Res. A-03-17

Date: 12/6/16

Title: Endorse Restriction of Antibiotic Use in Food Animals

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Endorsed by: Northbay CAFP Chapter

WHEREAS, antibiotic resistance in the US is an urgent and increasing threat to public health\(^1\), and

WHEREAS, every year in the US there are two million antibiotic resistant infections causing 23,000 human deaths \(^2\), and

WHEREAS, in the medical community, there is large consensus that the judicious stewardship of antibiotics is critical to reducing antibiotic resistance\(^3\), and

WHEREAS, in 2014, 70 percent of all antibiotics in the US were used on food animals\(^4\), therefore any campaign to address antibiotic stewardship is incomplete without addressing use of antibiotics in food animal production\(^5\) and

WHEREAS, the Food and Drug Administration (FDA), United States Department of Agriculture (USDA), and Centers for Disease Control (CDC) all have agreed strong scientific evidence links antibiotic use in food animals to the development of antibiotic resistant infections in humans\(^6\), and

WHEREAS, antibiotic resistant organisms are transferred to humans through consumption of contaminated meat, direct contact with infected food animals, AND consumption of produce grown with contaminated fertilizer or water\(^7\), and


\(^2\) ibid


\(^7\) Centers for Disease Control and Prevention, Office of Infectious Disease Antibiotic resistance threats in the United States, 2013. Apr, 2013
WHEREAS, using chronic low dose antibiotics, widely practiced in food animal production, creates resistant pathogens, including those resistant to all known antibiotics⁸, and

WHEREAS, recent legislation (SB 27) in California, as well as newer FDA and USDA guidelines, do not sufficiently address the health risks posed by use of antibiotics in food animals⁹,¹⁰ and

WHEREAS, the American Medical Association, Infectious Diseases Society of America, American Public Health Association, and World Health Organization all support the termination or phasing out of non-therapeutic use of antimicrobials in food animals¹¹,¹²,¹³,¹⁴, now, therefore be it

RESOLVED, that the California Academy of Family Physicians support legislation restricting the use of antibiotics in food animal production to the treatment of animals with active disease, equivalent to the use in humans, and be it further

RESOLVED, that the California Academy of Family Physicians ask the American Academy of Family Physicians to urge the Food and Drug Administration and the United States Department of Agriculture to restrict use of antibiotics in food animal production to the treatment of animals with active disease, equivalent to the use in humans, and be it further

RESOLVED, that the California Academy of Family Physicians ask the American Academy of Family Physicians to create educational content for family physicians, in the form of journal reviews, continuing professional education programs or educational materials, that focus on comprehensive antibiotic stewardship AND specifically include education about the role of the food animal production system in the development of antibiotic resistance in humans.

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⁹ California Senate Bill SB 27, Hill. Livestock: use of antimicrobial drugs (2015-2016)
¹⁰ U.S. Department of Health and Human Services Food and Drug Administration Center for Veterinary Medicine December 2013. FDA Guidance #213, New Animal Drugs and New Animal Drug Combination Products Administered in or on Medicated Feed or Drinking Water of Food Producing Animals: Recommendations for Drug Sponsors for Voluntarily Aligning Product Use Conditions with GFI #209 (2013)
¹² The Infectious Diseases Society of America, IDSA Statement on Antibiotic Resistance: Promoting Judicious Use of Medically Important Antimicrobials in Animal Agriculture Before the House Committee on Energy and Commerce Subcommittee on Health July 14, 2010
Supporting Evidence

1) PROBLEM STATEMENT: What specific practice problem does this resolution seek to solve, or, if this resolution pertains to a proposed new CAFP policy or change of policy, what issue does it seek to address?
This resolution seeks to harness the medical expertise of the CAFP to engage lawmakers in limiting non-judicious use of antibiotics in livestock production in order to stem the tide of increasing antibiotic resistant infections in humans.

2) PROBLEM UNIVERSE: Approximately how many CAFP members or members’ patients are affected by this problem or proposed policy?
All CAFP members and their patients are affected by increasing antibiotic resistance and are at risk for infection from direct exposure through occupational contact, direct exposure from consumption of common foods or through human-to-human transmission.

3) WHAT SPECIFIC SOLUTION ARE YOU PROPOSING TO RESOLVE THE PROBLEM OR POLICY, i.e., what action do you wish CAFP to take?
We request that the CAFP work with state lawmakers to increase understanding around the importance of antibiotic resistance and its direct link to the livestock industry and support legislation that will support judicious use of antibiotics in livestock, as defined above. We also request that the CAFP push this important issue up to the national level, urging the AAFP to engage the FDA and the USDA to increase restrictions on non-judicious use of antibiotics.

4) WHAT EVIDENCE EXISTS TO: 1) INDICATE THAT A PROBLEM EXISTS; OR 2) THAT THERE IS NEED FOR A NEW OR REVISED POLICY?
The CDC reports that every year in the US there are two million antibiotic resistant infections causing 23,000 human deaths. The FDA, USDA, and CDC have all agreed there is strong scientific evidence linking antibiotic use in food animals to the development of antibiotic resistant infections in humans. Currently, non-judicious antibiotic use in the livestock industry is allowed under the FDA’s “Guidance for the industry” which is a set of non-binding guidelines which pharmaceutical and livestock companies are recommended, by not required, to follow. The scientific evidence and the regulation of antibiotic use in the livestock industry are out of step and in need of leadership to align regulations to protect humans from life-threatening illness.

5) PLEASE PROVIDE CITATIONS to support the existence of the problem and your proposed solution.
See footnotes