Antimicrobial stewardship (AMS) has been surveyed at national and continental level, but never at a global level. The 2011 ECCMID Guidelines & Policies Working Group (ESGAP) supported a worldwide survey of AMS

By the initial deadline, 513 hospitals worldwide had entered data, with 298 from Europe. 27 countries entered data from Europe, with the most from the United Kingdom (UK) (range: 1 to 122; average 11; mean 4). Of the non-UK European responses: 41% were completed by pharmacists. 51% were tertiary teaching hospitals & 22% district hospitals. 65% of hospitals had AMS standards & 19% were planning them. 74% had an AMS Committee, 58% had an AMS Programme in place & 25% had one planned. Lack of Information technology was the main barrier. Antimicrobial or infectious diseases pharmacists were present in 86% of AMS committees. On average, there was 8 hours per week of pharmacist time for AMS in the 75 responses. 80% have a antimicrobial formulary. 69% guidelines, 58% restriction, 40% day 3 review, 50% IV to oral switch guidance & 57% have dose optimisation on request. 61% have AMS ward rounds mainly on intensive care & medicine. 34 centres have formally assessed their AMS programmes and have shown reductions in expenditure, broad spectrum & inappropriate prescribing

AMS appears to be well developed in many parts of Europe, and involves pharmacists