CODEX ALIMENTARIUS COMMISSION

Food and Agriculture Organization of the United Nations

World Health Organization

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JOINT FAO/WHO FOOD STANDARDS PROGRAMME

***AD HOC* CODEX INTERGOVERNMENTAL TASK FORCE ON ANTIMICROBIAL RESISTANCE**

Eighth Session

Comments of the Health for animal

Part 1 : Legal and regulatory definitions of prevention and control in different constituencies

Countries utilize a wide range of legislative and other texts in which they describe permissible applications of antibiotics for disease prevention and control (prophylaxis and metaphylaxis). This document contains legal definitions and approaches for 14 countries, regions and the OIE. The intention is to help discussions within Codex.

Common Ground

The approaches to prevention and control across these countries have significant commonalities:

1. All countries acknowledge that antimicrobials/antibiotics are used for different purposes: treatment, control, and prevention. They recognise that antimicrobials have a scientifically proven role to play in preventing animals from becoming sick.
2. All countries have similar rules and conditions of application: evaluate risk of disease development and spread, adhere to withdrawal requirements, minimize use as much as possible, use under veterinary oversight, and limitations on the use of certain classes.
3. All countries recognize that prophylaxis and metaphylaxis are applicable to groups of animals or to individual animals: with approaches in one area limiting prophylactic use of antibiotics to individual animals.
4. All countries give a central role to veterinarians to use their professional judgement regarding antibiotic use.
5. Countries use different words to describe the same concepts. Very few have definitions of the concepts in their legislation, but all describe the practises in recognised and available texts.

1. In the **European Union**, the use of antimicrobial veterinary medicinal products allows metaphylaxis and prophylaxis under specific and well-defined conditions. Metaphylactic use of antibiotics is permitted only when there is a diagnosis of an infectious disease by a veterinarian, a high risk of spread of an infection or of an infectious disease in a group of animals, and there are no appropriate available alternatives. Prophylactic use of antimicrobials is allowed in individual animals, or a restricted number of animals, when "…*the risk for infection is very high and its consequences are likely to be severe*"[1] and administration of antibiotics is in individual animals only.
2. In the **United States,** FDA, and the American Veterinary Medical Association (AVMA) state[2]: *"Prevention is the administration of an antimicrobial to an individual animal to mitigate the risk for acquiring disease or infection that is anticipated based on history, clinical judgment, or epidemiological knowledge." "…On a population basis, prevention is the administration of an antimicrobial to a group of animals, none of which have evidence of disease or infection, when transmission of existing undiagnosed infections, or the introduction of pathogens, is anticipated based on history, clinical judgment or epidemiological knowledge. 'Control is the administration of an antimicrobial to an individual animal with a subclinical infection to reduce the risk of the infection becoming clinically apparent, spreading to other tissues or organs, or being transmitted to other individuals. On a population basis, control is the use of antimicrobials to reduce the incidence of infectious disease in a group of animals that already has some individuals with evidence of infectious disease or evidence of infection.* Prevention and control are allowed when prescribed by a veterinarian. Guidelines for judicious therapeutic use are published by species-specific veterinary associations.

[1] Regulation 2019/6

[2] https://www.avma.org/resources-tools/avma-policies/avma-definitions-antimicrobial-use-treatment-control-and-prevention

3. In **Brazil,** the Ministry of Agriculture, Livestock and Food Supply (MAPA) applies the following definitions, closely based on the OIE definitions agreed globally. "*To treat means to administer an antimicrobial agent to an individual or a group of animals showing clinical signs of an infectious disease; To control means to administer an antimicrobial agent to a group of animals containing sick animals and healthy animals (presumed to be infected), to minimize or resolve clinical signs and to prevent further spread of the disease, and to prevent means to administer an antimicrobial agent to an individual or a group of animals at risk of acquiring a specific infection or in a specific situation where infectious disease is likely to occur if the drug is not administered."*

4. In **Japan**, the prophylactic and metaphylactic uses of antibiotics are not stipulated in law and in general, the Japanese Ministry of Agriculture, Forestry and Fisheries (JMAFF) discourages the use of antibiotics in healthy animals. However, if the risk of spread of infectious disease is high in farms with diseased individual animals and depending on the status of the herd with regards to vaccination, history of infectious diseases on the farm, immune status, etc., and at the discretion of the attending veterinarian, early treatment is allowed under limited conditions.

