Rwanda, along with much of the African continent, is facing a rising tide of antibiotic-resistant infections, according to a new World Health Organization (WHO) report.

Globally, one in six bacterial infections confirmed in laboratories in 2023 could not be treated effectively with common antibiotics. In the African Region, the proportion rises to one in five, a stark reminder of the growing challenge for health systems with limited resources.

The WHO's *Global Antibiotic Resistance Surveillance Report 2025*, released on Monday, shows that resistance is increasing across multiple bacterial pathogens, including Escherichia coli, Klebsiella pneumoniae, and Staphylococcus aureus.

Among the most concerning are Gram-negative bacteria, which are increasingly resistant to first-line antibiotics such as third-generation cephalosporins. In Africa, resistance for some of these infections now exceeds 70%, making treatment difficult and often forcing reliance on expensive, last-resort drugs.

Dr Tedros Adhanom Ghebreyesus, WHO Director-General, warned that antimicrobial resistance (AMR) "is outpacing advances in modern medicine" and called for urgent action to improve antibiotic stewardship, diagnostics, and access to essential medicines.

In Rwanda, health authorities are taking steps to address the issue. The country updated its National Action Plan on AMR for 2025–2029, adopting a "One Health" approach that integrates human, animal, and environmental health. Hospitals in Kigali and other major cities have begun implementing Antimicrobial Stewardship programs to ensure antibiotics are prescribed responsibly and only when necessary.

Recent research in Rwanda highlights the urgency: a study at a Kigali referral hospital found that fewer than 30% of Gram-negative infections were susceptible to ceftriaxone, one of the most commonly used antibiotics. Resistance to other widely used drugs, including co-amoxiclav and ciprofloxacin, was also high.

Experts say that Rwanda's relatively small size and centralized health system may give it an advantage in coordinating interventions, but challenges remain, particularly in rural areas where laboratory capacity and diagnostic tools are limited.

The WHO report shows the highest levels of resistance in South-East Asia and the Eastern Mediterranean, with roughly one in three infections resistant. Europe has lower rates, around one in ten. Across the African Region, the trend is upward, and without urgent interventions, experts fear a growing number of infections will become untreatable.

For Rwanda, this means not only improving hospital practices but also strengthening surveillance systems, expanding laboratory capacity, and ensuring access to the right medicines and vaccines. The WHO emphasizes that tackling AMR will require a coordinated effort across sectors and borders.

As Dr Tedros noted, “Our future depends on strengthening systems to prevent, diagnose, and treat infections and on innovating with next-generation antibiotics.” For Rwanda, the clock is ticking, and the fight against resistant bacteria is becoming one of the country’s most pressing public health challenges.