

NORTHERN IRELAND MEDICINES MANAGEMENT Antimicrobial Supplement

November 2025



World Antimicrobial Awareness Week 18th to 25th November 2025

Antimicrobial resistance (AMR) is a global health crisis. As a result of resistance, antibiotics and other antimicrobial agents are less effective and infections can be difficult or impossible to treat, increasing the risk of disease spread, severe illness and death. The theme for this year's [World Antimicrobial Awareness Week \(WAAW\)](#) is:

**Act Now: Protect Our Present,
Secure Our Future**

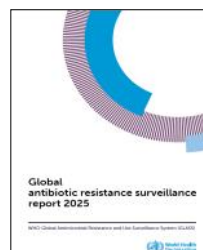


AMR Across the World — No Passport Required!

Surveillance data from the [WHO Global Antimicrobial Resistance and Use Surveillance System \(GLASS\)](#) presents the most comprehensive analysis of AMR prevalence to date, with data from 127 countries. Although wide regional variation was observed, with the burden of AMR greater in those countries with weaker health systems, the overall findings remain relevant for all. Resistance to life-saving medicines is critically high and rising, particularly among Gram negative bacteria. The effectiveness of first choice treatments for common infections is increasingly compromised.

Median resistance was most common in:

- **urinary tract infections (approximately 1 in 3)**
- bloodstream infections (1 in 6)
- gastrointestinal (1 in 15)
- urogenital gonorrhoeal infections (1 in 125)

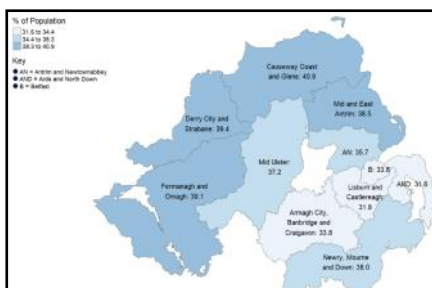


Urinary tract infections (UTIs) are among the most common bacterial infections worldwide. For non-antimicrobial treatment of recurrent UTIs, see SPPG [UTI supplement](#) and NI Formulary.

Northern Ireland Antibiotic Prescribing

Antibiotics were dispensed to 686,660 people in 2024/25, which equates to **35.9%** of NI population. Although this still accounts for a significant proportion, this was a decrease of 5.5% on the previous year, so a step in the right direction!

For further information, see: [General Pharmaceutical Services for Northern Ireland: Annual Statistics 2024/25](#)



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WAAW QUIZ!!!

ENTER the WAAW quiz ([click](#)) for a chance to win **£50 Love to Shop Vouchers**

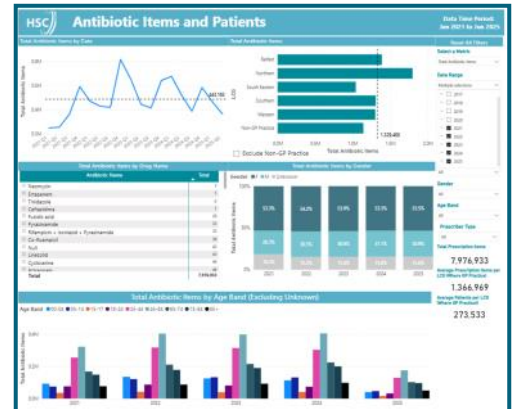


**Competition closes
30th November 2025**

Northern Ireland Antimicrobial Dashboard

The new antimicrobial dashboard is a visual analytics tool designed to support antimicrobial stewardship activity in practices.

The dashboard provides insight into antimicrobial prescribing trends and may highlight where further investigation is warranted, to optimise the safe and effective prescribing of antimicrobials. Practices will only be able to view their own data, with comparative data from other practices anonymised.



