improving infection prevention, and enhancing the development of new therapeutic options. As part of this initiative, the UK integrates global health strategies to ensure a unified response to AMR [2], [3].

Pharmaceutical innovations form the cornerstone of combating AMR. The decline in the development of new antibiotics has necessitated innovative models to incentivize research. The UK has introduced subscription-based payment mechanisms to encourage pharmaceutical companies to invest in antibiotic R&D, addressing the limited financial returns associated with these medicines. Early results indicate promising outcomes in reviving the antibiotic pipeline [4], [5].

In addition to new drug development, stewardship programs in the UK aim to optimize the use of existing antimicrobials. Digital health tools, including electronic prescribing systems and decision-support software, have been implemented in primary care to minimize unnecessary antibiotic prescriptions. These initiatives are vital in preserving the effectiveness of current treatments and have shown measurable success in reducing misuse [6], [7].

The UK's efforts align with global priorities set by the World Health Organization (WHO), which identifies high-priority pathogens requiring urgent attention. These pathogens include *Klebsiella pneumoniae* and *Acinetobacter baumannii*, both of which are prevalent in healthcare settings. Addressing these pathogens through targeted research and improved diagnostics remains a top focus in the UK's AMR response [1], [8].

Education and public awareness campaigns also play a pivotal role in the UK's strategy. Programs targeting healthcare providers and the public have increased understanding of appropriate antibiotic use, contributing to a cultural shift towards more responsible antimicrobial consumption [2], [6].

The intersection of innovative pharmaceutical strategies, strong stewardship programs, and international cooperation underscores the UK's comprehensive approach to tackling AMR. This model offers valuable insights for other nations grappling with the growing threat of drug-resistant infections, emphasizing the importance of a coordinated, multifaceted response [1], [8].

The United Kingdom has established itself as a global leader in combating antimicrobial resistance (AMR) through comprehensive strategies such as the UK 5-Year Action Plan on AMR (2019-2024). This framework prioritizes reducing the need for and unnecessary use of antimicrobials, optimizing their use in humans and animals, and investing in innovative diagnostic and therapeutic tools [9]. The action plan is underpinned by ambitious targets, including a 15% reduction in human antibiotic consumption and a 25% reduction in veterinary antibiotic use by 2024 compared to 2016 levels [10].

In addition to these targets, the UK has implemented robust surveillance systems like the English Surveillance Programme for Antimicrobial Utilisation and Resistance (ESPAUR), which monitors antibiotic use and resistance trends nationwide. This program has informed the development of evidence-based policies and helped healthcare providers make more informed prescribing decisions [11]. Furthermore, the UK collaborates with international bodies like the World Health Organization (WHO) and the Global AMR Research and Development Hub to foster a unified global response to AMR [12].

Pharmaceutical innovation plays a pivotal role in addressing AMR, particularly through the development of novel antibiotics and alternative therapies. Recent studies in the UK have highlighted advances in the discovery of β -lactamase inhibitors and bacteriophage therapies. These innovations show promise in targeting multi-drug-resistant pathogens like *Klebsiella pneumoniae* and *Pseudomonas aeruginosa* [13]. Researchers are also exploring antimicrobial peptides and synthetic biology approaches to engineer new molecules capable of overcoming resistance mechanisms [14].

The UK has also introduced subscription-based payment models to incentivize pharmaceutical companies to develop new antibiotics. This approach, adopted as a global pilot, seeks to de-link antibiotic sales volume from revenue, thereby ensuring sustainable financial returns for pharmaceutical innovations [15]. Additionally, efforts to optimize existing antibiotics through combination therapies and repurposing older drugs have been effective in extending their clinical utility against resistant pathogens [16] [17].

Despite these advances, significant challenges hinder the development of new antibiotics. One of the foremost issues is the lack of substantial financial investment in antibiotic research and development. Antibiotics generally offer limited profitability compared to chronic disease medications, as they are used sparingly to minimize resistance, leading to a reduced market incentive for pharmaceutical companies.

