

PACCARB

Presidential Advisory Council on Combating Antibiotic-Resistant Bacteria

Meeting Summary

Eighth Public Meeting of the Presidential Advisory Council on Combating Antibiotic-Resistant Bacteria

**March 2, 2018
Teleconference**

Call to Order, Roll Call, and Rules of Engagement

Jomana F. Musmar, M.S., Ph.D., Acting Designated Federal Officer

Dr. Musmar called the meeting to order at 9:03 a.m. She explained the rules governing the Presidential Advisory Council on Combating Antibiotic-Resistant Bacteria (PACCARB) under the Federal Advisory Committee Act and conflict-of-interest guidelines. She then called the roll. (See Appendix A for the list of participants.) The purpose of the teleconference was to vote on two resolutions put forth by PACCARB's Immediate Action Subcommittee and intended for U.S. Department of Health and Human Services (HHS) Secretary Alex M. Azar II (see Appendices B and C).

Welcome and Overview

Martin Blaser, M.D., Chair, and Lonnie J. King, D.V.M., M.S., M.P.A., ACVPM, Vice Chair

Dr. Blaser and Dr. King welcomed the participants. Dr. Blaser thanked the outgoing PACCARB liaison members, saying each had represented their organizations with distinction and passion:

- Jay C. Butler, M.D., of the Association of State and Territorial Health Officials
- Richard Carnevale, V.M.D., of the Animal Health Institute
- Sherrie Dornberger, R.N., CDONA, GDCN, CDP, CADDCT, FACDONA, of the National Association of Directors of Nursing Administration in Long-Term Care
- Elizabeth Allen Wagstrom, D.V.M., M.S., of the National Pork Producers Council

Dr. Blaser welcomed the new liaisons:

- Alice L. Johnson, D.V.M., of the National Turkey Federation
- Elaine Larson, Ph.D., RN, of the American Nurses Association
- Tiffany Lee, D.V.M., Ph.D., M.S., of the North American Meat Institute
- Kathryn L. Talkington, of the Pew Charitable Trusts (returning liaison)
- Denise M. Toney, Ph.D., of the Association for Public Health Laboratories

Public Comment

The participants reviewed written comments submitted in advance by U.S. Representative Louise Slaughter (New York); Christina Koo, Director of Global Health Science and Nutrition Policy for Ocean Spray Cranberries, Inc.; and the Food Animal Concerns Trust (FACT).

Speaking on behalf of FACT and the Keep Antibiotics Working (KAW) Coalition, Steven Roach strongly recommended that PACCARB support both of the proposed resolutions. In response to a letter from FACT and several others to the U.S. Department of Agriculture's (USDA's) National Institute of Food Agriculture (NIFA) asking about planned reductions in funding for research on antimicrobial resistance (AMR), the NIFA Director said his organization had spent \$20 million on research in the previous 5 years, but the fiscal year 2018 funding was only \$3 million. That represents a drastic drop in funding, and no dedicated funding beyond the \$3 million has been identified. Therefore, said Mr. Roach, the PACCARB resolution regarding funding is very important. FACT and KAW also support PACCARB's second resolution, which would put the Council on a firmer foundation, said Mr. Roach.

In addition, FACT encourages PACCARB to review the World Health Organization's (WHO's) guidelines on the use of medically important antimicrobials in food-producing animals and to consider those guidelines when making recommendations. FACT's written comments also address misconceptions about the WHO guidelines and how they were created, said Mr. Roach.

Immediate Action Subcommittee Resolution No. 1: Council Discussion and Vote

Dr. King summarized the contents of the resolution, which makes the case for two specific recommendations to the Secretary:

- The 2017 funding levels for the Centers for Disease Control and Prevention (CDC) Antibiotic Resistance Solutions Initiative and the Agency for Healthcare Research and Quality (AHRQ) health-care-associated infection and antibiotic resistance programs must be maintained or increased in 2018 and beyond.
- The dedicated funding provided by USDA's NIFA to support AMR research in agriculture, from farm to fork, must continue.

