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Should Swiss Medicine Go Viral?

Phage therapy has been used successfully to treat patients with chronic antibiotic-resistant infections. In most countries, there are no approved phage drugs for human patients, but phages, also called bacteriophages, can be used as a last resort treatment. This happens very rarely in Switzerland – unlike in countries like Belgium or France that have facilitated access to this therapy. The project Forum Phagentherapie (1) is fostering a public debate if this should happen in Switzerland, too.



The discussion during the Forum event in Basel was captured graphically by Michael Meier, aka Denkpinsel.“ <https://michaelmeier.ch/>

It can be assumed that most of the Swiss public know about antibiotic resistance. However, it is much less certain how well people are informed about phage therapy. That is why the team of the Forum Phagentherapie has come up with a two-stage approach to enable an informed debate. Stage one consists of a half-hour documentary discussing phage therapy in Switzerland.

This documentary follows a patient who has been treated in the Geneva University Hospitals (2). The film familiarises the audience with the therapy and its most important aspects, including status of evidence, opportunities and hurdles. Stage two consists of four public Forum events in which the film is screened, followed by a discussion by a panel of experts with the audience. Workshops in various schools, a campaign in social media, and the website phagenforum.ch (1) are supplementing this setup by providing complementary information and targeting additional audiences.

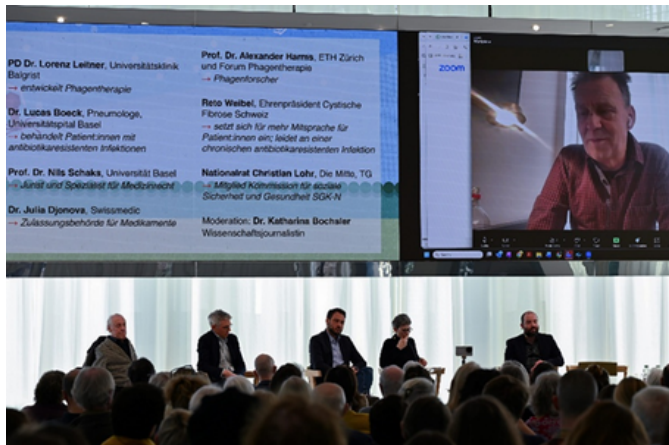


Packed venue during the Forum event in Basel



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Part of the expert panel with Reto Weibel participating via video link from hospital

Two of the Forum events have taken place, one in Basel (31 January 2026) and the other one in Lenzburg (14 February 2026). In both cases, the venues were packed and the audience participated actively during the 2.5 hours of discussion (3). One of the experts was Reto Weibel, Honorary President of the Swiss Cystic Fibrosis association and himself affected by the disease. He also suffers from a chronic pulmonary infection and would like to be treated with antibiotics to improve his deteriorating health.

However, Reto Weibel is refused treatment because his treating doctors want to keep the two remaining, i.e., not yet used, antibiotics as a last resort. Reto Weibel has also been refused phage therapy as there are still two effective antibiotics available, creating a catch-22 situation that leaves him with slowly deteriorating health but no access to additional treatment for his pulmonary infection. Reto Weibel forcefully pleaded for a stronger involvement of patients in deciding which treatments they have access to. At the Basel event, it became especially obvious how precarious his situation is: he could not participate in person but had to use a video link from a hospital where he had to be admitted a few days before. The other participating experts (4) in the panel sympathised with Reto Weibel, and they emphasised the need to develop treatment alternatives for chronic infections and the potential of phage therapy. Prof. Dr Alexander Harms, a phage researcher at ETH Zurich (Federal Institute of Technology Zurich); <http://ethz.ch/en.html>) and co-lead of the Forum Phagentherapie, added that the extent of this need is probably underestimated: As the patient population suffering from resilient bacterial infections is very diverse and fragmented, its size may not be recognised to its full extent by health system stakeholders and society.

An interesting information surfaced during the discussion in Basel from the audience: A law expert clarified that the often-held assumption that the Swiss rules regarding last resort treatments impose a strict limit of no more than 3-5 treatments done by a physician or a hospital per year is wrong. The expert used to be a member of the Ethics Committee of the Canton of Zurich, and she said that, based on past practice, a number of 20 treatments would pose no problem.

Dr Julia Djonova from the Swiss regulatory agency Swissmedic (<http://www.swissmedic.ch>) said that it is paramount to obtain evidence of safety and efficacy of phage therapy from clinical trials. She emphasised that Swissmedic is supporting Swiss phage therapy researchers and clinicians in designing clinical trials. The moderator of the debate, Dr Katharina Bochsler, pointed to a gap between the great need for alternative treatments for chronic infections that exists today and the fact that it will take a considerable amount of time until a clinical trial can be successfully completed. Reasons for this are that clinical trials need investments of at least several tens of millions of Swiss Francs – a scale that is difficult or impossible to achieve for academic institutions or small companies that typically are active in phage therapy development. This was echoed by Prof. Dr Thomas Kessler



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who is working with his team at Balgrist University Hospital in Zurich (<http://www.balgrist.ch>) on phage therapy and is currently preparing a clinical trial.

One possibility to bridge this gap would be to adapt some of the approaches used by other countries like Belgium, France or Australia to make phage therapy accessible for patients who are not confronted by an immediate fatal outcome. The broad presence of expertise on the panel – from research to Clinical, Law and Health Policy – allowed to discuss a variety of possible approaches. The politicians outlined necessary political steps, including clarification of the regulatory situation and the development of treatment capacity. The audience gave clear indication that a majority would support such steps, both by taking the floor and by voting via an online tool: On a scale from 0 (“do not agree at all”) to 5 (“agree completely”), the statement that Swiss politics should facilitate access to phage therapy and create treatment capacity obtained a vote of 4.4.

This is something that National Councillors Christian Lohr (on the panel in Basel) and Farah Rummy (Lenzburg) can take to the Swiss parliament for further discussions. Obviously, politics does not work as quickly and directly as that. But both politicians stressed the need to find a way forward and their interest in helping to do that. After the event, all the participants on the panel as well as many in the audience emphasised how valuable the dialogue has been so far. There will be two more similar events in Zurich (09 May 2026) and in the French -speaking part of the country (30 May 2026). They will provide opportunities for more dialogue and to identify concrete options to act.

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(1) Phagenforum: <https://phagenforum.ch>. The project is funded by the Agora programme of the Swiss National Foundation SNF (Schweizerischer Nationalfonds;

<http://www.snf.ch/en/JnT2xEAERCgO8qQc/funding/science-communication/agora>)

(2) The film (with subtitles in English) can be viewed at www.youtube.com/playlist?list=PLgDHliTu1pwGY7AdXNm9YAmzewLTetONy. It was funded by the Swiss Academy of Sciences (SCNAT; scnat.ch/en). The case narrated in the film was described in Köhler T, Luscher A, Falconnet L, et al. Personalized aerosolised bacteriophage treatment of a chronic lung infection due to multidrug-resistant *Pseudomonas aeruginosa*. *Nat Commun.* 2023;14(1):3629. doi:10.1038/s41467-023-39370-z

(3) The forum in Lenzburg was streamed live. The video can be accessed at www.youtube.com/@phagenforum

(4) Complete information about the panels' experts is available at <https://phagenforum.ch/events/>

