



# A PCP for smart ICT solutions against Multi-resistant microorganisms

AQUAS, Barcelona, 15/12/2017



# The Consortium



17/01/2018

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Programme of the European Union



# General Objectives

Anti-SUPERBugs PCP main objective is to support and finance private R&D activities in the field of advanced ICT solutions, aimed at detecting micro-organisms that may determine the incurrence of hospital-acquired infections and control the diffusion of infections within healthcare providers facilities. This will both address the needs of healthcare providers in increasing HAIs (Hospital Acquired Infections) control and contribute in the development of a new stream of products in the life science and medical device industries.

# Specific Objectives

- Improvement of the quality and reduction of the costs of the collateral effects of the care process in hospitals
- Creation and consolidation of an pan-European network of procurers
- Definition of the cross-border and joint pre-commercial public procurement procedure
- Mutual learning, knowledge sharing and transferring within a multidisciplinary consortium

# One joint PCP 7 Commissioning Authorities

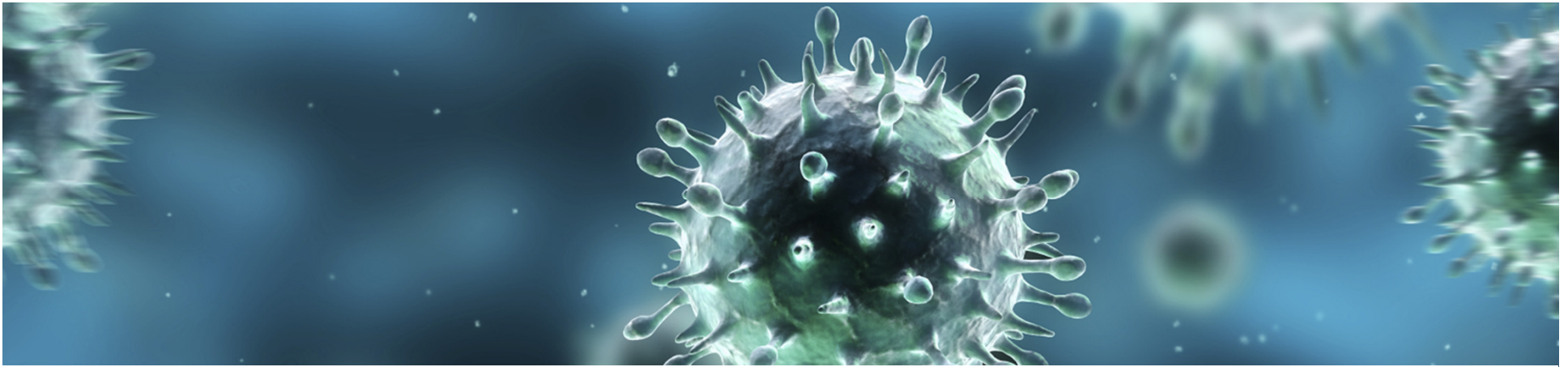


AQuAS will act as  
procuring entity on  
behalf of the buyers  
group

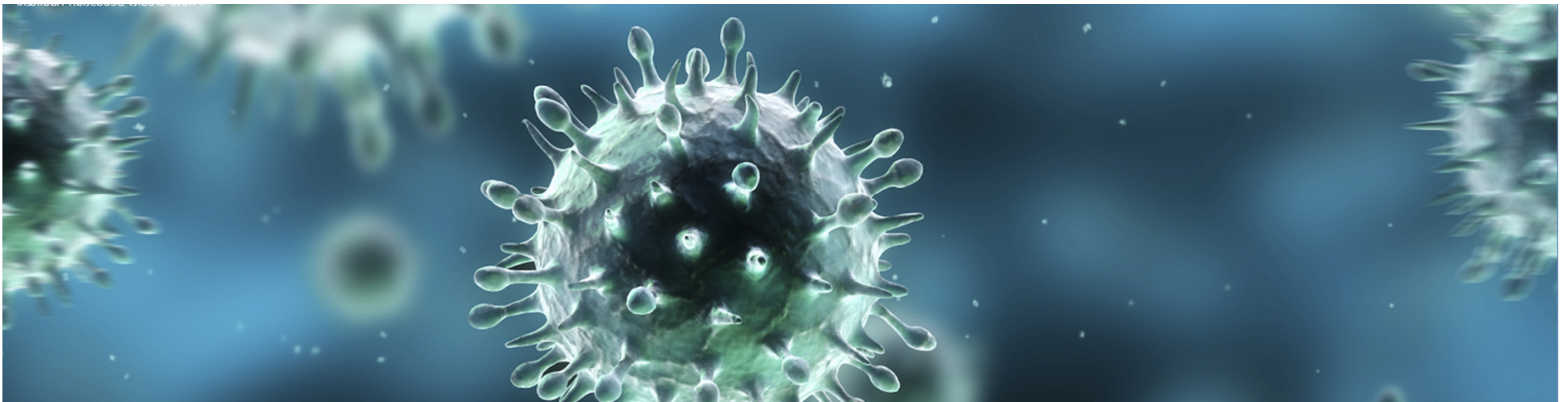
The total jointly  
committed Budget : **€4  
millions** for the PCP







# Use case scenarios



# Use case scenario 1

Unconsciousness patient is admitted in the emergency room, blood sample and microbiological samples sent to the lab and first results are reported to the clinician within 30 min and later. Pat. Transferred to the ICU and on second day patient presents with fever, headache and nausea - the doctor started calculated treatment with antibiotics

Additional lab results reported - patient's situation worsens and receives reserved antibiotics the new ASB-system detects on arrival of the patient by use of non-invasive sampling that there is an infection with MDRO (which and where) and the system tells the physician which antibiotics are recommended and whether isolation or cohort-isolation

## Use case scenario 2

Mrs. M. is hospitalized in the ward. The professional is entering the room performing the usual interventions. While doing that he has contacted the patient and surface. He is then leaving the room. The next day the professional is not feeling well and it will be identified that he was carrying MRSA. Another 24h later the patient Mrs. M. is having symptoms of respiratory infections, e.g. coughing

Additional lab results reported - patient's situation worsens and receives reserved antibiotics the new ASB-system detects on arrival of the patient by use of non-invasive sampling that there is an infection with MDRO (which and where) and the system tells the physician which antibiotics are recommended and whether isolation or cohort-isolation



## Use case scenario 3

On admission at the hospital all patients are equipped with a small non-intrusive portable device, the ASB system, that monitors regularly the patients to detect the presence of a MDRO. A continuous monitoring system that is connected to a hospital information system which in turn is connected to the regional control centre. As soon as a MDRO is detected the ASB system alerts the control and surveillance centres and the proper protocols are triggered.



# Thank you

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