November 15, 2007

Honorable Charles E. Schumer
313 Hart Senate Office Building
United States Senate
Washington, DC 20510

Dear Senator Schumer:

I write on behalf of the Infectious Diseases Society of America (IDSA) to express our gratitude to you for your leadership in sponsoring S. 2351, legislation which will provide research and development (R&D) tax credits for critically needed infectious disease products, such as antibiotic and antiviral drugs, medical devices, diagnostic tests, biological products, and vaccines. IDSA strongly supports enactment of this important legislation.

S. 2351 provides an essential component of the comprehensive framework of strategies needed to reduce the United States’ vulnerability to antibiotic-resistant and other dangerous infections. Drug-resistant bacterial infections alone threaten the lives of hundreds of thousands of healthy American children and adults as well as elderly and immune-compromised persons each year. Several tragic patient stories are chronicled at [www.idsociety.org/STAARAct](http://www.idsociety.org/STAARAct).

The drug-resistant bacteria that Infectious Diseases and other physicians are most concerned about include Methicillin-resistant *Staphylococcus aureus* (MRSA), *Escherichia coli* (*E. coli*), *Acinetobacter* (which is threatening soldiers returning from Iraq and Afghanistan), *Klebsiella species* (which appears to have originated in or near Brooklyn and now are traveling down the East Coast and inland), extensively drug-resistant tuberculosis (XDR-TB) and *Pseudomonas aeruginosa*. Recent reports have demonstrated that MRSA alone is infecting more than 94,000 people and killing roughly 19,000 people around the country annually—more deaths than from emphysema, HIV/AIDS, Parkinson’s disease or homicide. One of MRSA’s latest victims is Omar Rivera, a seventh grader from Brooklyn, who succumbed on October 14 of this year.

Reports of antibiotic-resistant infections have been steadily increasing in the scientific literature, and these and other infections are having an impact throughout the country. At the same time, the pipeline of new antibiotics has been drying up—an alarming phenomenon. We need new antibiotics, diagnostics, vaccines and other tools to control and reduce the spread of MRSA and other infections in hospitals and communities.

MRSA, of course, is just part of the growing drug-resistance crisis—there are few or no antibiotics, vaccines, and diagnostics in the pipeline to treat, prevent,
detect, or identify other dangerous, resistant bacteria such as *E. coli*, *Klebsiella species*, *Acinetobacter* and *Pseudomonas aeruginosa*. Several major pharmaceutical companies have abandoned antibiotic R&D altogether in favor of more profitable drugs for chronic conditions like heart disease and arthritis. Rapid diagnostic tests are important as they would enable healthcare professionals to quickly ascertain which organism is causing illness in patients when they arrive at the hospital or doctor's office. This will ensure accurate treatment is employed sooner. In addition, new vaccines would be extremely helpful in preventing resistant infections from taking hold in communities and hospitals. Having the additional therapeutic, preventative, identification, and detection tools that you support in S. 2351 could save many thousands of lives each year.

IDSA, a national medical society representing 8,000 infectious diseases physicians, researchers, and other health care professionals dedicated to promoting health through excellence in infectious diseases research, education, prevention, and patient care, has documented the scope of the drug-resistant bacteria problem and potential solutions in a report published in 2004 called *Bad Bugs, No Drugs: As Antibiotic Discovery Stagnates ... A Public Health Crisis Brews*, available at [www.idsociety.org/badbugsnodrugs](http://www.idsociety.org/badbugsnodrugs).

IDSA supports a three-pillar approach to solve the antimicrobial resistance problem. First, we need new incentives to spur infectious diseases product development such as the R&D tax credit you have proposed in S. 2351. Second, we need to strengthen federal antimicrobial resistance surveillance, prevention and control, and research activities—a comprehensive approach such as has been taken in S. 2313, the “Strategies to Address Antimicrobial Resistance (STAAR) Act”, which you also have co-sponsored, and we applaud you for this. Finally, the United States must begin to appropriately regulate the use of antimicrobials in agriculture and, particularly, stop the use of these valuable drugs to promote growth promotion in food animals—this is an absurd practice which undermines public health. We pledge to continue to work with you and your congressional colleagues to ensure that each of these three essential pillars is enacted.

Should you have any questions, please feel free to contact Robert J. Guidos, JD, IDSA’s director of public policy and government relations at (703) 299-0202 or rguidos@idsociety.org

Sincerely,

 Donald M. Poretz, MD
President