

Estimating future antimicrobial resistance in Europe with structured expert judgement

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Antibiotic resistance: World on cusp of 'post-antibiotic era'

By James Gallagher Health editor, BBC News website

() 19 November 2015 | Health





What is a superbug?



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WHO warns against 'post-antibiotic' era

Agency recommends global system to monitor spread of resistant microbes.

Sara Reardon

30 April 2014

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Carbapenem and 3rd. gen. cephalosporin resistance among *K. pneumoniae* highest along the East Coast, but present in all regions of the country



Note: Data for 2010 available through July.



Data source: Braykov NB, Eber MR, Klein EY, Morgan DJ, Laxminarayan R. Trends in Resistance to Carbapenems and Third- Generation Cephalosporins among Clinical Isolates of Klebsiella pneumoniae in the United States, 1999-2010. Infect Control and Hospital Epidemiology. 2013; 34(3)

THE CENTER FOR Disease Dynamics, Economics & Policy WASHINGTON DC • NEW DELHI



FIGURE 1-3: Percentage of carbapenem-resistant Klebsiella pneumoniae, by country (most recent year, 2011–2014)

Source: CDDEP. 2015. "The State of the World's Antibiotics, 2015." Washington, D.C.: Center for Disease Dynamics, Economics & Policy.

Antibiotic resistance is a coevolution problem.



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...and an innovation problem.

DRIVE-AB

Developing new economic models to incentivise antibiotic discovery and development activities while safeguarding the efficacy of antibiotics by researching and advocating their appropriate use.

October 2014 – September 2017





DRIVE-AB Work Packages

- WP 1A: Define "responsible" use of antibiotics
- WP 1B: Set, communicate and revise public health priorities
- WP 1C: Develop antibiotic valuation models
- WP 2: Create, test and validate new economic models
- WP 3A: Coordinate and manage the project
- WP 3B: Stakeholder platform and external communication





Determining the economic value of antibiotics

- In order to estimate the value of new antibiotics, we need to know:
 - The levels of resistance to current treatment options, now and in the future
 - The clinical impact of resistance
- Important data gaps exist for these questions, though more work is currently underway addressing them (including work by WP1B).
- To supplement the growing evidence base, we are using structured expert judgment (specifically, the classical model) to get estimates and uncertainty bounds related to the future trajectory of resistance.

What is "The Classical Model"?

- A method to combine and validate experts' quantifications of uncertainty
- It's NOT a method to coerce agreement between the experts
- The method has been used by WHO, EU, EPA, NOAA, NASA, etc.
- In the classical model, experts answer 2 types of questions:
 - Calibration (aka "seed") questions
 - Variables of interest
- With calibration variables, any expert (or combination of experts) can be treated like a statistical hypothesis.
- Experts' assessments are weighted according to performance and combined.



- ✓ Reproducibility
- ✓Accountability
- ✓ Empirical control
- ✓ Neutrality
- ✓ Fairness

An example question

In the United States in 2012, how many of the 4,104 tested *E. coli* isolates included in data from The Surveillance Network (TSN) were resistant to fluoroquinolones?

5%	25%	50%	75%	95%

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True value: 1,230

Measuring expert performance

Statistical accuracy:

- Do the expert's assessments capture the true values at the expected frequency?
- P-value of a statistical test of the expert's hypotheses

Informativeness:

- How concentrated is the assessment, relative to a background measure?
- The background measure normally uniform with a 10% overshoot range.

Variables of interest

Bug/drug pairs

- 1. E. coli and fluoroquinolones
- 2. E. coli and cephalosporins
- 3. E. coli and carbapenems
- 4. K. pneumoniae and cephalosporins
- 5. K. pneumoniae and carbapenems
- 6. S. aureus and methicillin
- 7. S. pneumoniae and penicillins
- 8. N. gonorrhoeae and cephalosporins
- 9. P. aeruginosa and any treatment

Countries

- 1. Germany
- 2. France
- 3. UK
- 4. Spain
- 5. Italy

Why use expert judgment?

Existing relevant data are an imperfect picture of the past.

- Short history of observations.
- Data not representative.
- Definition of "resistant" not consistent over time.

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Experts have a lot of additional information about the future.

• Changes in antibiotic prescribing.

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- Changes in hospital infection control.
- Changes in available treatment options.

Expert scores: United Kingdom

Expert	SA	Info	Combined	Weight (PW)
1	1.55E-03	0.47	7.33E-04	0
2	0.02	1.83	0.03	0.09
3	0.18	1.13	0.20	0.66
4	0.18	0.39	0.07	0.23
5	2.61E-03	1.99	0.01	0.02
6	1.96E-08	0.79	1.54E-08	0
PW	0.50	0.61	0.30	
EW	0.13	0.33	0.04	

Expert scores: Spain

Expert	SA	Info	Combined	Weight (PW)
1	1.22E-05	0.57	6.98E-06	0.23
2	1.03E-09	1.45	1.49E-09	0
3	1.99E-07	0.42	8.43E-08	0
4	3.23E-07	1.64	5.31E-07	0
5	2.24E-05	1.04	2.33E-05	0.77
PW	3.59E-05	0.67	2.39E-05	
EW	1.22E-05	0.23	2.82E-06	

Expert scores: France

Expert	SA	Info	Combined	Weight (PW)
1	2.20E-04	1.47	3.24E-04	0
2	0.03	1.38	0.04	0
3	1.99E-07	0.72	1.43E-07	0
4	2.16E-03	0.67	1.45E-03	0
5	0.65	1.96	1.28	1
PW	0.65	1.96	1.28	
EW	0.08	0.43	0.03	

Expert scores: Italy

Expert	SA	Info	Combined	Weight (PW)
1	0.03	0.63	0.02	0
2	0.02	0.46	0.01	0
3	0.45	0.47	0.21	1
4	5.56E-06	0.99	5.50E-06	0
PW	0.45	0.47	0.21	
EW	0.22	0.20	0.04	



Escherichia coli & Fluoroquinolones



Escherichia coli & Third-generation cephalosporins



Escherichia coli & Carbapenems



Staphylococcus aureus & Meticillin (MRSA)

Comparing SEJ to mathematical forecasting



Next steps

- Results of this work will feed into antibiotic valuation models.
- There are a lot of interesting dependencies to explore!
 - The same bug/drug combination in different years.
 - Different drugs treating the same bug.
 - The same drug treating different bugs.

Thank you!

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Klebsiella pneumoniae & Third-generation cephalosporins



Klebsiella pneumoniae & Carbapenems