



February 22, 2022

The Honorable Sherrod Brown
United States Senate
503 Hart Senate Office Building
Washington, D.C. 20510

Dear Senator Brown:

On behalf of the American Academy of Allergy, Asthma & Immunology (AAAAI), I am writing to thank you for your leadership on issues related to antibiotic stewardship and emphasize the importance of prioritizing penicillin allergy testing.

Established in 1943, the AAAAI is a professional association with over 7,000 members in the United States, Canada and 72 other countries. This membership includes allergist/immunologists (A/I), other medical specialists, allied health and related healthcare professionals—all with a special interest in the research and treatment of patients with allergic and immunologic diseases.

As you are well aware, the growing threat of antimicrobial resistance (AMR), combined with the dwindling pipeline of novel antibiotics research, requires policies that prevent inappropriate use of antibiotics. Judicious use of antibiotics is critical to slow the growth of resistance. Comprehensive antibiotic stewardship programs should include penicillin allergy testing to determine whether penicillin is appropriate for a patient before prescribing a more expensive or newer antibiotic¹. According to the U.S. Centers for Disease Control and Prevention (CDC), approximately 10 percent of the U.S. population report being allergic to penicillin, yet 9 out of 10 patients reporting an allergy are not actually allergic when formally evaluated. In reality, fewer than one percent of the population is truly allergic to penicillin². As such, it is vital to correctly identify those who are allergic to ensure more appropriate prescribing of antibiotics, which helps combat the growth of antimicrobial resistance and the development of super bugs. More recently, in its 2018 update on antibiotic use in the United States, the CDC cited, “correctly identifying if patients are penicillin-allergic can decrease the unnecessary use of broad-spectrum antibiotics³.”

The growing threat of antimicrobial resistance, combined with the dwindling pipeline of novel antibiotic research requires policies that prevent inappropriate use of antibiotics. As part of the American Board of Internal Medicine Choosing Wisely® program, the AAAAI recommended in 2014 that physicians should not over-use non-beta-lactam antibiotics in patients with a history of penicillin allergy without an appropriate evaluation. Penicillin allergy testing is safe and effective, and can be performed even in critically ill patients and pregnant women. According to published research, an unverified history of penicillin allergy can contribute to higher health care costs, greater risk for adverse effects of alternative

(more)

¹ <https://thehill.com/opinion/healthcare/464014-dont-overlook-penicillin-to-combat-antimicrobial-resistance>

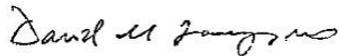
² <https://www.cdc.gov/antibiotic-use/community/pdfs/penicillin-factsheet.pdf>

³ <https://www.cdc.gov/antibiotic-use/stewardship-report/pdf/stewardship-report-2018-508.pdf>

antibiotics, and increased rates of serious antibiotic resistant infections such as methicillin-resistant Staphylococcus aureus (MRSA). People who require penicillin or a penicillin-like drug but have a penicillin allergy that has been verified through skin testing can be offered penicillin desensitization if there is no equally effective alternative antibiotic.

The AAAAI strongly supports more widespread and routine use of penicillin allergy evaluation for patients with a self-reported history of allergy to penicillin. As the former President of the AAAAI and practicing allergist-immunologist based at the Cleveland Clinic, I have dedicated my efforts to advocating and educating the public on the importance of antibiotic stewardship, and ensuring patients have access to proper specialists for penicillin allergy testing for better health outcomes. I appreciate your leadership on these issues and would welcome the opportunity to be a resource to you and your office as you consider these policy issues.

Sincerely,

A handwritten signature in black ink that reads "David M. Lang, MD". The signature is written in a cursive, flowing style.

David Lang, MD, FAAAAI
AAAAI President, 2019-2020

Chairman, Department of Allergy and Clinical Immunology
Respiratory Institute at the Cleveland Clinic