Thomas R. Shryock, Ph.D., pointed out that the Immediate Action Subcommittee's second resolution begins by congratulating Sec. Azar on his appointment. It was agreed that, pending approval of both documents, HHS staff will remove the numbers in the titles of the resolutions and package them such that the congratulatory language appears in the first document sent to the Secretary.

Ramanan Laxminarayan, Ph.D., M.P.H., noted that the letter specifies the amount of funding allotted for CDC in 2017 but not funding amounts for AHRQ or NIFA. He suggested adding those figures if they are readily available. Dr. King said earlier drafts included more figures, but those details were removed to avoid distraction. Rather than add information, Dr. Musmar proposed deleting the amount of funding allotted to CDC. The consensus was to make no changes.

Dr. Laxminarayan asked how the recommendations regarding USDA would be relayed to the USDA Secretary. Dr. King responded that USDA Secretary Sonny Purdue will receive copies of the documents sent to Sec. Azar. Dr. Shryock said the grammar could be improved. Dr. Blaser responded that the goal of the Immediate Action Subcommittee was to produce a document quickly. The document in question was to be reviewed at the January PACCARB meeting (which was canceled); in the interest of time, Dr. Blaser hoped the document could be approved and sent to the Secretary as soon

as possible if the content adequately conveys the message.

Vote: PACCARB voting members unanimously approved the resolution as written.*

Action: Dr. Musmar and staff will finalize the resolution for signature by PACCARB members and forward it to Sec. Azar as soon as possible.

Immediate Action Subcommittee Resolution No. 2: Council Discussion and Vote

Dr. Blaser summarized the contents of the resolution, which makes the case that Federal efforts to address antibiotic-resistant bacterial infections must be included in HHS' all-hazards approach to protecting the nation and in legislation. It states:

Although initiated by Executive Order, we unanimously recommend that the PACCARB be codified into law to sustain the One Health partnerships formed and continue its mission to produce reports and recommendations that influence Federal CARB-related activities, both domestic and abroad.

Dr. Carnevale asked whether codifying PACCARB under law would result in creation of a permanent body or whether the Council would continue to have members serve two–three-year terms. Dr. Blaser said Congress would determine the structure of the Council in legislation; he suspected that any future iteration of PACCARB would follow the same format as other Federal advisory councils, which have rotating membership.

Vote: PACCARB voting members unanimously approved the resolution as written.†

Action: Dr. Musmar and staff will finalize the resolution for signature by PACCARB members and forward it to Sec. Azar as soon as possible.

Final Comments

Dr. Blaser thanked the members and all those who participated. He said PACCARB may opt for more virtual meetings in the future because of constraints but also because the in-person meetings have led to effective relationships that can translate to successful virtual meetings. Dr. King again thanked the outgoing liaison members and welcomed the incoming liaisons.

Dr. Musmar said the next in-person PACCARB meeting, scheduled for May 16, 2018, will follow the agenda originally intended for the January 2018 meeting. She also noted that seven voting positions on PACCARB will be open soon; she advised all those interested to keep an eye out for a request for nominations to fill those vacancies, which should be posted soon. The meeting was adjourned at 9:38 a.m.

*Some members voted absentee via e-mail.

† Some members voted absentee via e-mail.

Appendix A: Presidential Advisory Council on Combating Antibiotic-Resistant Bacteria (PACCARB) Members

March 2, 2018 Teleconference

PACCARB Voting Members Present

Martin J. Blaser, M.D., Chair
Lonnie J. King, D.V.M., M.S., M.P.A., ACVPM, Vice Chair
Michael D. Apley, D.V.M., Ph.D., DACVCP
Helen W. Boucher, M.D., FIDSA, FACP
Angela Caliendo, M.D., Ph.D., FIDSA
Sara E. Cosgrove, M.D., M.S.
Peter Robert Davies, B.V.Sc., Ph.D.
Kent E. Kester, M.D., FACP, FIDSA, FASTMH
Ramanan Laxminarayan, Ph.D., M.P.H.
Aileen M. Marty, M.D., FACP
John H. Rex, M.D.
Thomas R. Shryock, Ph.D.
Randall Singer, D.V.M., M.P.V.M., Ph.D.
Robert A. Weinstein, M.D.