5. In **Australia**, the use of antibiotics is permitted for treatment and disease control subject to product registration and label instructions. Prophylactic use (where disease is not yet present but would be expected in the absence of treatment) should only occur with antibiotics that are not critical for human health. The role of the veterinarian in Australia is central, and (s)he has the responsibility for making judgements regarding the health and welfare of the animal(s). The classes of antibiotics registered for use in animals is limited, especially for food-producing species. All antibiotics are restricted to prescription-only and use of antibiotics must occur under veterinary oversight - direct involvement of a registered veterinarian. Evidence-based best practice prescribing guidelines for all major livestock species are currently being developed to support responsible and judicious use. Australia is a federated state, and the application of federal law may vary slightly per territory or state, but the above principles are consistent in all jurisdictions.

6. In **India**, the concept of prevention is part of national legislation. The Drugs and Cosmetics Act defines antibiotics as *'…all medicines for internal or external use of human beings or animals and all substances intended to be used for or in the diagnosis, treatment, mitigation or prevention of any disease or disorder in human beings or animals…'.*[3]

7. In **China,** veterinary drugs refer to substances used for the prevention, treatment, and diagnosis of animal diseases or purposeful regulation of animal physiological functions. The Ministry of Agriculture and Rural Affairs does not have official definitions of metaphylaxis and prophylaxis in the veterinary drug regulation. Nonetheless, in the relevant technical guidelines, prophylaxis is described: Prevention is where the antibiotic can be administrated before or at the same time as infections. The words 'prevention' and 'treatment' are described in the labelling rules.

8. In **Canada,** the federal agency HealthCanada is responsible for the authorization and licensing of antimicrobials, but the federal government has no authority over the use of human or veterinary drugs once they have been approved for sale. Veterinarians are broadly entitled to prescribe drugs pursuant to the federal '*Food and Drugs Regulations'.* When a disease is diagnosed, reasonably suspected, or anticipated, veterinarians must prescribe the most appropriate treatment, which may include the use of antimicrobials, based on professional evaluation. The Canadian Veterinary Medical Association (CVMA) template of professional standards states: "*It is expected that the decision to use an antimicrobial is evidence-based or informed and the evidence results from some appropriate form of investigation conducted by the veterinarian. The information that the veterinarian relies upon will vary considerably given the practice type, species and production system of the animals for which the antimicrobial is prescribed*." Decisions may be further directed by the species specific CVMA Antimicrobial Prudent Use Guidelines, which include recommendations for prophylaxis (P) or control (C) / metaphylaxis (M) / therapy (T) of specific disease conditions.[4]

9. In **Russia,** prophylaxis is defined for human medicine as, a set of measures aimed at maintaining and strengthening health and including the formation of a healthy lifestyle, prevention of the spread of diseases, its early detection, identification of the causes and conditions of their occurrence and progression… Regarding usage in groups of animals, in 2019 the veterinary authorities propose the language: *"…in a group of animals suspected of being infected and animals suspicious of the disease."*

10. In **South Africa,** prevention is referenced in both relevant legal Acts (Act 101: Veterinary medicines under the Dept. of Health, and Act 36: Stock Remedies under Dept. of Agriculture), though they have no definitions for prophylaxis or metaphylaxis. Act 101 refers to 2 *"…treatment, diagnosis, prevention or cure of any disease, infection or other unhealthy condition, or for the maintenance or improvement of health…"*

[3] Drugs and Cosmetics Act https://legislative.gov.in/sites/default/files/A1940-23.pdf

[4] Veterinary oversight of antimicrobial use https://www.canadianveterinarians.net/documents/pan-canadian-framework

11. In **Chile,** prophylaxis is *"the administration of medicine to one animal or a group of animals before they exhibit clinical signs of disease, so as to avoid the disease or infection'*. Metaphylaxis is '*administration of a medicine to a group of animals where a clinical infirmity was already diagnosed in the part of the group, with the goal of treating the animals who are clinically ill and controlling the transmission of the disease to animals in close contact with these animals who could be at risk and who could already be sub-clinically infected*. " [5]

