

December 5, 2023

The Honorable Mike Johnson
Speaker
The United States House of Representatives
568 Cannon House Office Building
Washington, DC 20515

The Honorable Hakeem Jeffries
Leader
The United States House of Representatives
2433 Rayburn House Office Building
Washington, DC 20515

The Honorable Steve Scalise
Majority Leader
The United States House of Representatives
2049 Rayburn House Office Building
Washington, DC 20515

The Honorable Katherine Clark
Minority Whip
The United States House of Representatives
2368 Rayburn House Office Building
Washington, DC 20515

The Honorable Tom Emmer
Majority Whip
The United States House of Representatives
464 Cannon House Office Building
Washington, DC 20515

The Honorable Pete Aguilar
Democratic Caucus Chairman
The United States House of Representatives
108 Cannon House Office Building
Washington, DC 20515

Dear United States House of Representatives Leadership:

On behalf of the undersigned organizations representing millions of patients who face serious, acute, and chronic health conditions, we want to bring to your attention and urge you to address the growing crisis of antimicrobial resistance by considering the PASTEUR Act within any moving legislative vehicle to ensure its passage this year. Addressing antimicrobial resistance (AMR) through this important legislation simply cannot wait any longer.

AMR is a significant and rapidly-growing public health threat—in 2019, AMR directly caused an estimated 1.27 million deaths worldwide and played a part in nearly 5 million deaths total, making AMR a leading cause of death globally. Every day we wait to address the AMR crisis is another day that lives are lost. As patients and providers wait to access life-saving treatments, these delays put the entire country—particularly individuals with cystic fibrosis, cancer, organ transplants, and other conditions—at risk. Notably, antimicrobial resistance increases a patient’s risk for developing sepsis, the body’s overwhelming response to infection, which already impacts 1.7 million patients in the U.S. and costs Medicare more than \$41 billion in sepsis-related inpatient and skilled nursing facility admission costs each year. As resistance worsens, the financial and human costs of sepsis will only increase.

Along with patients experiencing sepsis, data from the Centers for Medicare and Medicaid Services published in 2021 found that Medicare beneficiaries account for the majority of cases of both new diagnoses of AMR infections and resulting deaths in United States hospitals, spending hundreds of thousands of additional days in hospitals each year due to AMR and costing taxpayers billions in extra

health care costs annually.¹ These data indicate that efforts to address AMR will not only improve patient outcomes for Medicare beneficiaries but may also yield net savings to the federal government.

The PASTEUR Act is targeted legislation that directly addresses these patients most at risk for AMR. As you may know, the routine but necessary use of antimicrobials during care for patients with cystic fibrosis (CF) and other chronic conditions who experience lung exacerbations, Valley Fever, those who have sustained traumatic injuries like combat veterans and other conditions too often leads to patients battling antimicrobial-resistant infections. For example, the highly contagious methicillin-resistant staphylococcus aureus (MRSA), which can cause invasive infections, sepsis, and death, is found in 2% of the total United States population² but 15.6% of people with CF, highlighting the risk for AMR among chronically ill patients. The growth and spread of these “superbugs” can have devastating consequences. Overall, 2.8 million antimicrobial-resistant infections occur in the U.S every year, leading to over 35,000 deaths.

Despite the increasingly urgent need for antimicrobial products, the marketplace is broken. Antimicrobials are incredibly expensive and time-consuming to develop, command a much lower price than other drugs and they need to be used sparingly to minimize resistance. These factors make it difficult for new products to stay on the market and for their developers to stay in business.

That’s why the PASTEUR Act is so important. PASTEUR establishes a new incentive structure for developing innovative antimicrobial drugs. The bill will create a contract and funding mechanism based on how valuable an antimicrobial product is to patients, not how much of it gets sold. Importantly, PASTEUR will only fund antimicrobials that have been approved by the FDA and meet established innovation criteria. Economic modeling performed by the Center for Global Development suggests that a subscription-based approach to incentivizing antimicrobial development, such as that authorized by the PASTEUR Act, would generate a significant return on investment (ROI) in both the short- and long-term.³ Beyond incentivizing the development of novel antimicrobials, the PASTEUR Act also funds antimicrobial stewardship programs to make sure that the effectiveness of the antimicrobials that we currently have is protected.

The time to address the threat of AMR is now. Without an innovative strategy to address this crisis, antimicrobial resistance will continue to increase, and people will continue to contract and suffer from potentially deadly infections. The millions of patients we represent know all too well how underprepared we are to meet their AMR treatment needs today. If that continues to be the case, we’re woefully unprepared for what lies ahead for all Americans.

Please consider the PASTEUR Act as part of any moving legislative vehicle this year – our patients and all Americans simply cannot wait.

Respectfully,

¹ [Aligning Payment And Prevention To Drive Antibiotic Innovation For Medicare Beneficiaries | Health Affairs](#)

² <https://www.cdc.gov/mrsa/healthcare/index.html#:~:text=Studies%20show%20that%20about%20one,not%20development%20serious%20MRSA%20infections.>

³ Adrian Towse and Rachel Silverman Bonnifield. 2022. “An Ambitious USG Advanced Commitment for Subscription-Based Purchasing of Novel Antimicrobials and Its Expected Return on Investment.” CGD Policy Paper 277. Washington, DC: Center for Global Development.

Boomer Esiason Foundation
Cancer*Care*
Coalition of Skin Diseases
COPD Foundation
Cystic Fibrosis Foundation
HealthHIV
HealthyWomen
Immune Deficiency Foundation
MyCARE (Mycology, Advocacy, Research and Education)
National Organization for Rare Disorders
Peggy Lillis Foundation
Sepsis Alliance
Spina Bifida Association
The Bonnell Foundation: Living with cystic fibrosis