



Officers

Muntu Davis, MD, MPH
President
Alameda County

March 17, 2017

Janet Berreman, MD, MPH
President-Elect
City of Berkeley

The Honorable Jerry Hill
State Capitol, Room 5035
Sacramento, CA 95814

Wilma J. Wooten, MD, MPH
Past President
San Diego County

RE: HOAC Opposes SB 43 Unless Amended

Nichole Quick, MD, MPH
Treasurer
Yuba County

Dear Senator Hill:

Eric G. Handler, MD, MPH
Secretary
Orange County

The Health Officers Association of California, which represents the physician health officers in California's 61 city and county jurisdictions, must regretfully oppose your SB 43 unless it is amended.

Directors at Large

Joseph Iser, MD, DrPH, MSc
Yolo County (retired)

The health officers thank you for recognizing the importance of antimicrobial resistance (AR). Organisms that are resistant to pharmaceutical intervention present a tremendous problem for public health, and cost both public and private payers millions in health care dollars every year. We share your drive to address AR in a timely manner.

Bela T. Matyas, MD, MPH
Solano County

Kenneth Cutler, MD, MPH
Nevada County

However, SB 43 has two major drawbacks, which we must oppose.

Cameron Kaiser, MD, MPH
Riverside County

First, SB 43 requires hospitals to compile an annual antibiogram to send to CDPH on all the AR they experience. We do not oppose antibiograms in general, but we feel that CDPH should have the flexibility to specify what information the antibiograms should and should not contain, as not all AR infections are of concern to public health. In 2013, the CDC published a document titled "[Antibiotic Resistance Threats in the United States, 2013](#)", which categorized pathogens as being an urgent threat, a serious threat or a concerning threat. Some resistant organisms were not on the list at all, for example, *Burkholderia cepacia*, which is an important clinical issue for people with cystic fibrosis but not a public health concern. Even for some organisms on the CDC list, public health departments might be less interested in tracking resistance because the clinical and public health consequences of the resistance are less and because they are not as likely to be affected by public health interventions. An example of this might be erythromycin resistant group *A streptococci*. Our efforts should focus on those organisms that are most important to public health, where gathering information could lead to timely and effective interventions. We suggest that you amend the bill to allow CDPH this flexibility.

Claudia Jonah, MD
Kern County

Robert L. Oldham, MD, MSHA
Placer County

Karen I. Relucio, MD
Napa County

Sara Cody, MD
Santa Clara County

Robert Benjamin, MD, MPH
Alameda County (Retired)

Staff Members

Kat DeBurgh, MPH
Executive Director

Dalia Navarro
Office Manager

Brandon Roberts
Legislative Assistant

Second, SB 43 amends the code related to death certificates to specify that physicians must note the presence of any antimicrobial-resistant infection. We feel that, under present circumstances, this information would not be useful. Tracking AR through

other public health channels, such as mandated disease reporting by health care providers, would be more appropriate. On the death certificate, it is not always simple to ascertain whether AR infections were a direct or contributing cause of death. Furthermore, current data collection methods for the death certificate involve coding according to the standard known as ICD-10, which does not include AR. CDPH will not be able to meaningfully report information not included in ICD-10. We feel this section ought to be removed, with a focus instead on reporting AR as other diseases are reported in the state.

Thank you for meeting with us and for continuing your work on this important issue. We hope we can find common ground.

Sincerely,

A handwritten signature in black ink that reads "Kat DeBurgh". The signature is written in a cursive, flowing style.

Kat DeBurgh, MPH
Executive Director