Dear Chair Murray and Ranking Member Burr:

We, the undersigned organizations representing clinicians, researchers, public health, hospitals, patients, and the pharmaceutical and diagnostics industries, thank you for launching a bipartisan effort to strengthen our national preparedness for public health emergencies. Antimicrobial resistance (AMR) and secondary infections threaten our ability to respond effectively to domestic and global crises. We urge you to address the AMR crisis as part of your pandemic preparedness efforts and specifically include the Pioneering Antimicrobial Subscriptions to End Upsurging Resistance (PASTEUR) Act in pandemic preparedness legislation.

The Centers for Disease Control and Prevention estimate that at least 2.8 million individuals in the U.S. suffer from antibiotic-resistant infections each year, and at least 35,000 die. Six resistant pathogens lead to national health care costs exceeding $4.6 billion each year, according to a January 2021 CDC report. Patients with COVID-19 are susceptible to secondary infections at a similar frequency to patients with influenza-like illness, and patients who require mechanical ventilation are most at risk. Since April 2020, CDC has responded to 20 outbreaks of antibiotic resistant pathogens in COVID-19 treatment and observation units. In addition, high levels of antibiotic use, particularly early in the COVID-19 pandemic, may have led to the development of additional resistance highlighting the need for stewardship programs and diagnostics to guide optimal antibiotic use.

The COVID-19 pandemic demonstrates that a robust antibiotic pipeline is a crucial component of preparedness. Unfortunately, it is incredibly challenging for antibiotic developers to earn the return on investments necessary to sustain antibiotic innovation, in part because antibiotics must be used judiciously to preserve their effectiveness. In 2019 alone, two small biotech innovator companies filed for bankruptcy, and in 2021 another announced that it was exiting this area of work. Economic barriers have driven nearly all large pharmaceutical companies from antibiotic research and development and have left smaller companies struggling to stay in business.

The PASTEUR Act would establish a subscription program that provides a predictable return on investments for critically needed new antibiotics through federal payments delinked from antibiotic sales and use. The bill will also incentivize the development of antibiotic and diagnostic stewardship guidelines to encourage appropriate use of antibiotics and includes critical transition measures to stabilize the fragile antibiotic ecosystem in the near-term.

Many authoritative thought-leaders, reports, and commissions have identified the need for economic “pull” incentives, like subscription models and prize funds, to stimulate urgently needed antibiotic
development. Aaron Kesselheim and Kevin Outterson noted over a decade ago that prize proposals “may represent a substantial evolution in the thinking behind global pharmaceutical development, especially for fighting high-priority disease-causing microorganisms and where existing drug development pipelines are weak.”¹ Former FDA Commissioner Scott Gottlieb has also expressed support for incentives for antibiotics, including new payment models that “delink” revenue from use.² The PASTEUR Act is one important piece of the resolution, but this crisis will need a package of policies.

We are also pleased that you plan to consider policies to strengthen medical preparedness and responses systems and ensure medical capacity to provide critical health services during emergencies. Antibiotic stewardship programs have been proven effective in improving patient outcomes, reducing inappropriate antibiotic use, limiting antibiotic resistance and lowering health care costs. During the COVID-19 pandemic, stewardship programs were critical in efforts to successfully launch novel therapies for patients with COVID-19. However, many stewardship programs lacked sufficient resources to sustain stewardship activities during the pandemic. Even prior to the pandemic, many hospitals lacked adequate resources to implement evidence-based stewardship practices fully. PASTEUR would provide support for hospitals to strengthen their stewardship programs and encourage hospitals to report data on antibiotic use and resistance to the CDC National Healthcare Safety Network to enhance our national understanding of antibiotic resistance and evaluate our interventions.

We look forward to working with you on public health preparedness and the challenges facing the antibiotic drug pipeline at the foundation of modern medicine. With your leadership, we can avoid a ‘post-antibiotic’ era with cost-effective incentives and careful stewardship and ensure that future generations have access to these vital medical tools.

Sincerely yours,

American Academy of Allergy, Asthma & Immunology  
American Association of Bovine Practitioners  
American College of Clinical Pharmacy  
American Society for Microbiology  
American Society of Plastic Surgeons  
American Society of Tropical Medicine & Hygiene  
Antibiotic Resistance Action Center, George Washington University  
Antimicrobial Innovation Alliance  
BIO

bioMerieux
BEAM Alliance
Bridge the Gap - SYNGAP Education and Research Foundation
Center for Disease Dynamics, Economics and Policy
Clarametyx Biosciences, Inc.
Coalition for Improving Sepsis and Antibiotic Practices
COPD Foundation
Cystic Fibrosis Foundation
Emory Antibiotic Resistance Center
Emory University School of Medicine/Atlanta VA Medical Center
Genentech, Inc., a member of the Roche Group
Global Coalition on Aging
Health Care Without Harm
HealthyWomen
HIV Medicine Association
Immune Deficiency Foundation
Infectious Diseases Society of America
Integrated Biotherapeutics
Johns Hopkins Center for a Livable Future
Making-A-Difference in Infectious Diseases
Mass Medical Angels
Michigan Antibiotic Resistance Reduction Coalition
Microbion Corporation
National Association of Pediatric Nurse Practitioners
National Athletic Trainers' Association
Novo Holdings
NTM Info & Research
Partnership to Fight Infectious Diseases
Pediatric Infectious Diseases Society
Peggy Lillis Foundation
Revagenix, Inc.
Sepsis Alliance
Shionogi Inc.
SIDR Program, Boston University
Society of Critical Care Medicine
Spero Therapeutics
The Gerontological Society of America
The Stuart B. Levy Center for Integrated Management of Antimicrobial Resistance at Tufts
The Pew Charitable Trusts
Venatorx Pharmaceuticals
Vizient, Inc.