12. In **Kenya,** the guideline for the prudent use of antimicrobials in animals describes antimicrobial metaphylaxis as '*the timely mass medication of a group of animals to eliminate or minimize an expected outbreak of disease'* and states it should never be used in place of good management practices. Regarding prophylaxis it states that: *'routine prophylaxis must be avoided…and should be reserved for exceptional case-specific indications'.*[6]

13. In **Uruguay,** the National Plan for AMR Control describes metaphylaxis as '*the administration of antimicrobial agents to populations that may contain healthy individuals and infected to minimize or resolve clinical signs, infections or diseases. It can also include the administration of antimicrobial agents to an individual to minimize or resolve clinical signs, infections or illnesses.'* Prophylaxis is: *'administration of an antimicrobial agent to healthy animals prior to anticipated exposure to a infectious agent or after such exposure but before the laboratory confirms the clinical disease. Generally, it applies to groups of animals, not individually.*[7]

14. The **World Animal Health Organisation** (OIE): The 180+ nations of the OIE define 'veterinary medical use' of antimicrobial agents as "*the administration of an antimicrobial agent to an individual or a group of animals to treat, control or prevent infectious disease*". Treatment is about administering an antimicrobial to an *individual or* a group of animals with clinical signs of an infectious disease. Control is administration to a group of animals containing sick and healthy animals to minimise/resolve clinical signs and prevent further disease spread. Prevention is administration to an individual or a group of animals at risk of acquiring a specific infection or in a specific situation where infectious disease is likely to occur if the drug is not administered.[8]

[5] SAG Resolution N 6801/2017

[6] Kenya Ministry of agricultural livestock fisheries and irrigation: Guidelines for the prudent use of antimicrobial in animals

[7] Plan Nacional de contención de la Resistencia Antimicrobiana de Uruguay (www.gub.uy)

[8] Chapter 6; OIE Terrestrial Code

Part 2: Finalizing the Codex 'Code of Practice' and 'Integrated Surveillance' documents

Introduction

Codex and its members are keen to complete the draft Codex Code of Practice (COP) and Integrated Surveillance (GLIS) documents. Many people have worked hard over the last few years to get the documents close to completion. It is hoped that they will progress at the October TFAMR meeting and be completed at the Codex Alimentarius Commission meeting in November.

Six principles for the final stages of completion

As countries prepare to complete the documents, the following principles should be considered.

1. **Stay within scope and follow priority order:** The remit given to the TFAMR (CX/CAC 16/39/12 Appendix 2) was: "*To develop science-based guidance on the prudent use of antimicrobials in agriculture and on integrated surveillance, taking full account of the work and standards of other relevant international organizations, such as FAO, WHO and OIE and the One-Health approach*." Given that the remit first states to develop guidance on the use of antimicrobials, it follows that priority should be given to completing the COP.

2. **Focus on AMR:** In all countries, but especially in countries with limited resources, the focus should be on risks of potential AMR transfer. It is important to recognize that there has been significant progress on AMR as related to agriculture. When the 2016 AMR Political Declaration was issued, only 14% of the world's population resided in a country with a national action plan. Today, 96% do. As was raised by many countries throughout the meetings, the monitoring and surveillance of antimicrobial use (AMU) is already very capably being coordinated by the World Organization for Animal Health (OIE). OIE has collected this data for several years and produces regular reports. The "Fifth OIE Annual Report on Antimicrobial Agents Intended for Use in Animals" indicated an overall decrease of 34% in the global mg/kg antimicrobials used. Many countries are calling for the GLIS to focus on AMR, and to reduce focus on AMU in order to avoid duplication or conflict between organizations and approaches.

3. **Provide flexibility and workability:** Reflecting the different stages of development and access to resources in different countries, it is wise to ensure the Code and Guidance offer countries the flexibility to implement according to their capacity. Guidance that is only applicable in countries with significant resources is not the Codex way - Guidance should be appropriate for purpose. There remain significant opportunities to simplify the GLIS document to make it more practical. Not doing so risks misdirection of public and private resources from effective interventions to ineffective measures that burden food safety systems, enable trade barriers, and undermine consumer confidence.

