

**Chair Cathy McMorris Rodgers
House Energy and Commerce Committee
Oversight & Investigations Hearing
“Antimicrobial Resistance: Examining an Emerging Public Health
Threat”
April 28, 2023**

Thank you, Chair Griffith, for convening this hearing about the growing threat of antimicrobial resistance, or AMR, facing our nation, and indeed, the world.

Thank you to our panel of witnesses here today.

More than 2.8 million antibiotic-resistant infections occur in the U.S. each year, resulting in more than 35,000 deaths. In 2019, an estimated 1.27 million deaths globally were a direct result of drug resistance.

AMR is a very real threat. In recent days, we’ve had eye drop recalls due to contamination by an extensively drug-resistant strain of bacteria that has led to multiple deaths and loss of vision among patients in 16 states.

This outbreak strain has never been reported in the United States prior to this outbreak.

And just this week, a hospital in downtown Seattle announced an outbreak of antibiotic-resistant bacteria often found in health care settings, which infected 31 people, 4 of whom have died.

This morning, we seek to gain a better understanding of AMR, examine current efforts to address this ongoing public health threat, and explore innovative paths forward.

Antibiotics, are powerful, life-saving drugs. Their discovery truly revolutionized modern medicine.

In addition to their use to protect human lives, they are used in veterinary care to treat illnesses in animals and keep our food supply safe from harmful pathogens.

Globally and in the U.S., antimicrobials, particularly antifungals, are a relatively inexpensive way to control plant diseases and protect agricultural crops.

Over time, however, through natural adaptation and use, microbes can develop into “super bugs,” making drugs ineffective against them.

AMR is a complex web that can develop and spread through a variety of settings including health care facilities, food production, the community, and the environment.

There is a need to learn more about AMR, its underlying causes, and innovative solutions to address this threat.

We also must examine and understand the already existing efforts and initiatives underway ... and assess how these programs are operating, including any successes and shortcomings.

In 2016, Congress appropriated an unprecedented \$160 million of new investments for CDC to fight AMR. By fiscal year 2022, this appropriation has increased to more than \$182 million.

We are working to understand how this funding has been used, what initiatives CDC is undertaking, and how effective they have been.

In addition to CDC funding, there are a countless number of HHS interagency efforts focused on AMR, including the creation of numerous federal taskforces and committees, such as the Presidential Advisory Council on Combating Antibiotic-Resistant Bacteria and the Combating Antibiotic-Resistant Bacteria Taskforce, as well as an array of national plans, strategies, directives, databases and monitoring systems, guidance documents, toolkits, and guides ...

And these efforts are not restricted to HHS. By my count, the USDA, DOD, State Department, EPA, USAID, VA, and Interior each have their own individual currently existing initiatives and programs. Several subagencies within these agencies also have separate programs. HHS has at least 8 subagencies with individual initiatives

The fact that AMR continues to be a growing health burden despite such heavy investment of resources is alarming. I am hopeful our witnesses here today will be able to provide greater insight into why this is the case and how we can improve our ongoing efforts to address this problem.

CONCLUSION

Thank you, Ranking Member Pallone and my colleagues across the aisle, for continuing to work with us.

I look forward to today's hearing as we continue to explore the increasing burden and threat of AMR facing our nation and world.

Thank you, I yield back.