AR Solutions *In Action*

CDC's Investments to Combat Antibiotic Resistance Threats

FISCAL YEAR 2019

DISTRICT OF COLUMBIA

$1,429,814

Funding for AR Activities
Fiscal Year 2019

FUNDING TO STATE HEALTH DEPARTMENTS

$452,094

RAPID DETECTION & RESPONSE: State, territory, and local public health partners fight antibiotic resistance in healthcare, the community, and food. Programs use the AR Lab Network to rapidly detect threats and implement prevention, response, and antibiotic stewardship to stop the spread of resistant germs.

With 2018 funding, D.C. dramatically improved laboratory capacity and epidemiology response. A new laboratory-epidemiology coordinator increased submission of carbapenem-resistant organisms by conducting in-person visits at clinical laboratories, hosting an outreach forum, and facilitating the transfer of screening swabs between clinical laboratories and the AR Lab Network. D.C. also expanded infection control expertise to assist healthcare facilities contain AR threats.

$62,849

FOOD SAFETY projects protect communities by rapidly identifying drug-resistant foodborne bacteria to stop and solve outbreaks and improve prevention.

Washington, D.C. uses whole genome sequencing to track and monitor local outbreaks of *Listeria*, *Salmonella*, *Campylobacter*, and *E. coli* and uploads sequence data into PulseNet for nationwide monitoring of outbreaks and trends. In Fiscal Year 2020, Washington, D.C. will continue monitoring these isolates for resistance genes. When outbreaks are detected, local CDC-supported epidemiologists investigate the cases to stop spread.

$5,966

FUNGAL DISEASE projects improve our ability to track antifungal resistance and stop it from spreading.

With funding for fungal disease surveillance, D.C. increased their ability to identify fungal diseases, monitor for new and emerging resistance, and implement strategies to prevent its spread in high-risk areas. Improving detection for fungal diseases, like *Candida auris*, means patients receive appropriate treatment while reducing unnecessary antibiotic use.

This data represents CDC's largest funding categories for AR. It shows extramural funding that supports AR activities from multiple funding lines.

AR: antibiotic resistance **HAI:** healthcare-associated infection

CDC provides critical support in the U.S. and abroad to protect people from antibiotic resistance.

www.cdc.gov/ARinvestments

U.S. Department of Health and Human Services
Centers for Disease Control and Prevention

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FISCAL YEAR 2019

DISTRICT OF COLUMBIA
AR Investments (cont.)

$12,000

GONORRHEA RAPID DETECTION & RESPONSE works with state and local epidemiology and laboratory partners to test for and quickly respond to resistant gonorrhea to stop its spread in high-risk communities. Only one treatment option remains for gonorrhea and resistance continues to grow.

To help inform national treatment guidelines for gonorrhea, Washington, D.C. participates in the Gonococcal Isolate Surveillance Project (GISP), testing how well antibiotics work on laboratory samples from sentinel STD clinics, which often are the first to detect the threat.

FUNDING TO UNIVERSITIES & HEALTHCARE PARTNERS

$646,905

CENTER FOR DISEASE DYNAMICS, ECONOMICS & POLICY: Discovering & Implementing What Works

The Modeling Infectious Diseases in Healthcare Network (MInD-Healthcare) is a virtual laboratory where researchers can investigate factors that drive spread of HAIs and simulate prevention strategies to estimate their benefits in a timely and cost-effective manner. Investigators will use data to inform regional health policy decisions for hospital interventions by examining transfer of patients between facilities. Learn more: www.cdc.gov/hai/research

$250,000

Pan American Health Organization (PAHO): Global Expertise & Capacity Enhancements

CDC's global work to combat AR prevents the importation of AR threats into the United States. Experts are working throughout Latin America to implement national policy, guidelines, and tools to strengthen infection prevention and control capacities to decrease HAI burden and contain communicable diseases at the healthcare facility level. PAHO supports countries to establish national AR surveillance systems to report laboratory and epidemiology information.

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