The South African NAC

The South African Society of Clinical Microbiology (SASCM) has established National Antimicrobial Committee (NAC) on 20 February 2014 as subcommittee to serve interest of public and private sectors in field of antimicrobial testing. Committee has eight members and chair is Professor Olga Perovic. Members have been nominated primarily based on their expertise in the field of microbiology.

ACTIVITIES OF THE COMMITTEE

The committee will discuss issues related to antimicrobial susceptibility testing (AST), and will focus around the following areas:

- Advice to laboratories (the best laboratory practice, address issues referred to the NAC)
- Advice and cooperation with manufacturers (suppliers of consumables/instruments used in AST)
- Susceptibility testing policies
- Surveillance of antimicrobial resistance
- Collaboration with international groups (e.g. EUCAST)
- Cooperation with National Department of Health (NDoH).

EUCAST

At the SASCM AGM, adopting EUCAST guidelines was supported by majority of members present at the meeting. The NAC role is to recommend stepwise process and implement changes in the current AST. Engaging with relevant stakeholders will be carried subsequently.

Four areas to proceed were identified by the committee and members have been assigned to co-ordinate activities related to each:

1. Information about pros and cons
   Although the switching was endorsed at the SASCM AGM, NAC still needs to inform the microbiology community at large scale about the rationale for the decision, and some of the fundamental differences between EUCAST and CLSI.

2. Practical implications of switching
   This would cover the practical implementation of the switch, including recommended media, testing materials, technical changes, and interpretive criteria, and cost implications

3. Surveillance implications
   By using different breakpoints and testing methodology, there will be implications for national surveillance, especially when compared to historical data based on CLSI.
4. Educational program
In order to ensure a transition, it will be crucial to keep users informed of the process, as well as the implications. This includes not only laboratory personnel, but clinicians and in some cases administrators and appropriate representatives from provincial and national DoH.

End of the report