

Comments For Presidential Advisory Council on Combating Antibiotic-Resistant Bacteria Sept 29th Meeting.

Much of the research which infectious disease policy is based upon is riddled with conflicts-of-interest. Studies also have been observed to spin results, change metrics and to have incomplete reporting of data.

Richard Horton, Editor of one of the premiere medical journals, The Lancet, has stated that “The case against science is straightforward: much of the scientific literature, perhaps half, may simply be untrue”.

Thus, I would like to make two recommendations:

First, that committee members’ conflicts-of-interest over the last four years are posted publicly online for both themselves and their spouses, along with any current conflicts-of-interest for primary degree relatives.

Second, in order to have a significant impact on this epidemic, firm and meaningful recommendations need to be made. Not making them because of conflicting evidence is unacceptable, since that is the current nature of today’s peer-reviewed literature. An example of this is MRSA Surveillance in surgical patients, where the vast majority of studies have shown a positive effect. However, some officials still appear to be unwilling to make recommendations. This appears to be largely based upon an arguably poorly implemented study published in JAMA 2008.

Finally, there has been and will be much discussion on development of new antibiotics. I would recommend tying any development of these antibiotics to well-defined initiatives to prevent overutilization and to have mandatory public reporting of antibiotic utilization by providers. Provider utilization data is almost universally tracked by the drug industry. Thus, this data should be readily available and this requirement non-burdensome.