CDC Emerging & Zoonotic Infectious Diseases

COMMUNITY REQUEST FY 2020



FY 2020 President's Request: \$372.47 Million FY 2019 Enacted: \$568.37 Million

DESCRIPTION

The National Center for Emerging and Zoonotic Infectious Diseases (NCEZID) at CDC works to reduce health-care-associated infections, improve food safety, increase lab safety, and invest in detection and response activities for antibiotic-resistant diseases. It reduces illness and death associated with emerging and zoonotic infectious diseases – diseases that spread between animals and people, such as Zika, Ebola, and salmonella infection – and protects people against the unintentional spread of disease.

WHAT DOES THIS BUY?

Funding supports the development of diagnostic tools, the investigation and response to disease outbreaks internationally, and includes surveillance, infection control, vaccine delivery, and health care worker training.

JUSTIFICATION FOR THE REQUEST

- In the last three years, NCEZID has **supported the development of more than 50 new diagnostics,** including tests for Zika, Ebola, Lyme disease, bubonic plague, and rabies.
- CDC investigates and responds to deadly disease outbreaks internationally, including:
 - The 2018 Ebola outbreaks in the Democratic Republic of Congo's (DRC) Equateur and North Kivu provinces. NCEZID provided surveillance, infection control, community engagement, and vaccine implementation.
 - A 2017 monkeypox outbreak in DRC where NCEZID assisted health officials in tracking cases and training health workers.
 - A 2016 typhoid fever outbreak in Harare, Zimbabwe where NCEZID investigated and controlled the outbreak, which lasted nearly five months and caused 867 suspected cases and four deaths.
- NCEZID provides advanced laboratory services, including biosafety labs that enables the CDC to study highly
 hazardous pathogens and advanced molecular detection techniques that allows the CDC to identify illnesses
 of unknown origin from around the world.
- Annually, zoonotic infectious diseases sicken 2.5 billion and kill 2.7 million.
- Fighting antimicrobial resistance is a priority for public health and for NCEZID. Modern travel of people, animals, and goods means that antimicrobial resistance can easily spread across borders and continents becoming a threat.
- Recognizing that the health of people is connected to the health of animals and the environment, NCEZID uses surveillance, response, and research activities to reduce the toll of zoonotic infectious diseases.

U.S. INTEREST

NCEZID develops cutting-edge, point-of-care diagnostic tools, enabling faster and more accurate detection of infectious diseases that threaten U.S. health.



Looking to the Future

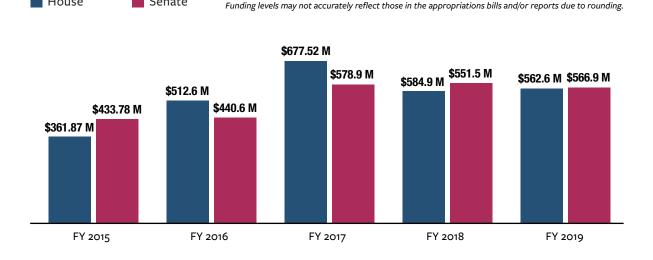
CDC Emerging & Zoonotic Infectious Diseases – Labor, HHS Appropriations

BOLD VISION

- Additional investment could match the increased scale of disease outbreaks, which are the result in part of increased trade, travel, connectivity, human-animal interactions, and climate shifts in recent years.
- Antibiotic resistance is a growing global threat. Additional investment could expand NCEZID's activities to improve antibiotic stewardship, broaden antibiotic resistance surveillance and reporting, and spur diagnostic development to reduce antibiotic overuse.
- Additional investment could support activities in high-burden countries to improve antibiotic use, track resistance, and implement infection prevention and control activities, ensuring a global approach to combatting antibiotic resistance across countries and regions. Additional funding will help share expertise, training, and deploy more scientists to investigate and contain resistance outbreaks.

IMPACT OF CUTS

- Cuts could undermine CDC's surveillance activities, which are critical to understanding and getting ahead of infectious disease threats.
- Cuts could stall innovation in diagnostic testing and laboratory services needed to identify new and emerging high-consequence pathogens, allowing diseases to go undetected and delaying response efforts, leading to deadly and costly crises.
- Cuts jeopardize global efforts to detect and prevent the spread of antibiotic resistance in public and private hospitals, particularly related to maternal and newborn care.
- Cuts undermine the CDC's Child Health and Mortality Prevention Surveillance Network surveillance sites in Mali, Kenya, Mozambique, South Africa, Ethiopia, and Bangladesh that gather data on causes of under-5 child mortality.



5 YEAR FUNDING HISTORY

Senate

House

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