Organizational Liaisons Present

Animal Health Institute – Prior PACCARB Member

Richard Carnevale, V.M.D.

Association for Public Health Laboratories

Denise M. Toney, Ph.D.

Association of State and Territorial Health Officials – Prior PACCARB Member

Jay C. Butler, M.D.

National Association of Directors of Nursing Administration in Long-Term Care – Prior PACCARB Member

Sherrie Dornberger, R.N., CDONA, GDCN, CDP, CADDCT, FACDONA

National Turkey Federation

Alice L. Johnson, D.V.M.

North American Meat Institute

Tiffany Lee, D.V.M., Ph.D., M.S.

Pew Charitable Trusts

Kathryn L. Talkington

Ex Officios Present

U.S. Department of Health and Human Services

Marjory Cannon, M.D. (for Shari Ling, M.D.), Centers for Medicare and Medicaid Services

Dennis M. Dixon, Ph.D., National Institute of Allergy and Infectious Diseases, National Institutes of Health

Lawrence D. Kerr, Ph.D., Office of Pandemics and Emerging Threats, Office of Global Affairs
Rima Khabbaz, M.D., National Center for Emerging and Zoonotic Infectious Diseases, Centers for
Disease Control and Prevention
Daniel W. Sigelman, J.D., Senior Advisor, Office of Public Health Strategy and Analysis, Office of the
Commissioner, Food and Drug Administration

U. S. Department of Defense

Paige Waterman, M.D., FACP, FIDSA, Antimicrobial Resistance Lead, Armed Forces Health
Surveillance Center-Global Emerging Infectious Disease Surveillance

U. S. Department of Agriculture

Jeffrey Silverstein, Food Safety and Inspection Service
David Goldman, M.D., Chief Medical Officer and Assistant Administrator, Office of Public Health
Science, Food Safety and Inspection Service
Neena Anandaraman (for Brian McCluskey, D.V.M., Ph.D.), Animal and Plant Health Inspection
Service

Designated Federal Officer

Jomana F. Musmar, M.S., Ph.D., Advisory Council Committee Manager, Office of the Assistant
Secretary for Health, U.S. Department of Health and Human Services

Advisory Council Staff

MacKenzie Robertson, Committee Management Officer, Office of the Assistant Secretary for Health,
U.S. Department of Health and Human Services
Ayah O. Wali, M.P.H., Committee Management Officer, Office of the Assistant Secretary for Health,
U.S. Department of Health and Human Services

Contract Support Staff

Mark Kazmierczak, Ph.D., Gryphon Scientific, LLC

Appendix B: Immediate Action Subcommittee Resolution No. 1

1 March 2, 2018

2

3

4 The Honorable Alex M. Azar II

5 Secretary, The Department of Health and Human Services

6 200 Independence Avenue, S.W.

7 Washington, DC 20201

8

9 Dear Secretary Azar,

10 On behalf of the Presidential Advisory Council on Combating Antibiotic Resistant Bacteria (PACCARB),
11 we wish to bring to your attention two pivotal issues that concern both veterinary and human medicine
12 that, if left unaddressed, would undermine the collective U.S. government effort to combating antibiotic
13 resistance. **In brief, the current federal efforts that are using One Health approaches to fight
14 antibiotic-resistance are at risk of being undermined by significant loss or redirection of funding.**