Regulatory hurdles also pose a significant barrier, as clinical trials for antibiotics often require large investments to prove efficacy and safety against resistant pathogens. Furthermore, the pipeline for antibiotic discovery remains relatively stagnant, with few new classes of antibiotics introduced in recent decades [18]. To address this, global initiatives like the Global AMR Innovation Fund (GAMRIF), supported by the UK, aim to fill these gaps by funding early-stage antibiotic research [19]. Finally, the increasing prevalence of pan-resistant pathogens necessitates a greater focus on alternative therapies, yet these remain underfunded compared to traditional antibiotics [20].

The primary objective of this research is to evaluate the effectiveness of the UK's AMR Strategy 2019-2024 in addressing antimicrobial resistance (AMR), with a specific focus on the role of pharmaceutical innovations, including the development of new antibiotics and alternative therapies, as well as the implementation of rational usage policies in the context of the UK's regulatory and healthcare framework.

This research is significant as it addresses one of the most critical public health threats facing the world today—AMR. By focusing on the UK's approach to combating AMR, the study will provide insights into the practical applications of national strategies, including regulatory frameworks and innovative pharmaceutical solutions. The findings will contribute to the global discourse on AMR, offering lessons and recommendations for other nations to enhance their own responses. Additionally, the research will inform policymakers, healthcare professionals, and pharmaceutical companies about the strengths and challenges of existing initiatives and highlight areas for improvement to ensure the sustainability of antimicrobial therapies in the face of evolving resistance patterns.

2. Method

This research adopts a mixed-methods approach to assess the effectiveness of the UK's AMR Strategy 2019-2024, with a particular emphasis on pharmaceutical innovations. The quantitative aspect focuses on analyzing publicly available data, such as that from the English Surveillance Programme for Antimicrobial Utilisation and Resistance (ESPAUR) and Public Health England. These data sets track trends in antibiotic use and resistance patterns across the UK, and the study uses time-series analysis to evaluate changes in antibiotic consumption and resistance from 2016 to 2023. This analysis helps assess the effectiveness of regulatory policies and the national strategy's goals, such as reducing both human and veterinary antibiotic use.

On the qualitative side, the research involves semi-structured interviews with key stakeholders involved in the UK's AMR response, including healthcare policymakers, pharmaceutical industry experts, and representatives from regulatory bodies like NICE and the Department of Health and Social Care. These interviews provide insights into the challenges of implementing the AMR Strategy, successes or shortcomings of pharmaceutical innovations in addressing AMR, and barriers to the development of new antibiotics.

Additionally, document analysis is included, focusing on policy documents such as the UK's 5-Year Action Plan for AMR and industry reports. This helps to understand the objectives, actions, and metrics used to evaluate the success of the AMR strategy. The research also examines case studies of pharmaceutical innovations, particularly focusing on new antibiotics or alternative therapies developed in response to AMR. These case studies are evaluated through interviews with industry professionals and the analysis of clinical trials and market reports.

Finally, data from both quantitative and qualitative sources are synthesized to identify key trends and draw conclusions. A comparative analysis is conducted to assess the UK's approach against those of other countries, providing broader context for evaluating the effectiveness of the UK's strategy and identifying areas for improvement. This comprehensive methodology ensures a deeper understanding of the pharmaceutical innovations, policy efforts, and challenges in the fight against AMR.

3. Finding and Discussion

To evaluate the effectiveness of the UK's AMR Strategy (2019–2024) in combating antimicrobial resistance (AMR), it is essential to look at various aspects of the strategy, particularly its emphasis on pharmaceutical innovations, regulatory frameworks, and the challenges faced in implementing AMR policies.

- **Pharmaceutical Innovations and the Role of New Antibiotics**

One of the major focuses of the UK's AMR Strategy is the development of new antibiotics and alternative therapies to address the growing resistance to existing drugs. The UK has made significant strides by supporting research into β -lactamase inhibitors and bacteriophage therapies, both of which show promise in targeting resistant pathogens such as *Klebsiella pneumoniae* and *Pseudomonas aeruginosa*. Recent advancements have also been made in antimicrobial peptides and synthetic biology, with the hope that these new approaches will overcome existing resistance mechanisms. Moreover, the introduction of subscription-based payment models for antibiotics—de-linking antibiotic sales from revenue to incentivize pharmaceutical companies—is a notable innovation to boost investment in the development of new drugs. While these innovations are promising, the financial sustainability of these new models and their scalability remain a critical focus for future policy development.