Data Source

Business Services Organisation dispensing data for BNF chapter 5 section 1 (methenamine included), comprising prescriptions from:

- GPs
- Non-medical prescribers
- Out of hours
- Dental prescribers
- Prescriptions from other parts of the UK dispensed in NI

Not included:

- Data from secondary care
- Private prescriptions

For further information, see [Antimicrobial Dashboard on PCI](#)



GPNI Practice Update 25th September 2025:

Recording available

[Antimicrobial Stewardship](#)

- New dashboard demonstration
- Review of current trends in antimicrobial prescribing
- NICE guidance - recurrent UTI
- Demonstration of EMIS tools to support stewardship in practice, including Accurx and TARGET

Nitrofurantoin: Safety Reminder

In April 2023, the MHRA published a safety alert on the [risks of pulmonary and hepatic adverse drug reactions](#) with nitrofurantoin use. A recent prevention of Future Deaths Report has further highlighted the need to be aware when prescribing nitrofurantoin to any patient, irrespective of the history of pulmonary disease. Healthcare professionals should be alert to the risks of pulmonary and hepatic adverse drug reactions and advise patients to be vigilant for the signs and symptoms in need of further investigation. Report suspected adverse drug reactions (ADRs) to the [Yellow Card scheme](#).

- ✓ Advise patients/carers to be vigilant for new or worsening respiratory symptoms and to seek medical advice if they experience any symptoms
- ✓ Pulmonary reactions may occur with **SHORT** or **LONG** term use, exercise increased vigilance in the first week of treatment
- ✓ Patients receiving long-term therapy e.g. for recurrent UTIs, should be closely monitored for new or worsening respiratory symptoms, especially if elderly
- ✓ Immediately discontinue if new or worsening respiratory symptoms
- ✓ Use with caution in patients with pulmonary disease or hepatic dysfunction, as these may mask the signs and symptoms of adverse reactions

Nitrofurantoin on EMIS

⚠ Medium Severity Warning - relating to age; with advice to monitor lung and liver function on long-term therapy.

Selected Drug - Nitrofurantoin 50mg tablets
Contains - Nitrofurantoin 50 mg

Allergies (1)

- Adverse Drug Reaction History of Adverse Drug Reaction to Nitrofurantoin
Adverse reaction to nitrofurantoin

High Severity Warnings (2)

- Contra-Indication Avoid Nitrofurantoin if eGFR less than 45 mL/minute/1.73 m²; may be used with caution if eGFR 30-44 mL/minute/1.73 m² as a short-course only (3 to 7 days), to treat uncomplicated lower urinary-tract infection caused by suspected or proven multidrug resistant bacteria and only if potential benefit outweighs risk; risk of peripheral neuropathy; antibacterial efficacy depends on renal secretion of the drug into the urinary tract.
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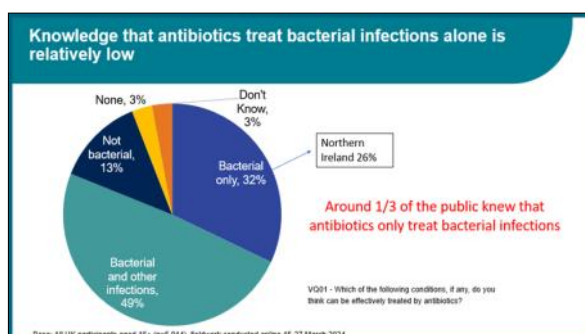
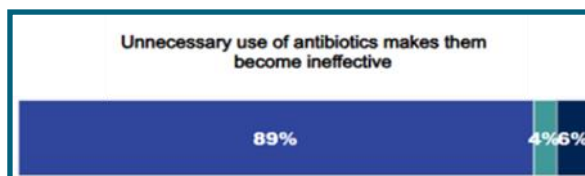
Medium Severity Warnings (3)

- Caution Use Nitrofurantoin with caution in The Elderly. Monitor lung and liver function on long-term therapy, discontinue if deterioration in lung function.
- Caution Use Nitrofurantoin with caution in susceptibility to peripheral neuropathy. Neuralgia unspecified
- Caution Use Nitrofurantoin with caution in vitamin B deficiency. Cobalamin deficiency

NI Patient Survey Findings

An online survey in March 2024, commissioned by UKHSA and conducted by Ipsos, surveyed 590 adults in Northern Ireland to understand public knowledge, attitudes and behaviours towards antibiotic use for respiratory tract infection. The survey found that whilst public understanding of the concept of AMR appears to be fairly good, the details of this knowledge and the resulting behaviours do not always match.