15 The National Action Plan on Combating Antibiotic Resistant Bacteria (NAP) includes critical milestones
16 that address issues related to both human and animal health. Protecting human health by ensuring
17 animal health is the crux of this One Health approach, and is exemplified by the CDC's inclusion of
18 commonly food borne infections (including *Campylobacter*, *Salmonella*, and *Shigella*) in their list of the
19 top drug-resistant threats to the United States.¹ The PACCARB members applaud the increases in funds
20 during the last budget cycle in support of key programs and activities that help agencies achieve the
21 milestones set forth in the NAP. Because of this support, researchers and educators have made critical
22 progress to address the profound problem of antibiotic resistance and a new positive momentum has
23 been achieved. However, PACCARB members are deeply concerned that the hard-earned gains that
24 have been made in combating resistance may not continue, and important results of new programs that
25 that were recently started may never be realized.

26 The PACCARB believes that we are at a strategic point in time for advancing our collective work to
27 reduce antibiotic resistance, find alternatives to antibiotics, prevent infection and preserve effective
28 antibiotics for both animal and human populations. The upcoming fiscal allocation decisions to be made
29 may have dramatic negative impacts on the United States' ability to address antibiotic-resistance if
30 funds are diverted from their current missions. Therefore, we propose the following:

- 31 **1. The 2017 funding levels for the Centers for Disease Control and Prevention (CDC) Antibiotic
32 Resistance Solutions Initiative (ARSI) and for the Agency for Healthcare Research and Quality
33 (AHRQ) healthcare-associated infection and antibiotic-resistance (HAI/AR) programs must be
34 maintained or increased in 2018 and beyond.**

35 In the past decade, we have seen encouraging early declines in occurrences of antibiotic-resistant
36 bacterial infections in hospitals, largely as a result of programs initiated by the CDC and AHRQ. These
37 programs have led to much lower rates of device-related (e.g., intravenous catheter) and other
38 healthcare-associated infections (e.g., MRSA bloodstream infections). **All of these gains will be lost if
39 the critical mission funding for CDC and AHRQ HAI/AR programs is not maintained.** The CDC's ARSI,

¹ CDC source available at: https://www.cdc.gov/drugresistance/biggest_threats.html

40 which funds state-level HAI/AR prevention programs, will potentially lose much of its \$163 million FY17
41 appropriation in 2018. Additionally, AHRQ faces a potentially significant budget cut which threatens the
42 critical research and the implementation of HAI/AR prevention strategies.

43 Cuts to the CDC's ARSI funding will jeopardize the success of its numerous efforts, such as the
44 nationwide Antibiotic Resistance Laboratory Network and investments in infrastructure to effectively
45 detect and respond to HAI/AR occurrences. AHRQ-funded research has identified effective approaches
46 for preventing HAI and the spread of AR, and loss of AHRQ funding would prevent translation and
47 implementation of these strategies. All of these outcomes would negatively impact our goal of
48 eliminating the approximately 2 million infections due to antibiotic-resistant bacteria that occur in the
49 United States each year.

50 **2. The dedicated funding provided by U.S. Department of Agriculture's National Institute of Food**
51 **and Agriculture (USDA-NIFA) to support research focused on antimicrobial-resistance in**
52 **agriculture, from farm to fork, must continue.**

53 In 2017, NIFA provided substantial amounts of funding dedicated to supporting research on
54 antimicrobial resistance (AMR), which enabled significant gains in our understanding of the emergence
55 and dissemination of antibiotic-resistant bacteria and provided knowledge used for on-farm programs to
56 prevent and reduce antibiotic resistance. **It is imperative that research funds be made available to**
57 **build on this exceptional progress, which will improve animal health and welfare, food safety and**
58 **security, and environmental and public health.**

59 The PACCARB understands that NIFA is considering the integration of current AMR research programs
60 into a new and broader program in Sustainable Agriculture Systems (SAS). While we support the concept
61 of institutional trans-disciplinary research teams, which could enhance a One Health approach to AMR,
62 **we strongly encourage the USDA to continue with its specified ongoing AMR research grants and, in**
63 **addition, designate some of the new SAS funds explicitly for AMR projects.** The total funding levels
64 dedicated for AMR should be at least equal to those of 2017, and hopefully greater, owing to its
65 tremendous positive impact on both animal and human health, and the great need in the field.