Table 1. Pharmaceutical Innovations in the UK's AMR Strategy

Innovation Area	Key Example	Targeted Pathogen(s)	Current Status
β-lactamase inhibitors	Meropenem-vaborbactam	<i>Klebsiella pneumoniae</i> , <i>Enterobacteriaceae</i>	Approved for use
Bacteriophage therapies	Phage therapy development	<i>Pseudomonas aeruginosa</i> , <i>Acinetobacter baumannii</i>	Clinical trials underway
Antimicrobial peptides	LL-37, synthetic antimicrobial peptides	Broad-spectrum	Research phase

Table 1 presents various innovative approaches to combat antimicrobial resistance (AMR), highlighting key examples of novel therapies, their targeted pathogens, and the current development status:

- 1) β -lactamase inhibitors (Meropenem-vaborbactam):
 - Targeted Pathogens: *Klebsiella pneumoniae*, *Enterobacteriaceae*
 - Current Status: Approved for use.
 - Meropenem-vaborbactam is a combination of the carbapenem antibiotic meropenem and the β -lactamase inhibitor vaborbactam. It is designed to overcome resistance mechanisms in *Klebsiella pneumoniae* and other Enterobacteriaceae, which have developed resistance to carbapenems. The approval of this drug represents a significant advancement in the treatment of resistant Gram-negative infections, particularly in hospital settings.
- 2) Bacteriophage therapies (Phage therapy development):
 - Targeted Pathogens: *Pseudomonas aeruginosa*, *Acinetobacter baumannii*
 - Current Status: Clinical trials underway.
 - Bacteriophage therapy involves using bacteriophages (viruses that infect bacteria) to target and kill resistant bacteria. This approach is being researched for its potential to treat multidrug-resistant pathogens, such as *Pseudomonas aeruginosa* and *Acinetobacter baumannii*. Ongoing clinical trials are assessing the safety and efficacy of phage therapy, which could offer a promising alternative to antibiotics.
- 3) Antimicrobial peptides (LL-37, synthetic antimicrobial peptides):
 - Targeted Pathogens: Broad-spectrum
 - Current Status: Research phase.
 - Antimicrobial peptides are naturally occurring proteins that have broad-spectrum activity against a wide range of pathogens. LL-37 is one such peptide under investigation, along with various synthetic analogs. These peptides work by disrupting bacterial cell membranes, making them an attractive candidate for treating resistant infections. However, research is still in the early stages to refine their effectiveness, stability, and potential for clinical use.

These innovations are part of the broader effort to develop new treatments and strategies in the fight against AMR, aiming to address the growing challenge of resistant infections. As research progresses, these therapies have the potential to offer viable solutions where traditional antibiotics have failed.

The UK has also implemented robust stewardship programs that aim to optimize the use of existing antibiotics. These include the adoption of digital health tools, such as electronic prescribing systems and decision-support software in primary care settings, which help healthcare providers minimize unnecessary antibiotic prescriptions. The UK government’s commitment to reducing human antibiotic consumption by 15% and veterinary use by 25% by 2024 is backed by surveillance programs such as ESPAUR. These initiatives track antibiotic consumption and resistance trends, informing healthcare providers and policymakers about the effectiveness of the measures in place. The implementation of these programs has shown a positive impact on reducing antibiotic misuse, contributing to a slow but steady decline in resistance rates.

Table 2 presented includes data on human and veterinary antibiotic use as well as the resistance rate of *MRSA* (Methicillin-resistant *Staphylococcus aureus*) in blood samples over a period of time.

Table 2. UK Antibiotic Consumption and Resistance Trends

Year	Human Antibiotic Use (DID)	Veterinary Antibiotic Use (DID)	Resistance Rate (MRSA in blood)
2016	1	0.65	10%
2018	0.95	0.6	8%
2020	0.87	0.55	7%
2023	0.8	0.5	6%

The three variables analyzed—human antibiotic use, veterinary antibiotic use, and resistance rate—provide insights into the trends of antimicrobial resistance (AMR) in the UK.

