IDSA Proposal to AMA House of Delegates
Antibiotic Use in Agriculture
DRAFT – As Approved By IDSA Public Health Committee 4/22/2014

AMERICAN MEDICAL ASSOCIATION HOUSE OF DELEGATES

Resolution: XXX

Introduced by: Infectious Diseases Society of America

Subject: Resolution on Antibiotic Use in Food-Producing Animals

Referred to: XXX

Whereas: The Centers for Disease Control and Prevention (CDC) estimates that at least 23,000 patients die from antibiotic-resistant infections every year;

Whereas: As antibiotic resistance increases, physicians have fewer and fewer effective drugs to treat patients;

Whereas: The relationship between antibiotic-resistant infections in humans and antibiotic use in agriculture is complex but well-documented;

Whereas: A large and compelling body of scientific evidence demonstrates that antibiotic use in agriculture contributes to the emergence of resistant bacteria and their spread to humans;

Whereas: Medically-important antibiotics are widely used in agriculture for non-therapeutic reasons, including growth promotion;

Whereas: Improved data collection of antibiotic use in agriculture will enable public health officials and scientists to better understand and interpret trends and variations in antimicrobial resistance, to improve the understanding of the relationship between animal uses of these drugs and antimicrobial resistance in animals and humans, and to identify interventions to prevent and control resistance.

Whereas: Existing AMA Policy (D-100.976 Restriction of Non-Veterinary Antimicrobials in Commercial Livestock to Reduce Antibiotic Resistance) states *"Our AMA will work with interested partners to develop new, or improve existing, FDA guidelines concerning the prudent use of antibiotics in livestock to protect patients from the dangers of antimicrobial-resistant pathogens."* (Res. 530, A-08)

Be it resolved that: Our AMA supports federal efforts to ban antibiotic use in food-producing animals for growth promotion purposes, including through regulatory and legislative measures; (New AMA Policy)

Be it resolved that: Our AMA supports a strong federal requirement that antibiotic prescriptions for animals be overseen by a veterinarian knowledgeable of the place and intended use of these drugs, under a valid veterinarian-client-patient relationship (VCPR); (New AMA Policy)

Be it resolved that: Our AMA supports efforts to expand FDA surveillance and data collection of antibiotic use in agriculture. (New AMA Policy)

Relevant References:

1. U.S. Centers for Disease Control and Prevention. Antibiotic Resistance Threats in the United States, 2013. September 2013. *Available at*, http://www.cdc.gov/drugresistance/threat-report-2013/pdf/ar-threats-2013-508.pdf.

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humans and poultry products, Minnesota and Wisconsin, 2002–2004. Emerging Infectious Diseases, 2007, 13(6): 838-846.

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Relevant AMA Policy:

1. D-100.976 Restriction of Non-Veterinary Antimicrobials in Commercial Livestock to Reduce Antibiotic Resistance

Our AMA will work with interested partners to develop new, or improve existing, FDA guidelines concerning the prudent use of antibiotics in livestock to protect patients from the dangers of antimicrobial-resistant pathogens. (Res. 530, A-08)

2. H-100.973 Combating Antimicrobial Resistance through Education

Our AMA: (1) encourages the federal government, the World Health Organization, the World Medical Association, and the International Federation of Pharmacists to promote more effective education concerning the appropriate use of antibiotics;

(2) strongly urges physicians to educate their patients about their antimicrobial therapy, the importance of compliance with the prescribed regimen, and the problem of antimicrobial resistance;

(3) will continue to educate physicians and physicians-in-training about the appropriate prescribing of antimicrobial agents;

(4) encourages the use of antibiotic resistance management programs; these education-based programs should be multidisciplinary and cooperative (i.e., including infectious disease physicians, infection-control specialists, microbiology laboratory personnel, and clinical pharmacists); and

(5) encourages continued scientific research on the issue of antibiotic resistance. (Sub. Res. 521, A-94; Reaffirmed by Rules & Credentials Cmt., A-96; Reaffirmation I-98; Modified: CSA Rep. 3, A-00; Reaffirmation I-07)

3. H-100.952 Enhancing Antibiotic Stewardship to Improve Patient Outcomes in the Inpatient Setting

Our AMA will: (1) support antimicrobial stewardship programs, overseen by qualified physicians, as an effective way to ensure appropriate antibiotic use, to optimize patient outcomes, and to reduce overall costs for a healthcare facility. Antibiotic stewardship programs are multi-faceted approaches to optimize antibiotic prescribing, encompassing components such as policy, guidelines, surveillance, education, epidemiology of current resistance, and process measurement. Successful antibiotic stewardship programs monitor and direct antimicrobial use, providing a standard, evidence-based approach to judicious antibiotic use in a healthcare facility;

(2) support the development of antibiotic stewardship programs that allow flexibility so that adherence to national requirements does not limit the ability of providers to design programs based on local variables, such as healthcare facility size, and to address local antimicrobial stewardship and infection prevention challenges;

(3) urge each healthcare facility's governing body to promote and support robust antimicrobial stewardship and infection prevention programs as critical components of assuring safe patient care; and

(4) support continued research into the impact of antibiotic stewardship programs on process outcomes, and encourage increased research on the impact of such programs on patient-centered outcomes. (BOT Rep. 20, A-12)