More scary bugs coming soon? Or already here.

By ACSH Staff — March 6, 2013

Centers for Disease Control and Prevention head Dr. Thomas Frieden calls them nightmare bacteria and they are showing up in more and more U.S. hospitals.

Carbapenem-resistant Enterobacteriaceae (CRE) showed up in 4.6 percent of hospitals that track infections in 2012, compared to just 1.2 percent in 2001, according to CDC data. That family of bacteria normally exists in peaceful symbiosis in all our intestines, but when an infection with antibiotic resistant germs occurs, it is extraordinarily hard to eradicate. So, it is particularly disturbing that carbapenems, which were introduced in 1985 to address bacterial resistance to standard beta-lactam antibiotics, are beginning to fail.

CRE is resistant to even powerful antibiotics and, incredibly, can pass on this resistance to other bacteria. It thrives in hospitals and kills around 40 percent of all patients whose blood it infects.

"If it spread to things like E. coli, which is a common urinary tract infection, it would be a very serious problem," Frieden says.

UCLA Medical Center infectious disease specialist Dr. Brad Spellberg told NPR [1] the situation was incredibly serious. We are not talking about an iceberg that’s down the line, he says. The ship has hit the iceberg. We’re taking on water. We already have people dying. Not only of CRE, but of untreatable CRE.

Those counting on new antibiotics to bail us out of out of this mess should read a sobering piece [2] by ACSH advisor Dr. David Shlaes about the FDA’s counterproductive policies, which make antibiotic development difficult in its own right essentially impossible. Dr. Shlaes notes, No one will ever run trials in nosocomial (hospital acquired) pneumonia under the FDA’s current guidance. No one.