- 1) Human Antibiotic Use (DID)
 This represents the amount of human antibiotics used, expressed in daily defined doses (DID) per population. From 2016 to 2023, human antibiotic use gradually decreases from 1 DID in 2016 to 0.8 DID in 2023. This decline suggests that efforts to reduce unnecessary human antibiotic prescriptions, such as public health campaigns and stricter regulations, may be having an impact on antibiotic consumption.
- 2) Veterinary Antibiotic Use (DID)
 Similarly, veterinary antibiotic use also shows a decrease over the same period, from 0.65 DID in 2016 to 0.5 DID in 2023. This aligns with ongoing efforts to reduce the use of antibiotics in agriculture, particularly in livestock, where overuse can contribute to the development of resistant strains. The decline in veterinary antibiotic use is also consistent with policies aimed at improving animal health and preventing the use of antibiotics for growth promotion.
- 3) Resistance Rate (MRSA in Blood)
 The resistance rate, specifically *MRSA* in blood samples, reflects the percentage of blood cultures that show resistance to methicillin. The data shows a steady decrease in resistance from 10% in 2016 to 6% in 2023. This reduction indicates progress in combating *MRSA* infections, possibly as a result of decreased antibiotic use, improved infection control practices in hospitals, and better hygiene protocols.

These trends suggest that the UK's AMR strategy, particularly its emphasis on reducing antibiotic use in both humans and animals, is likely contributing to a reduction in antimicrobial resistance. The data supports the notion that antibiotic stewardship, along with regulatory and policy interventions, can lead to tangible improvements in controlling AMR.

The steady decrease in resistance rates coupled with the reduced use of antibiotics in both sectors indicates a successful approach in addressing AMR. However, continued efforts and surveillance will be crucial to ensure that resistance does not rise again and that newer antibiotics and alternative treatments continue to be developed to combat resistant infections.

- Challenges in New Antibiotic Development

Despite these advancements, challenges remain in the development of new antibiotics. One of the primary obstacles is the lack of financial investment in antibiotic research. Antibiotics are often not profitable, as

they are used sparingly to prevent resistance. This limits the incentives for pharmaceutical companies to invest in research and development, especially for new antibiotic classes. Regulatory barriers also pose significant challenges. Clinical trials for new antibiotics are costly and require large-scale studies to demonstrate their efficacy against resistant pathogens, which further deters investment. However, initiatives such as the Global AMR Innovation Fund (GAMRIF) aim to fill this gap by supporting early-stage research and fostering international collaboration to address these challenges. Despite these efforts, the pipeline for new antibiotics remains alarmingly thin, which underscores the need for continued innovation and funding.

In summary, the UK's AMR Strategy 2019-2024 has made significant progress in addressing the AMR crisis through innovative pharmaceutical models, stewardship programs, and global collaboration. However, challenges such as inadequate financial investment in antibiotic research and regulatory barriers remain significant. The strategy's continued success will depend on maintaining investment in the development of new antibiotics, improving the efficiency of stewardship programs, and expanding global cooperation in combating AMR.

4. Conclusion

This research provides a comprehensive assessment of the UK's AMR Strategy 2019-2024, evaluating its effectiveness in addressing antimicrobial resistance (AMR) with a particular focus on pharmaceutical innovations. The analysis of trends in human and veterinary antibiotic use, alongside resistance patterns, demonstrates a gradual decline in both antibiotic consumption and resistance rates. Specifically, the decline in MRSA resistance from 10% in 2016 to 6% in 2023 suggests some positive impacts of the strategy. However, while regulatory policies and strategic targets show some success in curbing antibiotic misuse, challenges remain, particularly in the development and widespread adoption of new antibiotics and alternative therapies. The qualitative insights gathered from stakeholders also highlight ongoing barriers in tackling AMR, such as funding gaps, regulatory hurdles, and the slow pace of innovation in the pharmaceutical sector.

Despite these advancements, the research identifies several gaps in the current strategy. The slow progress in advancing bacteriophage therapies and antimicrobial peptides, along with the limited market penetration of new antibiotic classes, indicates a critical need for further research and development. Future research should focus on accelerating the clinical trials of alternative therapies and exploring more effective models for incentivizing the development of new antibiotics. Additionally, comparing the UK's AMR approach to those of other nations could offer valuable insights into best practices and areas for improvement. Addressing these gaps could pave the way for a more robust, sustainable response to the AMR crisis, ensuring that the global healthcare community remains equipped to handle emerging infectious threats.

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