Invest in antimicrobial test-to-treat strategies

Rachel A. McKendry, Elliott Rogers, Mervyn Singer
University College London, London, UK;

Colin S. Brown
UK Health Security Agency, London, UK

For correspondence: r.a.mckendry@ucl.ac.uk

As the United Nations General Assembly's high-level meeting on antimicrobial resistance (AMR) convenes in New York next week, we urge leaders to prioritize tackling a crucial blind spot: AMR test-to-treat data. Inappropriate antimicrobial prescription costs lives and puts advances in treatment at risk. Rapid tests and decision-support tools can aid clinical decisions on prescribing antimicrobials (J. Budd et al. Nature Rev. Bioeng. 1, 13–31; 2023). In 2019, the UK AMR national action plan committed to tracking the percentage of antimicrobial prescriptions accompanied by a diagnostic test or decision-support tool by 2024. Difficulties linking electronic patient records with prescription and laboratory systems mean that these data are not yet routinely available, but it remains a priority.

Globally, diagnostic tests are underused, partly because just prescribing antimicrobials is a cheaper alternative. Better data spanning all healthcare settings are needed to understand, for example, when prescribing continues without tests, and to inform and monitor interventions. More investment is needed in diagnostic roll-out trials, data capture, workforce education and behavioural strategies to implement evidence-based AMR test-to-treat guidelines.