Last-resort antibiotics remain out of reach in Latin America and the Caribbean, review warns

Years-long delays and "two-tiered" health systems leave patients without treatment for highly dangerous resistant infections

Geneva/São Paulo, 22 July 2026 — Patients across Latin America and the Caribbean are being left without access to the critical antibiotics needed to treat life-threatening drug-resistant infections, according to a new review led by the GARDP Foundation (known as GARDP) published today.

The review highlights how more than a third of countries in the region do not include even a single Reserve (or a "last-resort") antibiotic on their national essential medicines lists, despite a growing and devastating burden of antimicrobial resistance.

Drug-resistant infections contributed to more than 320,000 deaths across Latin America and the Caribbean in 2021 and could cause nearly 650,000 deaths annually by 2050 without further action, based on recent estimates.

"There is a widening disconnect between where drug-resistant infections are taking the greatest toll and where effective antibiotics are actually available," said Dr Regina Osih, GARDP's Global Access Director. "If that gap is not urgently addressed, more people will lose their lives to bacterial infections that are becoming increasingly difficult to treat."

The review points to several major challenges affecting patient access to these lifesaving medicines, from delays in regulatory approvals, to exclusions from treatment guidelines and essential medicines lists, and high pricing. In addition, it reveals a crippling 'two-tier' system in treatment access between public and private hospitals, which fuels inequities within as well as between countries.

Years-long delays in access to newer treatments

The findings come as resistance to existing treatments increases. A regional analysis of intensive care units found that nearly one-third of Gram-negative bacterial isolates were resistant to carbapenems - antibiotics commonly used as a last line of defence against severe bacterial infections. Resistance in *Acinetobacter baumannii*, a major cause of hospital-acquired infections, exceeded 70%.

At the same time, newer treatments are taking years to reach countries facing the highest rates of resistance. Eight years after receiving approval from the U.S. Food and Drug Administration in 2014, ceftolozane-tazobactam had been registered in only nine low- and middle-income countries in Latin America and the Caribbean and even then, remained unavailable in four of them, the review found.

The review also points to delays in access to cefiderocol, a newer antibiotic used to treat some of the deadliest multidrug-resistant Gram-negative infections. By 2025, it had not been registered anywhere in the region. Through an innovative partnership, GARDP and Japanese

pharmaceutical company Shionogi are now working to address this challenge, support its responsible introduction in the region and beyond.

Regional collaboration offers a strategic way forward

Since Reserve antibiotics are intended to be used sparingly – only when other treatments are likely to fail - this can make them less commercially attractive to register and supply, particularly in smaller or lower-income markets. The result is a mismatch between public health need and market incentives, leaving many countries waiting years to access critical treatments.

To help address this challenge, the authors call for faster regulatory pathways, including shared reviews between countries, coordinated procurement, stronger regional manufacturing capacity, and updated essential medicines lists. They highlight regional initiatives such as the Pan American Network for Drug Regulatory Harmonization and the PAHO Strategic Fund that can help countries join forces to expand antibiotic availability. They also propose dedicated and funded national AMR programmes to ensure a robust response.

“Access to effective antibiotics should not depend on where a patient lives,” said one of the paper’s authors, Dr Wanda Cornistein, Specialist in Internal Medicine and Infectious Diseases and Head of the Infection Control Unit at Austral University Hospital, Buenos Aires. “Countries need stronger systems to decide which antibiotics are essential, secure them at affordable prices and ensure they are used appropriately. Without that, the gulf between rising drug resistance and access to treatment will continue to grow.”

The review, *Access to Reserve Antibiotics in Latin America and the Caribbean: Situation, Challenges, and Future Directions*, was published in the journal *Infection and Drug Resistance*.

About GARDP

GARDP (the Global Antibiotic Research & Development Partnership) is a not-for-profit global health organization driven to protect people from the rise and spread of drug-resistant infections, one of the biggest threats to us all. By forging the public and private partnerships that matter, GARDP develops and makes accessible antibiotic treatments for people who need them. Vital support for our work comes from the governments of Germany, Japan, Monaco, the Netherlands, Switzerland, the United Kingdom, the Canton of Geneva, the European Commission, as well as the Gates Foundation, Global Health EDCTP3, GSK, the RIGHT Foundation, the South African Medical Research Council (SAMRC) and Wellcome. GARDP is registered under the legal name GARDP Foundation in Switzerland. www.gardp.org