

SEDRIC, a year on, reflections from the board

A year ago, the Surveillance and Epidemiology of Drug-Resistant Infections Consortium (SEDRIC) was launched, in a bid to strengthen epidemiology and surveillance efforts in drug-resistant infections. We are a global think-tank of experts that has come together to identify critical gaps, strengthen data availability and improve their translation into effective interventions, and are committed to promoting effective surveillance and finding innovative solutions to reinforce existing systems.

SEDRIC aims to

- undertake analysis and generate ideas and evidence relating to critical gaps and challenges,
- provide advice to key stakeholders and
- facilitate change to improve surveillance and epidemiological data on drug-resistant infections through advocacy for evidence-driven action globally.

Low and middle-income countries carry a disproportionately high burden of AMR and so must be central in creating solutions to address it. SEDRIC's focal points for last year, and into the future, has been on advocating ways to mobilise and maximise the use of existing and future surveillance data to better benefit public health. To this end, SEDRIC published its first review, in the *Journal of Antimicrobial Chemotherapy*, exploring how information generated in countries with weak surveillance systems could be harnessed for the benefit of patients, including consideration of the strengths and weaknesses of these data, mechanisms to increase their standardization, harmonisation and sharing, and the benefits that could be derived by investing in associated innovation. Read the paper [here](#).

Several initiatives are already looking to implement recommendations from this paper. This includes the Data Re-use prize and the Global Burden of Disease project on antimicrobial resistance. In November 2018 we set up a SEDRIC working group to further explore and define surveillance data gaps in LMICs. Dr Liz Ashley, at the Myanmar-Oxford Clinical Research Unit, is leading a group of experts from 6 different countries to identify ways to implement patient-centred surveillance utilising informatics and technologies in low and middle-income countries.

AMR was listed as a key threat to human health for 2019 by the WHO and in this year and beyond, surveillance data remains key to addressing this threat. SEDRIC will be increasing activity to meet this need. We will be launching a new website, publishing a series of reviews and white papers (for example, on leapfrog technologies and on the burden of antimicrobial resistance), as well as setting up further working groups investigating data harmonisation and standards.

Finally, we will be hosting our first Annual meeting to bring together the global surveillance community to discuss successes, difficulties and priorities for the future.

We thank everyone who has contributed to such a busy and successful first year and are excited to get started on the many important new projects we have in the pipeline. Good data will be central to effective solutions on AMR, and SEDRIC is always looking for more members who are interested in how surveillance can be better utilised to address AMR. [If this sounds like you why not apply to join our network?](#)

By Francesca Chiara, SEDRIC Secretariat

On behalf of the SEDRIC board, Sharon Peacock, Keiji Fukuda, Iruka Okeke, Jean Patel, Nicholas Feasey, Rogier Van Doorn, Julian Parkhill, Nandini Shetty, Alison Holmes, Stuart Reid, Direk Limmathurosakul, Ghada Zoubiane