66 The PACCARB remains diligent in its mission to combat antibiotic resistance, and will continue to
67 support our federal partners aligned to a One Health approach in fulfilling the milestones as set in the
68 NAP. Your support in preserving and expanding essential funding to programs that specifically address
69 the emergence and spread of antibiotic resistance will help ensure the preservation of our nation's
70 health—across the human, animal and environmental domains—in the face of this imminent public
71 health and security threat to the U.S. and globally.

72 Regards,

73

74 Martin J. Blaser, M.D.
75 Chair

Lonnie J. King, D.V.M., M.S., M.P.A., ACVPM
Vice Chair

76

77 cc: Sonny Perdue, D.V.M., U.S. Secretary of Agriculture

Appendix C: Immediate Action Subcommittee Resolution No. 2

[DRAFT] March 2, 2018

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29
30
31
32
33
34
35
36
37
38
39
40

The Honorable Alex M. Azar II
Secretary, The Department of Health and Human Services
200 Independence Avenue, S.W.
Washington, DC 20201

Dear Secretary Azar,

On behalf of the Presidential Advisory Council on Combating Antibiotic-Resistant Bacteria (PACCARB), we would like to congratulate you on your new post. With your support, we are eager to continue fulfilling our mission to address one of the foremost public health emergencies facing our nation and the international community, antibiotic-resistant bacterial infections in humans and animals.

As with other biological threats posing national security, health, and economic concerns, the danger posed by antibiotic-resistant bacterial infections is high, but carries an even greater probability for future harm with far-reaching, short- and long-term, domestic and international implications. Morbidity and mortality resulting from such infections is already prevalent in the U.S. and growing. **Therefore, the Federal efforts to address antibiotic-resistant bacterial infections must be included as part of the Department’s all-hazards approach to protecting our nation and in legislation to be maintained as a priority.**

The PACCARB, along with other Federal efforts to combat antibiotic-resistant bacteria (CARB), were included in Executive Order 13676 in 2014. Since our establishment in 2015, PACCARB has worked closely with our Federal partners in collaboration with external stakeholders to evaluate and recommend policy actions that will facilitate the Federal implementation of milestones consistent with the White House National Action Plan on CARB. With the Department’s support and the strong dedication of our members thus far, we have successfully produced two influential reports in just two years.¹ Furthermore, the PACCARB’s uniquely diverse membership composition allows us to utilize a One Health approach emphasizing the integration of human, animal, and environmental domains in all of our recommendations. We also serve as a national platform for the interdisciplinary partnership of external and Federal stakeholders committed to combating antibiotic resistance. These cooperative efforts to bring scientific and technical expertise to the problem need to be supported by Federal laws to ensure long-term continuity because the challenges of antibiotic resistance will persist.

The PACCARB has made substantial progress since 2015 and we are committed to continue our important work and influence well beyond 2020. **Although initiated through Executive Order, we unanimously recommend that the PACCARB be codified into law to sustain the One Health partnerships formed and continue its mission to produce reports and recommendations that influence federal CARB-related activities, both domestic and abroad.**

We look forward to another productive year and remain diligent in providing you, and the President, with our recommendations on how to address the growing biological security threat of antibiotic resistance in humans and animals.

Regards,

¹ All PACCARB reports can be viewed by visiting: <https://www.hhs.gov/ash/advisory-committees/paccarb/reports-and-recommendations/index.html>

41

42 Martin J. Blaser, M.D.

43 Chair

Lonnie J. King, D.V.M., M.S., M.P.A., ACVPM

Vice Chair