AR Solutions *In Action*

CDC's Investments to Combat Antibiotic Resistance Threats

FISCAL YEAR **2020**

NEW YORK

$11,253,996

Funding for AR Activities
Fiscal Year 2020

HIGHLIGHTS

- 1 local CDC AR expert & 3 local CDC fellows
- Regional Lab for the AR Lab Network (Northeast)
- One of 10 sites for the Emerging Infections Program

FUNDING TO STATE HEALTH DEPARTMENTS

$2,365,699

AR LABORATORY NETWORK REGIONAL LAB: Regional labs boost state and local testing capacity and technology to detect, support response to, and prevent AR threats across the nation—and inform new innovations to detect AR.
In 2020, despite the burden of the COVID-19 pandemic in their area and personnel shortages, New York successfully triaged its AR lab testing requests, performing testing as able despite heavy COVID-19 burden. New York worked to prioritize and divert requests to other AR Lab Network regions in order to maintain rapid testing for states in their region and ensure ongoing AR outbreak support. These collaborations further display the flexibility of the AR Lab Network and how CDC's investments can be adapted during a crisis.

$4,338,257
(Includes funding to New York City)

RAPID DETECTION & RESPONSE: State, territory, and local public health partners fight AR in healthcare, the community, and food.
Programs use the AR Lab Network to rapidly detect threats and then implement prevention, response, and antibiotic stewardship to stop the spread of resistant germs. Additional resources, appropriated to CDC to fight COVID-19, will also help in the fight against AR by improving infection prevention and control in healthcare facilities.

$644,251
(Includes funding to New York City)

FOOD SAFETY projects protect communities by rapidly identifying drug-resistant foodborne bacteria to stop and solve outbreaks and improve prevention.
New York 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, New York will continue monitoring these isolates for resistance genes. When outbreaks are detected, local CDC-supported epidemiologists investigate the cases to stop spread. CDC also funds New York's Food Safety Center for Excellence, which provides assistance and training to other health departments to build capacity to track and investigate foodborne disease.

$112,016

FUNGAL DISEASE projects improve our ability to track antifungal resistance and stop it from spreading.
With funding for fungal disease surveillance, New York 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 and 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.

COVID-19: coronavirus disease 2019
AR: antibiotic resistance **HAI:** healthcare-associated infection

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

ARinvestments.cdc.gov

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

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NEW YORK AR Investments (cont.)

$1,163,722
(Includes funding to New York City)

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.

The Gonococcal Isolate Surveillance Project (GISP) informs national treatment guidelines and monitors how well antibiotics work on laboratory samples collected from sentinel STD clinics, which often are the first to detect the threat. Select STD clinics also enhance surveillance by collecting additional gonococcal isolates from women and from extragenital sites.

$1,830,051

EMERGING INFECTIONS PROGRAM (EIP) sites improve public health by translating population-based surveillance and research activities into informed policy and public health practice. This work is also funded in part by resources appropriated to CDC to support its response to COVID-19.

The New York EIP performs population-based surveillance for candidemia, *C. difficile*, invasive *S. aureus*, and resistant Gram-negative bacteria; conducts HAI and antibiotic use prevalence surveys; develops surveillance for non-tuberculous mycobacteria; develops and standardizes surveillance and outbreak response for foodborne infections; collaborates with the CDC Prevention Epicenters; and supports special projects. Learn more: www.cdc.gov/hai/eip.

FUNDING TO UNIVERSITIES & HEALTHCARE PARTNERS

$550,000
(Includes funding to New York City)

COLUMBIA UNIVERSITY: Discovering & Implementing What Works

The Modeling Infectious Diseases in Healthcare Network (MInD-Healthcare) is a network of leading U.S. modelers that responds to evolving public health needs in healthcare settings by predicting outbreaks and investigating intervention strategies. The network develops and applies computational tools and mathematical methods for preventing HAIs, including those caused by AR pathogens. This work is also funded in part by resources appropriated to CDC to support its response to COVID-19. Learn more: https://www.cdc.gov/hai/research

$250,000
(Includes funding to New York City)

ICAP: Global Expertise & Capacity Enhancements

CDC's global work to combat AR prevents the importation of AR threats into the United States. Experts are working in Kenya to establish a hospital network, conduct AR surveillance, and expand infection prevention and control quality improvement projects.

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