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'Antibiotic footprint' as a communication tool to aid reduction of antibiotic consumption—authors' response

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Sir,
We thank Gould *et al.*¹ for their comments on our article on the antibiotic footprint, which we proposed as a simple communication

to aid public understanding of antibiotic consumption.² We fully agree that the antibiotic footprint could also be used as a tool to support interventions to reduce the overuse of antibiotics.¹ We understand the possibility of presenting the antibiotic footprint together with thresholds of antibiotic consumption in different hospitals and communities, defined as number of treatment courses, or DDDs per unit of hospital activity or community population, as presented by Gould *et al.*,¹ additionally recognizing that a similar approach could be taken on livestock farms and in other veterinary and one-health contexts. However, complete data on antibiotic usage as proposed¹ are rarely available in low- and middle-income countries (LMICs) and further studies evaluating whether thresholds of antibiotic consumption could be defined for each LMIC are needed. The information on complete antibiotic use and new evidence arising from such studies would certainly allow the communication strategy to be adjusted and improved over time.² Furthermore, we strongly agree with the recent report, 'Reframing Resistance', published by the Wellcome Trust,³ which proposed that communication messages to the public need to be tested and that including the issue of antibiotic overuse in both humans and animals in the right way helps make the issue feel tractable. We foresee that the concept of the antibiotic footprint could be expanded to online individual calculators² and that local thresholds of antibiotic consumption could help in guiding local appropriate antibiotic use in the community.¹ However, further studies to evaluate the use of the antibiotic footprint and antibiotic consumption thresholds to communicate with communities are needed, particularly in different languages and contexts.

Transparency declarations

None to declare.

References

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- 2 Limmathurotsakul D, Sandoe JAT, Barrett DC *et al.* 'Antibiotic footprint' as a communication tool to aid reduction of antibiotic consumption. *J Antimicrob Chemother* 2019; **74**: 2122–7.
- 3 Wellcome Trust. Reframing Resistance. <https://wellcome.ac.uk/sites/default/files/reframing-resistance-report.pdf>.