

IDSA: 21st Century Cures Vote by the House Energy and Commerce Subcommittee on Health a Step Forward for Antibiotic Development and Research

IDSA applauds the Health Subcommittee of the House Energy and Commerce Committee for voting today to advance key provisions in the 21st Century Cures Initiative to promote urgently needed antibiotic research and development (R&D), boost funding for the National Institutes of Health (NIH), support young emerging scientists, and support innovative biomedical research.

IDSA is delighted that the bill would establish the limited population antibacterial drug (LPAD) approval mechanism—an idea first proposed by IDSA three years ago. This provision, taken from the Antibiotic Development to Advance Patient Treatment (ADAPT) Act, spearheaded by former Rep. Phil Gingrey (R-GA) and Reps. John Shimkus (R-IL) and Gene Green (D-TX), would allow new antibiotics and antifungals that treat serious or life-threatening infections for which there is an unmet medical need to be studied in smaller clinical trials. This approach is a necessary complement to economic incentives for antibiotics (such as the Generating Antibiotic Incentives Now, or GAIN, Act, which was enacted in 2012) because the targeted infections currently occur in a relatively small number of critically ill patients, making it very difficult and sometimes impossible to fill a traditional, large clinical trial. This provision will make it possible for life-saving new antibiotics to be brought to patients who lack other safe and effective treatment options. The bill also includes important safeguards to help ensure the antibiotics will be used appropriately.

IDSA is also pleased to support provisions that would authorize increased funding for the NIH and create a new Innovation Fund to provide \$2 billion in new mandatory funding for the NIH each year for the next 5 years. To sustain and elevate our biomedical research enterprise, we must provide the NIH with robust, reliable funding. In the field of infectious diseases, we need a well-funded NIH to support research in a variety of areas that impact patients and public health, including antibiotic resistance, influenza, HIV/AIDS, hepatitis, tuberculosis, vector-borne diseases, emerging infections, global infectious diseases, and the research and development of new vaccines, diagnostics, and antimicrobial drugs.

Lastly, IDSA enthusiastically supports the provision to increase the cap for the NIH loan repayment program from \$35,000 to \$50,000 annually. In recent years, we have been deeply concerned that young people are less likely to pursue careers in biomedical research due in large part to debt incurred during training. This disturbing trend could have dire consequences for our nation's future if it is not addressed. We believe that updating the loan forgiveness amount to more accurately reflect the debt burden of training will help alleviate one of the major barriers to recruiting and retaining physician-scientists in the biomedical workforce, i.e., the uncertainty surrounding the ability to repay student loans.

IDSA is grateful to the Subcommittee for its extraordinary efforts to advance these policies that have the potential to save the lives of patients with infectious diseases. We look forward to continued progress on these issues in Congress.