

# AMERICAN PUBLIC HEALTH ASSOCIATION CALLS FOR NATIONAL MORATORIUM ON NEW AND EXPANDING CONCENTRATED ANIMAL FEEDING OPERATIONS

# ACTION 1: REQUIRING END OF ANTIBIOTIC USE IN HEALTHY ANIMALS

In light of the wide-ranging negative health and environmental impacts associated with Concentrated Animal Feeding Operations (CAFOs), as well as serious social and environmental justice concerns, the American Public Health Association adopted a new policy resolution. The <u>Precautionary Moratorium on New and Expanding CAFOs</u> calls for federal, state and local governments, including public health agencies, to impose a national moratorium on new and expanding CAFOs until additional scientific data on the attendant risks to public health have been collected, uncertainties resolved, and 12 action steps outlined in the resolution have been taken. This document is one of a series of briefs concerning the action steps that must be met before the APHA's call for a moratorium will be lifted. This document focuses on Action Step 1, and provides additional information pertinent to this action step.

### **Action Step 1 requires:**

The federal government brings the use of medically important antibiotics in US poultry and livestock production into compliance with the 2017 World Health Organization (WHO) recommendation that producers stop using these important medicines in healthy animals. Federal regulators end approval for such drug use in food-producing animals where disease has not been clinically diagnosed. This misguided practice is currently allowed and deemed "therapeutic" by the US Federal Food and Drug Administration (FDA).

#### Overview of antibiotic use in food animal production:

In 2017, the FDA's Center for Veterinary Medicine (CVM) completed implementation of Guidance for Industry #213<sup>1</sup>, a process begun in 2013 to (i) "transition antimicrobial drugs with importance in human medicine that are used in the feed or drinking water of food producing animals to veterinary oversight," and (ii) "eliminate the use of these products in animals for production (e.g., growth promotion) purposes."<sup>2</sup> As a result, medically important antibiotics may only be used in the drinking water of food-producing animals by prescription or in animal feed under a Veterinary Feed Directive.<sup>3</sup> Both of these uses must be authorized by a licensed veterinarian. Antibiotics can no longer be used for growth promotion purposes. Since 2017, CVM has outlined additional steps to support stewardship of medically important antibiotics in animals in a 5-year plan to be implemented during fiscal years 2019-2023.4 Objective 1.1 of this 5-year plan is to revise the GFI #213 use conditions to require that each medically important antimicrobial used in food-producing animals is linked to a specific etiologic agent and is labeled with an appropriately targeted duration of use. Furthermore, while GFI #213 brought all feed and drinking water uses of medically important antimicrobial drugs in food producing animals under the oversight of licensed veterinarians, a limited number of other dosage forms of these drugs (approx. 5% of all medically important antimicrobials), such as injectable products, remain on the market as over-the-counter products. The CVM plans to issue a strategy to bring these remaining drugs under veterinary oversight. The FDA guidance, given that it is a combination of mandated regulation and voluntary actions, has not reduced the use of antibiotics in food animal production in a consistent or dramatic way. FDA statistics indicate antibiotic use for food-producing animals in 2019 increased, reversing previous reductions.<sup>5</sup>

## **RECOMMENDED POLICY CHANGES**

The federal government should bring the use of medically important antibiotics in US poultry and livestock production into compliance with the 2017 WHO recommendation that producers stop using antibiotics in healthy animals: WHO recommends an overall reduction in the use of all classes of medically important antibiotics in food-producing animals, with complete restriction of these antibiotics for growth promotion and preemptive disease prevention. A healthy animal should only receive antibiotics if a disease has been diagnosed in other animals in the same population. Antibiotic use is not the only way to prevent disease: There are safer alternatives for disease prevention in animals, including improved hygiene, better use of vaccinations, and changes in animal housing and husbandry practices.

When an antibiotic is determined to be necessary, WHO recommends that a sick animal be tested and the best antibiotic to treat the specific infection be selected. The antibiotic should be selected from those WHO has listed as being "least important" to human health, and not from those classified as "highest priority critically important," because these high priority antibiotics are often the only option available to treat serious bacterial infections in people.

The federal government should also provide adequate resources to FDA's Center for Veterinary Medicine, such that it can initiate the actions outlined in its 5-year plan to revise Guidance for Industry #213. The federal government must provide the necessary resources for CVM to research, issue, and implement a final strategy to:

- Ensure that all medically important antimicrobial drugs used in the feed or drinking water of food-producing animals have an appropriately targeted duration of use, and
- Bring all dosage forms (including injectables, intramammary, etc.) of medically important antimicrobial drugs approved for use in food-producing animals under prescription authorized by a licensed veterinarian.

The Johns Hopkins Center for a Livable Future is an interdisciplinary academic center based within the Bloomberg School of Public Health's Department of Environmental Health and Engineering and is a leader in public health research, education, policy and advocacy that is dedicated to building a healthier, more equitable and resilient food system. The opinions expressed herein are our own and do not necessarily reflect the views of The Johns Hopkins University.

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