

AAAAI Outreach to Congressional Offices on National Penicillin Allergy Day, 2024

Subject: Please Cosponsor Legislation to Bring Awareness to Penicillin Allergy

More than 33 million people in the US think they are allergic to penicillin, but 95% of these patients with a penicillin allergy in their medical record are not actually allergic.

Delabeling penicillin allergy improves patient outcomes. From babies born to penicillin allergic mothers with Group B streptococcus, to elderly patients who are particularly vulnerable to infections and dangerous side effects from other antibiotics, and virtually all patients in between; delabeling penicillin allergy can reduce hospital admissions, shorten inpatient stays, and decrease more expensive prescriptions. These outcomes significantly reduce healthcare expenditures and help in the fight against antimicrobial resistance.

On September 28, 1929, Scottish bacteriologist Alexander Fleming changed healthcare forever by identifying that penicillin can treat infections caused by bacteria. The first antibiotic to be discovered, penicillin is still the most effective treatment available for a wide range of infections.

Unfortunately, millions of patients believe they are allergic to penicillin. Evidence shows that more than 95% of patients who have a self-reported penicillin allergy in their electronic medical record can safely take penicillin after verification testing. Removing the penicillin allergy label from the patient's medical record is a relatively easy, low cost, and important [public health intervention](#) that can improve patient outcomes, reduce healthcare costs, and advance the fight against antimicrobial resistance.

The American Academy of Allergy, Asthma & Immunology, established in 1943, is a professional association with over 7,000 members including allergist/immunologists, other medical specialists, allied health, and related healthcare professionals, all with a special interest in the research and treatment of patients with allergic and immunologic diseases. The AAAAI is committed to improving patient care, and has consistently supported efforts to combat antimicrobial resistance, including appropriate and judicious use of antibiotics.

We strongly encourage you to cosponsor and support the [Penicillin Allergy Verification and Evaluation \(PAVE\) Act \(H.R. 9778\)](#). The AAAAI worked closely with Representative Larry Bucshon, MD (R-IN) on crafting this legislation which would add penicillin allergy verification and evaluation to Medicare's initial and annual exams to delabel penicillin allergy, when appropriate, which helps combat antimicrobial resistance and reduces healthcare costs. **Please find attached a stakeholder letter in support of the PAVE Act.**

Inaccurate penicillin allergy labels in patient records increase reliance on broad-spectrum antibiotics that heighten the risk of antimicrobial resistance and adverse effects. Therefore, we also ask that you support the [PASTEUR Act \(H.R. 2940/S. 1355\)](#), which aims to incentivize research and development for urgently needed antimicrobial drugs. In the United States, someone dies from an infection resistant to current treatments every 15 minutes. For more information on the bipartisan PASTEUR Act, please see [here](#) for a letter to congressional leaders signed by more than 230 stakeholder organizations.