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## Introduction

In the realm of modern medicine, antibiotics have been a cornerstone of treatment for bacterial infections since the discovery of penicillin in 1928. These wonder drugs have saved countless lives and revolutionized healthcare. However, their effectiveness is under siege from a relentless adversary: antibiotic resistance. The rise of drug-resistant bacteria poses a serious threat to healthcare, necessitating a multifaceted response to combat this global challenge [1].

Antibiotic resistance poses a formidable challenge in healthcare, threatening the efficacy of essential treatments. To combat this growing peril, a multifaceted approach is imperative. Healthcare facilities must prioritize antibiotic stewardship, ensuring responsible drug use. Stringent infection control measures are crucial to halt the spread of resistant bacteria. Vigilant surveillance and reporting, coupled with robust research and development efforts, will drive progress. Furthermore, educating healthcare professionals and the public on responsible antibiotic use and resistance prevention is paramount. In this united effort, we can safeguard the future of medicine by preserving the effectiveness of antibiotics and protecting patient well-being [2].

Antibiotics have long been hailed as one of the greatest medical achievements of the 20th century, revolutionizing our ability to treat bacterial infections and save lives. However, the very success of antibiotics has led to an emerging crisis that threatens the foundation of modern medicine: antibiotic resistance. Anti Microbial Resistance (AMR) has emerged as an alarming global threat to public health. The challenge it poses demands a cohesive and multifaceted strategy. While significant strides have been made through national and international initiatives to tackle this issue, there remains much work ahead [3].

Enhancing funding and regulatory frameworks is paramount to support the development and implementation of antimicrobial stewardship policies and programs. These programs are essential for optimizing the use of antimicrobials in healthcare settings and curbing the emergence of resistance. In recognition of the pressing dangers posed by Antimicrobial Resistance (AMR), the Centers for Disease Control and Prevention (CDC) released a report, most recently updated in 2019. This report serves as a crucial tool to shed light on the significant challenges tied to AMR and classifies resistant pathogens into three categories: urgent, serious, and concerning. Antibiotic resistance occurs when bacteria evolve to withstand the drugs designed to kill them. This resistance develops due to various factors, including the overuse and misuse of antibiotics in healthcare settings, agriculture, and even everyday life [4].

In addition to specific curriculum content, the integration of Interprofessional collaboration and leadership into educational interventions for teaching antimicrobial stewardship and addressing antimicrobial resistance is absolutely crucial. Simulation techniques have proven invaluable in both postgraduate and undergraduate educational settings to enhance comprehension of these vital concepts while fostering collaboration among healthcare professionals. For instance, a notable infectious diseases fellowship program devised a simulation series that honed in on the quality improvement and population-focused aspects of antimicrobial stewardship. In this program, various multidisciplinary roles were assigned for the simulations, and faculty members led moderated discussions. Feedback from the participants indicated that faculty members found the program enriching and informative, identifying knowledge gaps, while the fellows found it engaging and confidence-boosting in their pursuit of active roles in Antimicrobial Stewardship Programs (ASPs). Looking ahead, it is imperative that educational efforts expand to encompass a broader understanding of national and international policies pertaining to antimicrobial resistance, facilitated through the innovative utilization of simulation techniques and case-based modules [5].

## Conclusion

The fight against antibiotic resistance in healthcare is a race against time. The responsible use of antibiotics, coupled with robust infection control measures, research, and public awareness, represents our best defense against the looming threat of drug-resistant infections. Preserving the efficacy of antibiotics is not just a healthcare imperative; it's a commitment to safeguarding public health and the future of medicine.

## References

- 1. Vallabhaneni S, Jackson BR, Chiller TM. Candida auris: An emerging antimicrobial resistance threat. Ann Intern Med. 2019;171(6):432-3.
- 2. Cockerill III FR. Genetic methods for assessing antimicrobial resistance. Antimicrob Agents Chemother. 1999;43(2):199-212.

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- Karmarkar EN, O'Donnell K, Prestel C, et al. Rapid assessment and containment of Candida auris transmission in postacute care settings—Orange County, California, 2019. Ann Intern Med. 2021;174(11):1554-62.
- 4. Spivak E.S., Hanson K.E. Candida auris: An Emerging

Fungal Pathogen. J Clin Microbiol. 2018;56(2):10-128.

5. Cyr SS, Barbee L, Workowski KA, et al. Update to CDC's treatment guidelines for gonococcal infection, 2020. Morb Mortal Wkly Rep. 2020;69(50):1911.

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