# Industry: Meat Farming, Pharmaceuticals, Lobbyist, and Antibiotic Reform

Within past years, there have been numerous studies regarding the use of antibiotics to fatten cattle, as well as, to ward off the potential of disease. This comes as the result of typically 'overcrowding' of farm quarters in which the farmed animals dwell.

In Washington and other state governmental houses, legislation has been introduced in an effort to stop or at least minimize the practice of 'antibiotic' use. The dynamics of politics often command the use of lobbyist and lobbyist groups who are known to utilize strong tactics toward staring policy in the direction they are focused upon for the good of the client (s). They are paid, sums well inside of millions, to advocate on behalf of industry, officials, or public interest.

Because of their strategies and despite public outcry, often bills, such as the those introduced to stop antibiotic use and demand tracking system of the animals impacted, receive little support and fail to gain traction on Capitol Hill. Their indifference is at times tied into the politics surrounding zones such as farming which are serving the public, buying large quantities of drugs, and engrossed in organics. The nature of the antibiotic beast is such that farmers protect their assets, pharmaceutical corporations earn each quarter income and investors, and organic farmers profit from those fearing the development of the specified infectious resistance to antibiotics in humans.

In fact, it is reported that protecting this financial pyramid has farming agency's spending $3.3 million as far back as 2013 advocating use of antibiotics. As we know, crisis are socially defined and this list of big spenders encompasses major pharmaceutical companies, pork producers, and beef packing businesses.

## Lobbying Spending Habits:

Center for Responsive Politics $14.3 million lobbying congress

Zoetics Inc. $1.01 million in 2014

PAC gave $68,00 to Republican Congressional candidates

Big Ag invested $9.2 million opposition of proposed bills

The National Pork Producers $873, 000

The National Chicken Council $640,000

US Cattlemen's Association $30,000

Big Pharma $266,846,347 lobbying in 2021

Tysons Food Cargill, and Smithfields Food control 53% of the meat processing market

England offers a market entry reward for pharmaceutical corps developing 'new' antibiotics

Outside of those fighting to secure their interest and financial standing are those willing to lobby for further regulation of farm industry feed animals and discontinuing antibiotic use.

It is said that the efforts to introduce legislation and regulations limiting drug use is grounded in 'emotion and has no credible peer reviewed science'. However, small drug research developers and biotechnology innovation organization [BIO] are working on awareness campaigns as they team up to help the antimicrobial battle supporting the 'Developing Innovative Strategy for Antimicrobial Resistant Microorganism [DISARM] Act'. Antimicrobial Resistance (AMR) occurs when bacteria, viruses, fungi, and parasites mutate and no longer react to the prescribed antibiotic medication.

## DISARM Act:

Well into 2019, antibiotic use had dropped amongst chicken producers while it remains a hot ticket item to cattle and pork farmers. It is also known that data shown that antibiotic resistant infections are responsible for over 160,000 deaths a year. Yet, the only current stipulation is that under Guidance 213, farmers must receive a veterinarians approval for antibiotic(s) use as infection prevention initiative. It has been banned as a 'fattening' agent. This does not alleviate nor reduce the industry's 64 percentile base in pharmaceutical antibiotic sales per year.

There are believed to be at least 32 new innovative antibiotics in the midst of clinical development in 2019. These and a battle against farming practices which lead to AMR continues to gain momentum. So of the notables issues are:

1. Misuse of antimicrobials
2. Lack of clean water [environment & sanitation]
3. Poor quality infection and disease preventive measure in place
4. Minimal access to quality medications, vaccines a diagnostic aide
5. Lack of awareness of problems [tracking data]
6. Legislative inaction

And example of how bacteria contamination spreads is that of open air active water resource filled with urine, manure and other waste. It offers the potential of leakage, entering ground water, air pollution, and farmer to product and family bacteria spread.

It is believed that Animal Agriculture and Pharmaceutical Industries pay millions to lobby against policy that restrict antibiotics use as they've participated in paid research studies to disprove allegations and protect their profits. We must then add climate policy, environmental, and public health outcry's to the opposition agenda. Around the globe these industry's are referred to as 'Big Pharma' and 'Big Agribusiness' as they are believed to have been in cahoots since the 1950's expanding profits at the expense of public health harm.

In the EU alone, there are 177 registered lobbyist working on pharmaceutical issues and in the US, animal research has been expanded. Data review has also captured that antibiotic use in the U.S. is almost three times greater (60% higher) than the median of Europe. It is said that over 75%

of all pharmaceutics used in the U.S. are administered to farm animals. This shocking revelation should render the necessity for further research sanctioning the block upon prevention-focused public health actions. This would open the door to proper specimen collection and testing to track resistant infections which has hampered the U.S. to gain data regarding this global issue.

For unhealthy patients, this means greater spending for medication, prolonged hospital visits, elongated illnesses. Not to mention the higher cost for billing which generates immediate financial hardships. As this misuse of antibiotics shows it's impact, we recognize that the abusive use has taken place for beyond forty years from which our biological rejection has settle in and could plausible show signs of AMR. Continued product intake, along with the anticipated more than 65% increase in global antibiotic use between 2010 and beyond is showing expectant rejection growth. This reality has been thwarted by Public Relations (PR) campaigns, lobbyist energy, and financial perks to politicians. It is then required of the multiple healthcare agency's, institutes, research corporations, and others foundation collaborative efforts to project the problems, outcomes, and alternative as we work toward defeating the challenge of AMR.

There thence exists an urgency in observing the approach toward resolution of this crisis as private sector remedy can result in the use of 'public' funds to subsidize the private sector of medical diagnostics and pharmaceutical industries. As these actors motion towards AMR resolves, we must maintain an awareness of their plausible skilled use of policy rhetoric and cleaver argument in their facts and provision of evidence. This means there is opportunity for persuasive power shift using policy from state onto private actors.

As a reminder, I must note it is reported that half of the patients admitted to the hospital for COVID-19, were prescribed a minimum of one antibiotic. Thus, with the use of new laws, a limitation of antibiotic drug use and plausible resistance is assumed to become contained and controlled.

## Development of New Antibiotics

Bipartisan legislation has formulated a model through which drug innovators can be compensated for the dispensing of their medicine prior to it's use in the pharmaceutical marketplace. The PASTEUR Act, with it's hefty cost, would serve to preserve antibiotic use while minimizing over use of old antibiotic drugs. The specifications for the drug design of new antibiotics, characteristic requirements and chemical structure, are non-described in this law.

*The criteria they must most urgently meet are:*

a. Targeting resistant-infections
b. Organs where infections are usually hard to treat
c. Unmet clinical need
d. Implementation of guidelines by authoritative bodies (patients, doctors, federal agency, detached experts)

Some fear that after spending the notable $11 billion or more for development, a less authentic and impure(inferior) quality antibiotic drug will result causing a lack of support from the medical community. Then too are the bacteria mutations that derive from antibiotic overuse and their tendency to be 'resistant' to new prescriptions.

These NCBI or New Antibiotics for Multi drug-Resistant Bacterial Strains are designed to fight the expressed 12 families of bacteria which threaten human health. Innovation is constant as current drug lists encompass meds such as 'Dynobactin' that halt the spread of antibiotic resistant bacteria successfully. As these are categorically the 'new' focus and paradigm shift in medicine, cost, over indulgence, lobbyist, politics, and other aspects of industry are burdens within control along with variance in human factors.

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