Dear Speaker Pelosi and Leaders McCarthy, Schumer and McConnell:

On behalf of the undersigned organizations representing health care providers, public health professionals, scientists, patients, and the pharmaceutical and diagnostics industries, we write to urge you to enact the PASTEUR Act in an end of year package to address the growing crisis of antimicrobial resistance (AMR) by strengthening the antimicrobial pipeline to ensure clinicians have the innovative products they need to treat patients, and ensuring antimicrobials are used appropriately. Every day we wait to address the crisis in the antimicrobial ecosystem is another year patients and providers must wait to have access to life saving medicines.

In 2019, an estimated 1.27 million deaths worldwide were directly caused by AMR, and AMR played a part in nearly 5 million deaths. This makes AMR a leading cause of death globally. It is also clear that the COVID-19 pandemic exacerbated AMR. In 2020, the U.S. experienced a 15% increase in AMR infections and deaths due to COVID-19, and experts do not expect a return to pre-pandemic levels without concerted action. Because antimicrobials enable modern medicine, growing rates of resistance and a shrinking arsenal of products jeopardize our ability to safely provide organ transplants, cancer chemotherapy and surgeries such as hip and knee replacements and cesarean sections. Additionally, AMR is a significant economic burden here in the U.S.; the direct healthcare costs of treating only six of the most threatening multidrug-resistant pathogens is estimated to be $4.6 billion per year.

Despite the urgent and increasing need for novel antimicrobials to treat superbugs, the antimicrobial ecosystem is broken and unable to meet patient needs. The current pipeline has only 43 antibacterial therapeutics in clinical development worldwide – only 19 of which are for the most threatening gram-negative pathogens – a critical area of unmet need. We know that the pipeline is already inadequate to address current resistant threats, let alone those that will come in the future. This reinforces the need to urgently stimulate investment in novel antimicrobials to quickly bolster the pipeline.

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1 https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(21)02724-0/fulltext
Novel antimicrobials must be used judiciously to limit the development of resistance, so payment based on volume fails to drive innovation. PASTEUR’s subscription model is an innovative way to pay for novel antimicrobials that will revitalize the pipeline and support appropriate use. Under PASTEUR, the federal government can enter into contracts with innovators to pay for a reliable supply of novel antimicrobials with payments that are decoupled from the volume of antimicrobials used. Importantly, the federal government only pays once – the subscription payment is all-inclusive, and PASTEUR only pays for success. Furthermore, PASTEUR will only pay for FDA approved treatments that are available to patients and meet unmet AMR needs—those that will have a big impact for patients and public health.

The delinked approach is similar to Project Bioshield, which provides multi-year funding to support procurement of medical countermeasures (MCM) for national security. Antimicrobials, like MCM, have a very limited commercial market. PASTEUR will provide novel antimicrobial innovators with a more predictable return on investment necessary to revitalize the antimicrobial pipeline—just like Project Bioshield has done for MCMs.

PASTEUR would also provide new funding for rural, critical access and safety net hospitals to support antimicrobial stewardship, to ensure that antimicrobials are used appropriately to limit the development of resistance, and to ensure that the vulnerable patients served by these hospitals can have access to the benefits of antimicrobial stewardship.

In his September 2022 remarks to the World AMR Congress, Secretary Becerra reiterated the Administration’s commitment to this issue, as evidenced by the inclusion of a proposal that aligns with PASTEUR in the President’s budget request for 2023, which was endorsed in the Senate released Labor-Health and Human Services appropriations bill for 2023. PASTEUR has over 60 bipartisan cosponsors and the broad support of a diverse array of stakeholders. Delays in the passage of PASTEUR are delays in the development of novel antimicrobials to treat highly resistant, life-threatening infections—delays that many patients, including those particularly susceptible to infections, such as patients with cystic fibrosis, cancer, or organ transplants, cannot afford.

We urge you to enact PASTEUR in an end of year package in 2022.

Thank you,

Organization (as it will read on the letter)
American Academy of Allergy, Asthma & Immunology
AdvaMedDx
AGiLeBiotics BV
Alliance for Aging Research
Alliance for Biosecurity
Alpha-1 Foundation
American Association for Dental, Oral, and Craniofacial Research
American Association of Bovine Practitioners
American Association of Small Ruminant Practitioners
American College of Allergy, Asthma & Immunology
American College of Emergency Physicians
American College of Preventive Medicine
American Dental Association
American Gastroenterological Association
American Kidney Fund
American Liver Foundation
American Society for Biochemistry and Molecular Biology
American Society for Microbiology
American Society of Plastic Surgeons
American Society of Transplant Surgeons
American Urological Association
Amputee Coalition
AN2 Therapeutics
Antibiotic Resistance Action Center, George Washington University
Antimicrobial Innovation Alliance
Arizona Medical Association
ArrePath Inc
Arthritis Foundation
Asociación de Oatomizados de Puerto Rico, Inc.
Asociación Puertorriqueña de Diabetes
Association for Professionals in Infection Control and Epidemiology
Autoimmune Association
BD (Becton, Dickinson and Co.)
BIO
Bioomix
BioVersys AG
Black, Gifted & Whole Foundation
GARDP North America
Genentech
Georgia State Medical Association, Inc.
Global Coalition on Aging
Global Health Technologies Coalition (GHTC)
GSK
HCA Healthcare
Healthcare Leadership Council
HealthHIV
Healthy Men Inc.
HealthyWomen
Hesed Medical Associates
Hezekiah Beardsley Connecticut Chapter of the American Academy of Pediatrics
HIV Medicine Association
ICAN, International Cancer Advocacy Network
Immune Deficiency Foundation
Incubate
Infectious Disease Association of California
Infectious Diseases Society of America
International Foundation for Arthritis
Invitris
Johns Hopkins Center for a Livable Future
Kathera Bioscience Inc
Kentucky Academy of Family Physicians
Kern Medical
Kineticos Life Sciences
La Jolla Pharmaceuticals/Innoviva
Locus Biosciences
Louisiana Hemophilia Foundation
ONCORD, Inc.
One Health Trust (formerly CDDEP)
Oragenics, Inc.
Osteopathic Physicians & Surgeons of California
Partnership to Fight Chronic Disease
Partnership to Fight Infectious Disease
Peggy Lillis Foundation
Peptilogics Inc.
Phare Bio
Pharmaceutical Research and Manufacturers of America (PhRMA)
Prevent Blindness
Qpex Biopharma
SCYNEXIS
Sepsis Alliance
Seres Therapeutics
Shionogi Inc.
Social Innovation in Drug Resistance, Boston University
Society of Hospital Medicine
Society of Infectious Diseases Pharmacists (SIDP)
Spexis
Spina Bifida Association
Stuart B. Levy Center for Integrated Management of Antimicrobial Resistance
TB Alliance
The Bonnell Foundation: Living with cystic fibrosis
The Broad Institute of Harvard and MIT
The Gerontological Society of America
The National Association of Pediatric Nurse Practitioners
The Pew Charitable Trusts
Triage Cancer
Trust For America's Health
UCSF
United Spinal Association
University of Zurich
Utah Nurse Practitioners
UTILITY therapeutics Ltd
Valanbio Therapeutics
Valley Fever Institute
Venatorx Pharmaceuticals Incorporated
Vizient, Inc.
Vocespr.org