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	Soggetti	Drug resistance Periodicals Drug resistance Anti-infective agents - Classification Drug resistance in microorganisms - Effect of drugs on Risk management Risk Risk Management Information Science Drug Resistance Microbiological Phenomena Epidemiologic Measurements Therapeutic Uses Probability Pharmacologic Actions Pharmacological Phenomena Public Health Organization and Administration Statistics as Topic Health Services Administration Environment and Public Health Chemical Actions and Uses Physiological Phenomena Health Care Evaluation Mechanisms Health Care Epidemiologic Methods Drug Therapy Quality of Health Care Investigative Techniques
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	Health Care Quality, Access, and Evaluation Anti-Infective Agents Classification Risk Assessment Drug Resistance, Microbial Biology Health & Biological Sciences Microbiology & Immunology Electronic books. Publication Formats Technical Report
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Note generali	Description based upon print version of record.
Nota di contenuto	Cover: Contents; Foreword; Summary; Acknowledgements; Abbreviations; Introduction; SECTION 01 Resistance to antibacterial drugs; 1.1 Background; 1.1.1 Limitations; 1.2 Regional surveillance of antibacterial resistance; 1.2.1 WHO African Region; 1.2.2 WHO Region of the Americas; 1.2.3 WHO Eastern Mediterranean Region; 1.2.4 WHO European Region; 1.2.5 WHO South-East Asia Region; 1.2.6 WHO Western Pacific Region; 1.3 References; SECTION 02 Resistance to antibacterial drugs in selected bacteria of international concern; 2.1 Availability of national resistance data; 2.1.1 Key messages 2.2 Resistance data on specific pathogens2.2.1 Escherichia coli - resistance to third-generation cephalosporins and to fluoroquinolones; 2.2.2 Klebsiella pneumoniae - resistance to third-generation cephalosporins and to carbapenems; 2.2.3 Staphylococcus aureus - resistance to methicillin; 2.2.4 Streptococcus pneumoniae - resistance (non-susceptibility) to penicillin; 2.2.5 Nontyphoidal Salmonella - resistance to fluoroquinolones; 2.2.6 Shigella species - resistance to fluoroquinolones; 2.2.7 Neisseria gonorrhoeae - decreased susceptibility to third-generation cephalosporins; 2.3 References SECTION 03 The health and economic burden due to antibacterial resistance3.1 Methods; 3.2 Findings; 3.2.1 Health burden; 3.2.2 Economic burden; 3.3 Knowledge gaps; 3.4 Key messages; 3.5 References; SECTION 04 Surveillance of artimicrobial drug resistance in disease-specific programmes; 4.1 Tuberculosis; 4.1.1 Evolution of drug resistance in tuberculosis; 4.1.2 Surveillance of drug-resistant tuberculosis; 4.1.4 Notification of MDR-TB cases and enrolment on treatment 4.1.5 Public health implications: treatment outcomes for multidrug- resistance; 4.2.3 Global public health response to drug-resistant tuberculosis; 4.1.4 Notification of MDR-TB cases and enrolment on treatment 4.1.5 Public health implications; 4.1.4 Evolution of artimalarial drug resistance; 4.2.4 Key messages; 4.3 HIV; 4.3.1 Surveillance of anti-HIV drug resistance; 4.3.3 Clobal public he

	resistance in influenza viruses 4.4.2 Anti-influenza drug resistance4.4.3 Surveillance of anti-influenza drug resistance; 4.4.4 Public health implications of anti-influenza drug resistance; 4.4.5 Key messages; 4.5 References; SECTION 05 Surveillance of antimicrobial resistance in other areas; 5.1 Antibacterial resistance in food-producing animals and the food chain; 5.1.1 Ongoing surveillance of antimicrobial resistance in food-producing animals and food; 5.1.2 Integrated surveillance of antimicrobial resistance in foodborne bacteria; 5.1.3 Antimicrobials of particular importance in human and veterinary medicine 5.1.4 Implications for human health from zoonotic transmission of resistant bacteria and genetic material
Sommario/riassunto	This WHO report produced in collaboration withMember States and other partners provides as accuratea picture as is presently possible of the magnitude ofAMR and the current state of surveillance globally.The report focuses on antibacterial resistance (ABR)in common bacterial pathogens. Why? There is amajor gap in knowledge about the magnitude of thisproblem and such information is needed to guideurgent public health actions. ABR is complex andmultidimensional. It involves a range of resistancemechanisms affecting an ever-widening range ofbacteria most of which can cause a wide spectrumof disea