- 56% have seen, read or heard information about when to take or not take antibiotics in the last year
- 89% understand that unnecessary use of antibiotics can make them ineffective
- 81% understand the need to finish a course of antibiotics even if feeling better
- 43% believe antibiotics can be used to treat viral infections, such as ear infections
- 46% either don't know or don't believe that antibiotics can have side effects such as diarrhoea
- 73% are unaware of what a delayed or back-up antibiotic is



Meet Andi Biotic

Andi Biotic is on a mission to make people aware of the correct ways to use antibiotics, so we can all help to tackle the threat of AMR.

Andi Biotic has been created as part of the 'Keep Antibiotics Working' campaign and aims to increase public awareness and understanding of antibiotic behaviours, promoting 3 key messages:

- Don't take antibiotics for colds and flu
- Don't save antibiotics for later
- Take antibiotics as directed by your healthcare professional

The ['Keep Antibiotics Working' campaign](#) offers a suite of digital, print and social assets to help raise awareness of the correct and incorrect ways to use antibiotics, supporting people to take antibiotics correctly, keep antibiotics working, and tackle AMR.

For further information see [Antimicrobial resistance awareness: toolkit for healthcare providers](#)

This toolkit aims to provide quick and ready-to-use resources to support healthcare providers, and others in planning activities for World AMR Awareness Week and European Antibiotic Awareness Day, as well as engagement with the antibiotic guardian campaign.



Antibiotics in Children: Benefit vs Risk

Respiratory tract infection (RTI) with acute cough is the most common respiratory syndrome managed in primary care. Antibiotics for RTI have little measurable benefit over placebo, in terms of symptom resolution (see table below), but can expose children to risk of serious side effects and longer-term harm.

Up to 3 out of 10 children may experience side effects and antibiotics should only be used if their benefits are likely to outweigh their harms in this population.

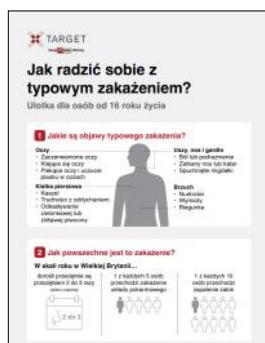
Antibiotics account for one of the most dispensed BNF chapters for the 0-4 and 5-14 age groups in NI ([General Pharmaceutical Services for Northern Ireland: Annual Statistics 2024/25](#)). Practice prescribing for under 5s is available in COMPASS (page 16) or from the new Antimicrobial Dashboard.



	Duration of symptoms - NO antibiotics	Antibiotics will ONLY reduce duration of symptoms by
Otitis media	4 -12 days	8-12 HOURS
Sore throat	8 days	12-18 HOURS
Sinusitis	12-15 days	24 HOURS
Cough	20-22 days	11-24 HOURS

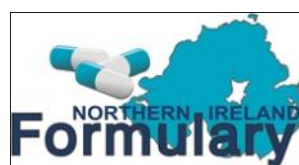
Information to Share with Patients

- [TARGET Leaflets](#) (available in multiple languages and formats)
- [Caring for children with coughs](#)
- [Self Care Forum](#) leaflets and fact sheets
- [Keep Antibiotics Working](#)
- [Medicines for Children](#)



Resources for Healthcare Professionals

- [NI Primary Care Antimicrobial Guidelines](#) — hosted by Eolas Medical
- NICPLD—updated course on Antimicrobial Stewardship available
- NICE Guidelines
- SPPG Medicines Management Newsletters
- TARGET resources
- [NI Antimicrobial dashboard](#)
- Practice COMPASS report
- GPNI



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