

## **Antibiotic resistance is a major threat to global health that matters for NCDs**

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**Through my job, I get to know many cancer patients. Some of them have become valuable discussion partners for me in bringing new perspectives into how we address the cancer cause. Although no patient story is the same, there are often similarities in personal experiences that points to key gaps in cancer care that must be addressed at a structural level, and where we as a cancer society can play a role. Some of these meetings are eye-openers to me – reminders of the complex reality of modern medicine, and the interconnectedness between diseases.**

One man I have gotten to know, is Bengt. He is a former politician who got acute leukaemia twelve years back. He survived though, twice. The reason why Bengt survived his invasive cancer treatment and is a vital father of two sons is not only effective chemotherapy and bone marrow transplantations; Bengt also went through fifteen courses of antibiotics to respond to infections during his treatment that allowed his beaten body to resist infections during treatment. Without effective antibiotics, oncologists could have done nothing to help.

### **Modern medicine: marvellous and complex**

100 years ago, most cancer patients died. Because of the continuous development of methods for diagnosing and treatment, today more than two out of three patients survive a cancer diagnosis. Because of this continuous increase in survival, we have always been quite optimistic – that more and more patients will survive. But will the future really be that bright? Bengt's story – which is not unique - illustrated the link between cancer treatment and what WHO points to as the biggest threat to global health in our age – *antimicrobial resistance*, or *AMR*.

When WHO stated in 2013 that AMR is the major challenge for global health, we realised that AMR is indeed also the biggest threat to cancer treatment and survival. And, that we therefore should play our part in preventing the worst-case scenario to materialise: That we are indeed heading for a post-antibiotic era, in which common infections and minor injuries can once again kill. Those who are undergoing treatment for other conditions, at high risk of exposure to infection, and have weakened immune systems - such as cancer patients - are particularly vulnerable.

## Leading the fight against AMR

However, as the case is for the issue of climate change – the devastating situation and consequence of antibiotic resistance can come across as abstract and hard to grasp. Is it as if we are all thinking “Yes, it is here, but it is everywhere? This is an issue too overwhelming for us”. And as AMR is not a disease, but considered an underlying cause of disease, contrary to the standard dynamic, civil society have yet to stand up to support governments in addressing this complex issue.

Building on stories like the one of Bengt and on the global awareness created by the UN High Level meeting on AMR where Member States all committed to develop national action plans on AMR, we made a strategic choice to make AMR a priority for the Norwegian Cancer Society.

## Why AMR should matter to you & how you can help

There are 17 million new cases of cancer worldwide each year. Close to 10 million cancer patients die. Worldwide there will be 27.5 million new cases of cancer each year by 2040. With such a large volume, cancer affects everyone, being a patient or a relative or a friend. By using our impact to create attention for the issue at stake through linking AMR to cancer, we can be the voice needed to make people understand why AMR is such a big threat, that affects us all, and that we all – each and one of us – can contribute in curbing resistance by following a few simple pieces of advice:

- **Wash your hands!** - Good hand hygiene prevents infections. No illness – no need for treatment.
- **Get vaccinated!** - With vaccines, fewer people get need treatment.
- **Follow your doctor's advice!** - Do not ask for antibiotics. Have confidence in your doctor's recommendations.
- **Get involved!** - Put pressure on politicians and raise awareness.

## Join us in raising your voice about AMR

From an organisational perspective – our experience is that engaging in AMR is paying off as well. By supporting our government in creating awareness, we have positioned ourselves as an organisation that takes responsibility and acts on a shared threat.

*By using cancer to illustrate why antibiotic resistance affects everyone, we created an eye-opener for ordinary people, and for decision makers. We use cancer, but there are so many other patient stories that also could be told. The NCD community has a strong voice when we speak up together. I encourage you to use your impact and [join us in a partnership to solve the AMR challenge](#) [1].*

### Further reading

- **AMR: The biggest threat to cancer treatment** (Norwegian Cancer Society, [LINK](#) [1])
- New report calls for urgent action to avert antimicrobial resistance crisis (WHO news, April 2019, [LINK](#) [2])
- No Time to Wait: Securing the future from drug-resistant infections (WHO/IACG on AMR report, April 2019, [LINK](#) [3])
- Tackling Antibiotic Resistance - the impact for cancer patients (December 2014, [LINK](#) [4])
- Potential burden of antibiotic resistance on surgery and cancer chemotherapy antibiotic prophylaxis in the USA: a literature review and modelling study (The Lancet, October 2015, [LINK](#) [5])
- Tackling Drug Resistant Infections Globally: Final report and recommendations (May 2016, [LINK](#) [6])
- The world is running out of antibiotics, WHO report confirms (WHO news, September 2017, [LINK](#) [7])

### About the Author

**Ms Anne Lise Ryel** is currently the Secretary General of the Norwegian Cancer Society (NCS) ([@kreftforeningen](#))

[8]) where she has been championing the fight against cancer both nationally and internationally since 2002. She has an extensive professional background from all sectors of society: A lawyer by training, she has exercised her profession as a company lawyer in the private sector; as the Norwegian Gender Equality Ombudsman; as Deputy Director General at the Directorate of Health and in politics as Deputy Minister at the Norwegian Ministry of Justice.

### Featured:

**Search Keywords:** cancer, amr, antimicrobial resistance, antibiotics

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[AWaRe : a WHO-led campaign and tool to reduce antimicrobial resistance](#) [10]

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### Links

[1] <https://kreftforeningen.no/antimicrobial-resistance>

[2] <https://www.who.int/news-room/detail/29-04-2019-new-report-calls-for-urgent-action-to-avert-antimicrobial-resistance-crisis>

[3] <https://www.who.int/antimicrobial-resistance/interagency-coordination-group/final-report/en/>

[4] <https://longitudinprize.org/blog-post/tackling-antibiotic-resistance-%E2%80%93-impact-cancer-patients>

[5] [https://www.thelancet.com/journals/laninf/article/PIIS1473-3099\(15\)00270-4/fulltext](https://www.thelancet.com/journals/laninf/article/PIIS1473-3099(15)00270-4/fulltext)

[6] [https://amr-review.org/sites/default/files/160518\\_Final%20paper\\_with%20cover.pdf](https://amr-review.org/sites/default/files/160518_Final%20paper_with%20cover.pdf)

[7] <https://www.who.int/en/news-room/detail/20-09-2017-the-world-is-running-out-of-antibiotics-who-report-confirms>

[8] <http://twitter.com/kreftforeningen>

[9] <https://kreftforeningen.no/antimicrobial-resistance/>

[10] <https://adoptaware.org>

[11] <https://ncdalliance.org/taxonomy/term/385>

[12] <https://ncdalliance.org/category/tags/cancer>

[13] <https://ncdalliance.org/taxonomy/term/870>

[14] <https://ncdalliance.org/taxonomy/term/871>