

Initiatives from the Federation of Infectious Diseases Societies of Southern Africa (FIDSSA) to tackle infectious diseases in South Africa and the region

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The infectious diseases challenge in southern Africa

Infectious diseases continue to contribute to suffering and death in southern Africa. In the second South African national burden of disease study, 33.6% of more than half a million deaths in 2012 were attributed to HIV or TB and 13.5% deaths were attributed to other communicable diseases, maternal/perinatal conditions or nutritional deficiencies.¹ While the study's authors reported a substantial decline in HIV- and TB-associated mortality since 2006 associated with the expanded antiretroviral treatment programme, mortality associated with communicable diseases other than HIV and TB has not declined. This unchanged mortality may reflect South Africa's limited progress in combating preventable or treatable infectious causes of death such as pneumonia, diarrhoeal diseases and sepsis in children and adults. The relentless emergence of antimicrobial resistance (AMR) in bacterial, fungal, viral and parasitic pathogens globally compounds this issue and may ultimately result in untreatable infections in the community and healthcare settings. Delivery of high-quality patient care and public health interventions to prevent infectious diseases in southern Africa are also compromised by 'silos' in the healthcare system, poor up- and down-referral systems and an inability to link patients who repeatedly seek care for chronic infectious diseases at different levels in the system. Conversely, novel diagnostics and treatments as well as strategic information from national laboratory record linkage offer opportunities to turn this infectious diseases tide.

Stronger together: an alliance of infectious diseases societies

The Federation of Infectious Diseases Societies of Southern Africa (FIDSSA) was formed by the amalgamation of six national professional societies with a common and overlapping interest in infectious diseases: the Infectious Diseases Society of Southern Africa (IDSSA), Sexually Transmitted Diseases Society of Southern Africa (STDSSA), Infection Control Society of South Africa (ICSSA), South African Society of Clinical Microbiology (SASCM), South African Society of Travel Medicine (SASTM) and most recently in 2008, the Southern African Society of Paediatric Infectious Diseases (SASPID). The societies maintain individual areas of expertise, identities and constitutions but contribute

to the overall strategic direction of the Federation through their representation on the FIDSSA Council. They share administrative support, jointly host the biennial FIDSSA conference and support a single journal, the Southern African Journal of Infectious Diseases (SAJID).

FIDSSA initiatives to reduce the impact of infectious diseases in South Africa and the region

Transversal themed programmes: A large number of southern African parastatal institutions, academic university departments and research units, non-governmental organisations and professional societies have focused their attention and resources, appropriately, on the scourge of HIV, TB and other infectious diseases. With the combined weight and expertise of six societies, FIDSSA is able to identify and provide leadership for key public health issues. The South African Antibiotic Stewardship Programme (SAASP) is perhaps the most successful recent example of FIDSSA playing a convening role to tackle AMR, a major infectious disease challenge, at a national level. Drawing on the expertise and skills from several FIDSSA societies and from experts outside the Federation, SAASP was formed in 2012 by a passionate and committed group to advocate for and strengthen antimicrobial stewardship (AMS) in the public and private sectors. SAASP has developed AMS training materials and courses, coordinated dissemination of information appropriate for the lay public and healthcare professionals, harmonised and developed antimicrobial prescribing guidelines and recommended appropriate evidence-based interventions. The SAASP leadership successfully engaged with the National Department of Health at a critical time culminating in the formation of a Ministerial Advisory Committee on AMR and development of South Africa's AMR national strategy framework, 2014–2024.² SAASP continues to lead by example and over the next five years, FIDSSA would do well to replicate this model of active and energetic collaboration and leadership to identify and tackle other regional infectious disease priorities.

Guideline development: Guidelines have been developed by individual societies, ranging from laboratory guidance for detection of antimicrobial-resistant pathogens, harmonisation of national antimicrobial susceptibility testing practices and appropriate use of newly-registered antimicrobial agents

(SASCM), infection prevention and control guidance for general practitioners (ICSSA) and clinical guidelines specific to particular infectious disease syndromes (IDSSA).³⁻⁶ SASTM has published several books of interest to medical professionals and lay audiences (www.sastm.org.za). FIDSSA has also provided a platform for wider collaboration and cross pollination across disciplines. For example, collaboration across several societies led to the publication of an updated community-acquired pneumonia guideline⁶ and the formation of guideline development groups for *Candida auris* and *Clostridium difficile* infections. In future, we would like to see more collaboration in the development of appropriate regional guidelines – ideally involving local non-South African experts too.

Other initiatives by FIDSSA societies: SASCM emerged as a fully-fledged society in 2009, replacing the National Antibiotic Surveillance Forum. With other entities now mandated to drive national surveillance, SASCM's role has evolved from regular generation of aggregate sentinel data to providing expertise in interpretation of national public and private sector AMR data. Several FIDSSA societies have nurtured close relationships with related societies and through these links contribute to joint conferences and provide regional support: SASPID and the South African Paediatric Association, African Paediatric Infectious Diseases Society and the World Society for Pediatric Infectious Diseases; SASTM and the International Society of Travel Medicine; and SASCM and the Federation of South African Societies of Pathology. SASTM hosts a regular stand-alone conference, the next scheduled for September 2018. FIDSSA societies contribute to policy-making and advisory committees and are currently represented on the national advisory group on immunisation (SASPID), paediatric HIV and TB committees (SASPID), national multi-sectoral outbreak response team (SASTM), South African malaria elimination committee (SASTM) and ministerial advisory committee on AMR (SASCM, SAASP, ICSSA). Several societies also play an active role in supporting, mentoring and training specialists and subspecialists. IDSSA has specifically provided input into the certificate in infectious diseases examination offered by the Colleges of Medicine of SA. SASTM and the School of Public Health at the University of the

Witwatersrand run an annual travel medicine course for up to 100 participants.

Southern Africa is ravaged by infectious diseases yet can draw on a committed and skilled group of healthcare professionals in this field. FIDSSA aims to integrate expertise across infectious disease disciplines to offer leadership and support when tackling high-priority issues. In the near future, we plan to re-engineer services for members, adding value to joining FIDSSA and maintaining current membership. To stimulate original research, FIDSSA has disbursed research grant awards to members through a formal application and assessment process and will continue to source external funds for this purpose. We hope to expand this initiative by allocating research awards to each society. We also hope to increase our reach in the southern African region by offering limited trial membership to healthcare professionals working outside South Africa. FIDSSA's next conference is scheduled for late 2019 in Gauteng and we will use this opportunity, as in the past, to showcase the Federation's activities and successes. We are indebted to the previous leadership of FIDSSA for their outstanding contributions and recognise the vital role played by SAJID in achieving our objectives.

References

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Erratum

Please note that the “South African guideline for the management of community-acquired pneumonia in adults” as published in *SAJID* Vol 33(1) 2018 was published with permission from the *Journal of Thoracic Disease* 2017;9(6):1469-1502.