We welcome the One Health approach, the AMR and AMC human health sector targets, as well as the greater focus on the environment.
Tackling AMR requires action in and across all sectors. We welcome the objective of improving cooperation between professionals working in human health, veterinary and agronomy sectors and with stakeholders to improve the One Health approach.
When it comes to human health, we welcome the proposal to establish AMR-related targets in the human health sector at EU level. Those targets are key in setting a common vision and ensuring a proper monitoring of progress.
For animal health, we underline, on top of the Farm to Fork, Common Agricultural Policy and other mentioned instruments, the potential relevance of the upcoming Framework for Sustainable Food Systems in ensuring the very needed shift towards sustainable practices, from production to consumption. Such a shift would also have a significant impact on AMR.
When it comes to the environment, the Council Recommendation highlights that measures concerning the environment are missing or not well developed.

Better understanding the impact on antimicrobial residues in the environment on the emergence and spread of AMR is key to the development of measures to help mitigate that impact.

We agree on the need for new incentives for the development of new antimicrobials and welcome the ambition to develop a multi-country pull incentive scheme.

As we already highlighted and as reflected in the proposal of Council Recommendation, the level of investment in antimicrobials is disappointing. Current solutions based on incentives to the pharmaceutical industry have shown their limits. AIM therefore welcomes the European Commission’s ambition to contribute to the design and governance of a Union multi-country pull incentive scheme.
In order to increase the level of investment in antimicrobials, prevent overselling and provide long-term supply continuity, AIM is in favour of a model that delinks R&D costs and innovation from price and sales volumes too. However, resources available to such a solution, which AIM prefers, risk being
We highlight the need for a genuine global perspective, including in Africa and Latin-America. AMR does not stop at borders and requires a wide international collaboration between Member States, European Institutions but also global organisations. We welcome the recommendations’ global ambitions, especially when it comes to developing capacity and supporting AMR actions in low- and middle-income countries.

Yet, while the Recommendations mentions the Team Europe Initiative with Africa on sustainable health security as key in contributing to tackling AMR, it makes no reference to Latin-America. We believe that AMR should be a concern at the centre of the Plan for self-sufficiency in health matters in Latin America and the Caribbean and of the upcoming new EU Agenda for Latin-America and the Caribbean. We invite Member States to include these instruments in the scope of their Recommendation.

Prevention first: we stand ready to contribute to the promotion of prudent use of antimicrobials.

Stronger preventative measures (e.g. vaccination, hygiene, infection control practices) and rational prescribing and use are necessary, as it will take a while before new drugs will come out of the pipeline. They are key in optimising antimicrobial consumption. The achievement of higher degrees of health literacy amongst the population and healthcare professionals is therefore a key priority and we welcome the European Commission’s plans in that direction.

We also call on Member States to recognise healthcare mutuals and funds as strategic allies in the fight against AMR and specifically in their raising awareness strategies. As such, mutuals and healthcare funds should be actively involved in the National Action Plans against AMR.