Dear Secretary Price:

We, the undersigned organizations representing health care providers, scientists, patients, public health, and industry, write to thank you for your upcoming participation in the World Health Assembly this month, and to ask that you continue working domestically and internationally to advance a robust response to antimicrobial resistance (AMR) that reflects the US commitment to infection prevention, antimicrobial stewardship, surveillance and innovation.

As an orthopedic surgeon, you have undoubtedly witnessed firsthand the devastating impact of antimicrobial resistant infections on patients. The Faces of Antimicrobial Resistance Report, released this year by the Infectious Diseases Society of America and several of its partners in the Stakeholder Forum on Antimicrobial Resistance, tells the stories of several patients whose lives have been devastated by AMR. According to the Centers for Disease Control and Prevention (CDC), at least 2 million people are sickened by antibiotic resistant infections each year in the US, and at least 23,000 die as a result. Further, resistant infections result in an additional $20 billion of excess costs to our health care system each year. Globally, it is estimated that 700,000 deaths are attributable to AMR. Experts agree that without robust, coordinated action, these numbers will continue to grow at an alarming rate.

We are encouraged by recent progress to combat AMR, and the national and international recognition of this crisis. In Fiscal Year (FY) 2016, Congress allocated new resources to support multi-agency domestic and global AMR activities in both human health and agriculture, including improving surveillance and data collection, advancing stewardship, and promoting research for urgently needed new antimicrobial drugs, diagnostics, vaccines, and alternatives to antibiotics. In 2016, the United Nations held a high level meeting on AMR and adopted a political resolution expressing a commitment to implementing the World Health Organization’s (WHO) global action plan on AMR. We strongly urge the US government to be a world leader on this important issue and to continue doing our part to invest in domestic and global AMR efforts.

However, much more work remains. While we must make every effort to prevent infections and limit the development of resistance, we recognize that new antibiotics are essential. Unfortunately, our pipeline is fragile, and new economic incentives are urgently needed to make research and development in this area feasible for companies. In addition, sustained resources are essential to drive coordinated surveillance and prevention activities and support the highly skilled workforce necessary to address all aspects of AMR.

Once again, we thank you for your leadership on this important issue and look forward to working with you to advance a multi-faceted solution to antimicrobial resistance.

Sincerely,

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| Accelerate Diagnostics |
| AdvaMedDx |
| Alliance for the Prudent Use of Antibiotics |
| American Association of Bovine Practitioners |
| Antibiotic Resistance Action Center, the George Washington University |
| Antimicrobial Working Group |
| Association of American Veterinary Medical Colleges |
| BIO (Biotechnology Innovation Organization)Center for Foodborne Illness Research & Prevention |
| Dignity Health |
| Duke Center for Antimicrobial Stewardship and Infection Prevention |
| Emory Antibiotic Resistance Center |
| Health Care Without Harm |
| Janssen |
| March of Dimes |
| Merck |
| National Association of County and City Health Officials |
| National Association of Pediatric Nurse Practitioners |
| National Athletic Trainers' Association |
| NovaDigm Therapeutics |
| ONCORD, Inc. |
| Sanofi |
| Spero Therapeutics |
| The Foundation to Combat Antimicrobial Resistance |
| The Gerontological Society of America |
| The Pew Charitable Trusts |
| The Society for Healthcare Epidemiology of America |
| Theravance Biopharma |
| Trust For America's Health |