

CDC—Detect and Protect Against Antibiotic Resistance

FY 2015 President’s Budget Request | \$30 Million

Antibiotic Resistance (AR) Initiative

Establishes a robust network that can “detect” the deadliest AR threats and “protect” patients and communities—saving lives and healthcare costs.

Priority Areas for AR Investments

- Support a “Detect” network of five regional labs that will characterize emerging resistance and rapidly identify outbreaks of dangerous AR threats
- Scale up healthcare prevention collaboratives focused on improving antibiotic use and preventing deadly infections caused by *Clostridium difficile* (*C. diff*), carbapenem-resistant enterobacteriaceae (CRE), *Pseudomonas*, and methicillin-resistant *Staphylococcus aureus* (MRSA)
- Improve outpatient antibiotic prescribing and target community AR threats including resistant *Salmonella*, and drug-resistant gonorrhea
- Establish lab library of resistant isolates to help support drug and diagnostic development

Antibiotic Resistance is a rapidly growing threat to our nation and the world. Some antibiotic resistant infections are already untreatable. As AR grows, the antibiotics used to treat infections do not work as well or at all. The loss of effective antibiotic treatments can cripple the ability to fight routine infectious complications of asthma and arthritis. It will also undermine treatment of infectious complications in patients with other diseases such as diabetes and cancer. Each year in the United States it’s estimated that over 2 million illnesses and about 23,000 deaths are caused by AR. Without CDC’s dedicated work to stop AR now, minor infections can become life threatening and put at risk the ability to perform routine surgeries and treat diseases.

A total of **\$30 million** is requested for FY 2015 in CDC’s Budget Authority for the Detect and Protect Against AR Initiative.

Investing \$30 million each year in CDC’s AR Initiative

FY 2015	FY 2019
↓ 15% decline in <i>C. diff</i> , “deadly diarrhea”	↓ 50% decline in healthcare-associated <i>C.diff</i>
↓ 10% decline in healthcare-associated CRE, “nightmare” bacteria	↓ 50% decline in healthcare-associated CRE
↓ 6% decline in multi-drug resistant <i>Pseudomonas</i> and ↓ 6% decline in invasive MRSA	↓ 30% decline in healthcare-associated drug-resistant <i>Pseudomonas</i> and ↓ 30% decline in invasive MRSA
↓ 5% decline in multi-drug resistant <i>Salmonella</i>	↓ 25% decline in drug-resistant <i>Salmonella</i> infections
↑ 5x increase for AR isolates tested through regional labs to help support drug and diagnostic development	↑ At least 10x more drug susceptibility testing for high-priority pathogens
	Nationwide implementation of CDC antibiotic protection tools and improved prescribing in U.S. acute-care hospitals and outpatient settings

Estimated minimum number of illnesses and deaths caused by AR*:

At least  **2,049,442** illnesses,

 **23,000** deaths

*bacteria and fungus included in this report



For more information, please visit www.cdc.gov/budget



Centers for Disease Control and Prevention