





Call for Presidential Candidates to Prioritize Infectious Diseases, HIV Responses

As infectious diseases and HIV physicians, health care providers, scientists and public health practitioners, we call upon all presidential candidates to prioritize policies and investments to protect Americans from serious infectious diseases in the United States and abroad.

Infectious diseases pose significant risks to patient safety, public health, national security and economic stability in the U.S. and worldwide. Inadequate responses, inequities in health care access, stigma and discrimination, and other social determinants of health impede infectious diseases responses and threaten public health. Key priorities are:

- Antibiotic and other drug resistance are swiftly diminishing our ability to fight once easily treatable
 infections while the antibiotic pipeline has collapsed. Resistant infections kill up to 162,000 people in
 the U.S. annually, with the prediction of 10 million people dying globally by 2050 unless change
 occurs. All medical advances—such as transplantation and cancer therapy—are threatened by
 antibiotic resistance.
- **The opioid epidemic** is driving significant increases across the U.S. in hepatitis C, hepatitis B, HIV, endocarditis (an infection of the heart valve) and other serious and life-threatening infections.
- Vaccines are among our most effective public health tools, yet vaccine hesitancy due to misinformation and healthcare barriers has fueled the measles resurgence and limits prevention of serious illnesses that include influenza, shingles, pertussis, and hepatitis A and B.
- We have the prevention and treatment tools in-hand to **end HIV** as an **epidemic in the U.S.** Despite this, the number of new HIV infections is not diminishing (~40,000 per year) in the U.S., particularly in the South. The U.S. ranks last among high-income countries in rates of viral suppression among people living with HIV. Viral suppression is required to prevent illness and transmission.
- **Sexually transmitted infections** are skyrocketing, in part due to a weakening public health system and the opioid epidemic. This includes chlamydia, gonorrhea and syphilis, including infants born with syphilis, where cases more than doubled from 2013 to 2017.
- **Hepatitis C virus (HCV)** can now be cured, but in the U.S. new HCV cases increased 3.5-fold from 2010 to 2016 largely due to the opioid epidemic, and barriers to care remain high.
- **Outbreaks** of emerging and reemerging infectious diseases across the globe, such as the current Ebola outbreak in the Democratic Republic of Congo and influenza, spur community destabilization and present threats of global spread and threats to U.S. national security.
- The U.S.-led progress in the **global response to HIV**, **tuberculosis and malaria** is at risk of stalling. Despite being preventable and curable, tuberculosis is the leading infectious disease killer globally, is facilitated by HIV and infects 16 million people worldwide.
- **Climate change** is a public health emergency with impacts on human health and raised risks of increased waterborne, zoonotic (animal-related) and vector (mosquito, tick, flea)-borne infectious diseases.
- Addressing the rising infectious diseases challenges requires a robust infectious diseases and HIV
 workforce to meet the demand for patient care, lead public health responses, and drive innovation.
 Fewer physicians now enter the fields of ID and HIV, in part due to high medical school debt coupled with low compensation relative to other specialties.

We call upon presidential candidates to publicly prioritize robust responses to infectious diseases. Specifically, we recommend that the next president:

- Strengthen requirements and financial support for antibiotic stewardship in all health care settings and in agriculture.
- Support incentives to spur the research and development of urgently needed new antibiotics.
- Invest in surveillance, prevention, diagnosis and treatment to address substance use and its associated acute and chronic infectious diseases.
- Strengthen and expand public health infrastructure to address outbreak detection and response, vaccine uptake, viral hepatitis (hepatitis A, B, and C), and the STI epidemic.
- Commit to eliminating the hepatitis C virus and to ending HIV as an epidemic in the U.S. now that we have the tools to accomplish both.
- Commit to ensuring an adequate infectious diseases and HIV workforce and increased funding for infectious diseases biomedical research.
- Renew U.S. global health investments and leadership to control HIV and TB pandemics and advance global health security through a One Health approach that includes human, animal and environmental health.
- Address stigma that impedes public health. This requires promotion of policies supporting inclusion
 of populations vulnerable to infectious diseases, including LGBTQ persons, justice-involved
 populations, individuals with substance use disorders, and others who are vulnerable due to
 socioeconomic and chronic health conditions.
- Commit to policies that stabilize and reverse climate change.

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