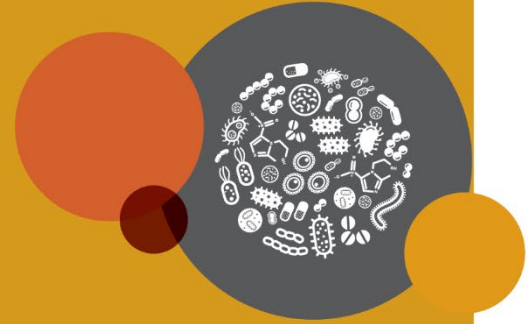


# AURA 2023 Highlights

## Primary care



The *Fifth Australian report on antimicrobial use and resistance in human health* (AURA 2023) includes data analyses from the Antimicrobial Use and Resistance in Australia Surveillance System (AURA). AURA 2023 data shows that antimicrobials continue to be prescribed at high rates in Australia, including in primary care.

This resource highlights key findings from AURA 2023 and priorities for action to support primary care services and clinicians.

### Key findings: Antimicrobial use

- The encouraging overall decrease in antimicrobial use in primary care continues with a 25% decline from 2019 to 2021. While antimicrobial use increased by nearly 10% from 2021 to 2022, it remains 18% lower than in 2019.
- There is an increasing proportion of private prescriptions for antimicrobials (prescriptions that are not subsidised under the Pharmaceutical Benefits Scheme or Repatriation Pharmaceutical Benefits Scheme). There are limited reporting and monitoring mechanisms in place for these prescriptions, which continues to be a gap in antimicrobial use surveillance in Australia.
- Prescribing rates for respiratory-related illnesses remain higher than guideline recommendations.
- Community-onset *Clostridioides difficile* infection (CDI) is a larger health concern in Australia than previously recognised. Hospital separations with a CDI diagnosis increased by 29% from 2020 to 2021. Community-onset CDI accounted for over 80% of separations.

### Key findings: Antimicrobial resistance and infection

- The majority of *Escherichia coli* bloodstream infections occurred in the community during 2020 and 2021.
- Rates of *E. coli* resistance to fluoroquinolones decreased from 2020 to 2021, which may have been associated with reduced community antimicrobial use and restricted international travel during the COVID-19 response.
- Rates of azithromycin-nonsusceptible *Neisseria gonorrhoeae* decreased from 2017 to 2022, but rates of ceftriaxone nonsusceptibility increased sharply during this period.
- Rates of resistance to ceftriaxone, ciprofloxacin and ampicillin in *Shigella sonnei* decreased from 2020 to 2022.

## PRIORITIES FOR ACTION

- ⇒ Supporting appropriate prescribing in primary care for common indications with high rates of inappropriate prescribing and for conditions that either do not require antimicrobials or often may not improve with antimicrobial use; these include acute bronchitis, acute sinusitis, acute upper respiratory tract infections (URTIs), influenza-like illnesses, acute otitis media, chronic obstructive pulmonary disease (COPD) and urinary tract infections (UTIs).
- ⇒ Promoting the inclusion of information on the diagnosis and management of CDI in HealthPathways to better support general practitioners and other primary healthcare clinicians.
- ⇒ Reinforcing messaging for consumers that antibiotics are not required to treat viral respiratory infections and carry risks such as CDI.
- ⇒ Informing consumers of the role of antimicrobials in AMR, their effects on beneficial and harmful bacteria, and the potential for their use to increase the risk of developing chronic conditions.
- ⇒ Sustaining improvements in the volume and appropriateness of antimicrobial prescribing in primary care.
- ⇒ Promoting improved surveillance of infections and AMR in the community.
- ⇒ Continuing to explore opportunities to enable the monitoring of private antimicrobial prescribing, repeat prescriptions for antimicrobials and the indications for which antimicrobials are prescribed.
- ⇒ Promoting ongoing surveillance and public health messaging for AMR in sexually transmissible infections, particularly for men who have sex with men, as well as continuing prevention and control programs and implementing outbreak response strategies for these infections.
- ⇒ Promoting [antimicrobial stewardship \(AMS\) strategies](#) and [infection prevention and control \(IPC\) practices](#) in primary care settings that are consistent with the [National Safety and Quality Primary and Community Healthcare Standards](#) and the [AMS Clinical Care Standard](#).

For more information, visit: [safetyandquality.gov.au/AURA2023](https://safetyandquality.gov.au/AURA2023)



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