



# IDSAs

Infectious Diseases Society of America

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April 7, 2011

President Barack Obama  
The White House  
1600 Pennsylvania Avenue NW  
Washington D.C. 20500

Dear Mr. President:

I write to you today, World Health Day 2011, on behalf of the Infectious Diseases Society of America (IDSAs) to seek your leadership on a health care threat of critical importance to the American people and people around the world—antibiotic-resistant bacterial infections. Bacterial infections are becoming increasingly resistant to existing antibiotics, and as the number of patients who have succumbed to these infections rises, the number of new antibiotics being developed continues to plummet. Remarkably, in 1990, there were nearly 20 pharmaceutical companies with large antibiotic research and development (R&D) programs. Today, there are only two large companies with strong and active programs, and only a small number of companies have more limited programs.

The World Health Organization and IDSAs are using World Health Day 2011 to focus attention on this global crisis emphasizing that urgent and consolidated efforts are needed to avoid regressing to the pre-antibiotic era. IDSAs's members, 9,300 infectious diseases physicians and scientists, are growing deeply concerned as they watch otherwise healthy children and adults die, because once-effective antibiotics no longer work and few if any alternative effective drugs exist. We need to work together to preserve the life-saving power of these critical patient care and public health resources (see the enclosed Journal of the American Medical Association [JAMA] commentary).

You and your Administration are simultaneously working on multiple fronts to protect the lives of American citizens and others around the world. Those efforts are critically important, but there is also a critical need for measurable actions that would protect the lives of the nearly 100,000 Americans who will die this year due to antibiotic-resistant infections and the families and friends they will leave behind. Also of importance, drug-resistant infections cost the U.S. health care system an estimated \$21 billion to \$34 billion annually. The longer we wait to address this growing health care crisis, the larger and more costly the problem will become both in terms of lives lost and health care expenditures.

The way we have managed the development and preservation of antibiotics over the past 70 years is now failing. Antibiotics are a precious resource, like energy resources, and we have a moral obligation to ensure they are available for future generations.

IDSA has developed a comprehensive, multifaceted plan (copy enclosed) entitled, “Combating Antimicrobial Resistance: Policy Recommendations to Save Lives,” that contains multiple strategies to address this complex problem. If such initiatives are not implemented now by the U.S. government and health care providers around the country, an increasing number of lives will be lost and families devastated.

There already are multiple initiatives underway within your Administration to address the problem of antimicrobial resistance, but these efforts are compromised by the lack of a centralized leadership. One such initiative is the draft revised Action Plan to Combat Antimicrobial Resistance issued last month by the federal Interagency Task Force on Antimicrobial Resistance (comprised of eleven federal agencies across five departments). IDSA’s initial review of the action plan found significant deficiencies that concern us. IDSA has long championed the creation of a lead office and director on antimicrobial resistance within the Office of the Secretary of Health and Human Services (HHS) reporting to the Assistant Secretary for Preparedness and Response or the Assistant Secretary for Health. The director would lead the existing Interagency Task Force, bring new energy and a broad vision, and help to facilitate better coordination of the federal response. We also strongly support the formation of an advisory board of non-government experts that would work with the director and task force to establish priorities and ensure progress toward achieving its goals. This plan to strengthen federal coordination, accountability, and transparency has received bipartisan support within Congress as part of the pending Strategies to Address Antimicrobial Resistance (STAAR) Act.

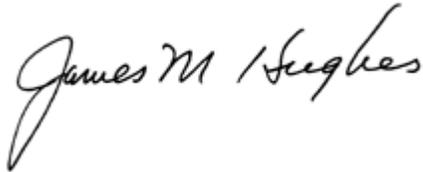
Among IDSA’s other important policy recommendations in its plan are:

- Creating economic incentives to spur antibiotic R&D (and related rapid diagnostics) so antibiotics may once again become a viable business endeavor. IDSA’s goal is the availability of 10 new systemic antibiotics by 2020, known as “the 10 x ’20 initiative.” Promising bipartisan legislation, the Generating Antibiotics Incentives Now (GAIN) Act, soon will be reintroduced in the U.S. House of Representatives.
- Recalibrating and better communicating Food and Drug Administration requirements for new antibiotic approvals.
- Funding the Administration’s revised Public Health Emergencies Medical Countermeasures Enterprise (PHEMCE) including support for antibiotic R&D efforts under the Biomedical Advanced Research and Development Authority (BARDA) and the proposed independent strategic investment firm.
- Creating an Antimicrobial Innovation and Conservation (AIC) Fee to help pay for antibiotic R&D and stewardship programs. The fee would be charged against the wholesale purchase of antibiotics used in humans, animals, plants, and aquaculture.

We also support more global efforts to address this problem including the activities your Administration and the European Union have initiated as part of the Trans-Atlantic Task Force on Antimicrobial Resistance (TATFAR). We look forward to reviewing the TATFAR report in the coming months and hope their recommendations will emphasize the need to move forward with the sense of urgency that this effort merits.

Unless sweeping actions are taken now, the future could resemble the days before these miracle drugs were developed. People will die of common infections and many medical interventions we take for granted—surgery, chemotherapy, organ transplantation and care of premature infants—will no longer be possible. IDSA stands ready to assist you in any way that we can in these efforts. Please contact Robert J. Guidos, JD, IDSA’s vice president for public policy and government relations at 703-299-0202 or [rguidos@idsociety.org](mailto:rguidos@idsociety.org), should you have any questions or wish to discuss IDSA’s recommendations.

Sincerely,

A handwritten signature in black ink that reads "James M. Hughes". The signature is written in a cursive, flowing style.

James M. Hughes, MD FIDSA  
President

Enclosure: IDSA paper: “Combating Antimicrobial Resistance: Policy Recommendations to Save Lives,” *Clinical Infectious Diseases* (April 2011)  
Commentary: “Preserving the Lifesaving Power of Antimicrobial Agents,” *JAMA* (March 2011)

cc: Melody Barnes, Assistant to the President for Domestic Policy, The White House  
Kathleen Sebelius, Secretary, U.S. Department of Health and Human Services (HHS)  
Howard Koh, MD, MPH, Assistant Secretary for Health, HHS  
Margaret Hamburg, MD, Commissioner, U.S. Food and Drug Administration  
Anthony Fauci, MD, Director, National Institute of Allergy and Infectious Diseases  
Thomas Frieden, MD, MPH, Director, Centers for Disease Control and Prevention  
Nicole Lurie, MD, MSPH, Assistant Secretary for Preparedness and Response (ASPR),  
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Robin Robinson, PhD, Director, Biomedical Advanced Research and Development  
Authority (BARDA), Deputy ASPR, HHS  
Richard Hatchett, MD, Deputy Director, BARDA  
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Nils Daoulaire, MD, MPH, Director, Office of Global Health Affairs, HHS