4. **Protect trade:** Many countries have expressed concerns that Codex text should be drafted to avoid misuse and creating or enabling trade barriers. There is a concern that countries see antimicrobial risk management as a means to advance *de facto* or quantitative restrictions on food imports. This concern has heightened following legislation about antibiotics for animal health in one region that require the extraterritorial application to operators in all countries that wish to export animal protein to that region. There is a risk that the documents could enable restrictions on trade – therefore, texts warning against this should remain.

5. **Based on science.** Science and risk analysis are the foundation of Codex. The Codex Commission has repeatedly warned against texts that dwell away from science and evidence. Countries and institutions such as the World Trade Organization rely on the quality of science from Codex. Text that elevates unsupported opinion, conjecture, or references that are lacking in evidence must be avoided.

6. **Support Sustainable Development Goals.** The texts should support the UN Sustainable Development Goals (SDGs). In order to face the challenge of producing more food in a safer and sustainable way, farmers must be able to access the full range of technologies, including veterinary products. Codex members can achieve appropriate levels of protection of consumer health (including risk from antimicrobial resistance), while at the same time ensuring that such measures are not more trade restrictive than necessary. Regulation and marketing programs that lack scientific evidence have yielded an environment where farmers and veterinarians are experiencing a steady reduction in their access to medicines. The removal of veterinary products without employing risk analysis could adversely affect the care of animals and the sustainability of livestock production.

Code of Practice (COP)

Excellent progress was made on the Code at TFAMR7, where the text, minus bracketed sections was agreed with full support of all delegations. There are two outstanding points:

'Therapeutic use' definition: This is one of the outstanding bracketed items. Therapeutic use includes prevention, control, and treatment, and the veterinary world understands therapeutic use like this. Reference to therapeutic use is widely used when describing veterinary medicinal products as evidenced by the numerous times the phrase was referenced in TFAMR and in the Codex Committee on Residues of Veterinary Drugs in Food (CCRVDF). For clarity, it is important that this phrase is included. Concerns that some delegations have about potential inappropriate use of antibiotics cannot be addressed by just avoiding the words. Rather, such concerns should be, and are, addressed through rules on proper veterinary oversight of use, set out in these Codex documents as well as in national legislation/regulation. All countries recognise and describe prevention, control, and treatment.

Principle 13: "*Medically important antimicrobial agents should only be used for therapeutic purposes (treatment, control/metaphylaxis or prevention/prophylaxis of disease.)"* It is recommended to retain the current language for text not in brackets. Text describing appropriate use for therapeutic purposes was completed in TFAMR7 (Principles 14 and 15). This text makes considerable progress over the existing Code including describing the need for professional oversight, requiring the identification of well-defined and exceptional circumstances, reiterating need for products to be used per the label, and underscoring the expectation to base decisions on clinical and epidemiological knowledge. These advancements should be retained. No additional edits are recommended.

Guidance on Integrated Surveillance of Antimicrobial Resistance (GLIS)

This document should focus on guidance to establish the core components of a surveillance system for antimicrobial resistance. Many countries, in comments and verbally, have requested the GLIS document to focus on design and implementation of a programme for integrated surveillance of antimicrobial resistance.

Section 9 about antimicrobial use should be significantly redacted. AMU reporting already exists in a very effective format at the OIE. Nearly 90% of countries report in their data. For comparisons sake, on the human health side, only 9 countries reported all, and full human antibiotic use according to the 2020 WHO GLASS report (most reported some data).

The high incidence of input and support from countries into the OIE system is because of the trust countries have that their data is protected and will not be used for secondary purposes. Many countries have put in place data gathering processes in order to feed into the OIE process, or they have improved their systems. This has been a particularly positive effect of the OIE approach. Many countries, when putting in place AB data collection processes, follow the OIE advice (see below) on how to do so.

- OIE Guidance on Reporting AMU data https://www.oie.int/fileadmin/Home/eng/Our_scientific_expertise/docs/pdf/AMR/2020/ENG_AMUse_Guidance_Final_2020.pdf .
- OIE documents to assist Member Countries with preparing data https://www.oie.int/fileadmin/Home/eng/Our_scientific_expertise/docs/pdf/AMR/2020/ENG_AMUse_Annex_to_Guidance_Final_2020.pdf
- OIE support/references for countries on expertise and laboratories

  https://www.oie.int/scientific-expertise/veterinary-products/antimicrobials/