

**Congress of the United States**  
**Washington, DC 20515**

March 19, 2018

The Honorable Tom Cole  
Chairman  
Subcommittee on Labor, Health and Human  
Services, Education and Related Agencies  
Committee on Appropriations  
2358 Rayburn House Office Building  
Washington, DC 20515

The Honorable Rosa DeLauro  
Ranking Member  
Subcommittee on Labor, Health and Human  
Services, Education and Related Agencies  
Committee on Appropriations  
2413 Rayburn House Office Building  
Washington, DC 20515

Dear Chairman Cole and Ranking Member DeLauro:

As the committee begins consideration of the Fiscal Year (FY) 2019 Labor, Health and Human Services, Education and Related Agencies (Labor HHS) appropriations bill, we write to request you fund sexually transmitted disease (STD) prevention at the Centers for Disease Control and Prevention (CDC) at no less than \$207.3 million to allow states and cities to respond to the highest STD levels ever reported. Moreover, we urge you to provide an additional \$20 million for a special initiative for STD screening and treatment in the states with the highest rates of these diseases.

The United States leads all industrialized nations in the incidence of STDs. Twenty million new cases of STDs occur each year which cost our health care system \$16 billion dollars. To stop the spread of STDs requires early diagnosis and prompt treatment. STDs have serious life-long health consequences, including infertility, higher cancer risk, disability or death. These dire health consequences disproportionately impact women and newborn babies.

CDC reports that STDs are at a record high. In the last year, syphilis and gonorrhea rates both increased by 20 percent. Syphilis has increased among women at an even higher rate, which has resulted in a 30 percent increase in congenital syphilis—syphilis transmitted during pregnancy. Congenital syphilis is preventable, and one single baby born with congenital syphilis is one too many. In the last year in America, over 620 babies were born with congenital syphilis. Babies born with congenital syphilis are at risk for devastating life-long consequences and death.

In the last 15 years, STD prevention funding at the CDC has seen a \$21 million reduction. This is a reduction of 40 percent in buying power for CDC and its state, local and territorial grantees. Since 2003:

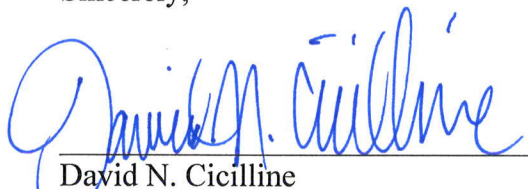
- Cases of syphilis have increased 230%
- Cases of chlamydia have increased 75%
- Only one drug is now recommended for gonorrhea treatment due to emergence of drug resistance; in 2003, CDC recommended five different drug treatments for gonorrhea.

The Division of STD Prevention at CDC partners with all 50 state health departments and seven large urban areas for STD prevention. This includes: STD monitoring; outbreak response; assurance of appropriate screening and treatment by health care providers; contact tracing and access to health care for HIV, and providing STD prevention information to the general public.


Addressing these out of control epidemics requires a strong federal investment and commitment to ensure the health of all our communities. With a significant increase in funding, we can turn back the clock and stop these epidemics. With a significant increase in funding we can eliminate transmission of syphilis from mother to child, just like we are eliminating mother to child transmission of HIV.


Failure to adequately fund STD prevention will only exacerbate the worsening STD epidemic in our country. In the FY19 Labor HHS Appropriations bill, we urge you to provide at least \$207.3 million for STD prevention at the CDC and an additional \$20 million for a special initiative for STD screening and treatment in the states with the highest rates of these diseases.


Sincerely,

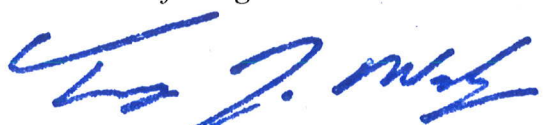
  
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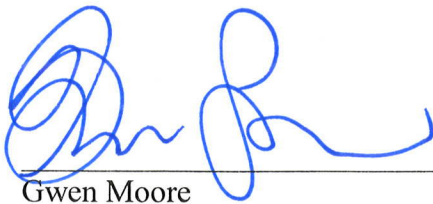
  
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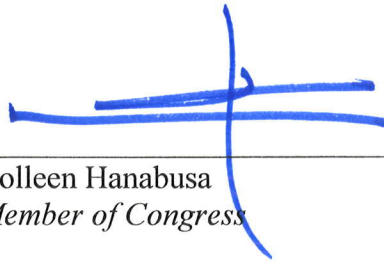
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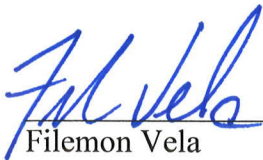
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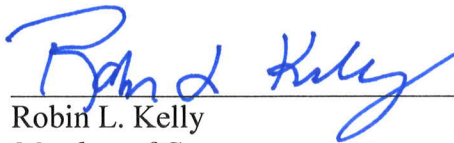
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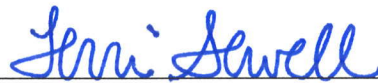
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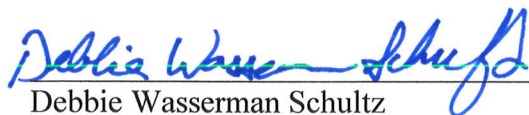
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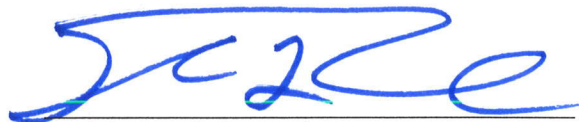
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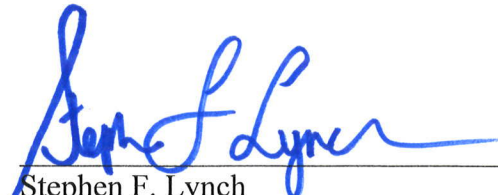


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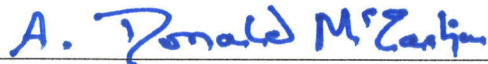




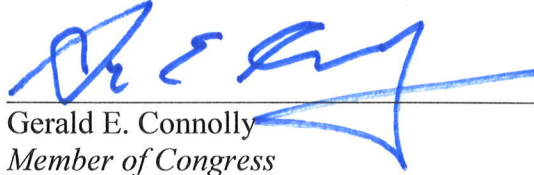
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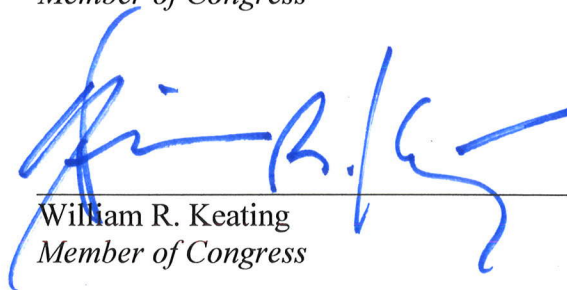
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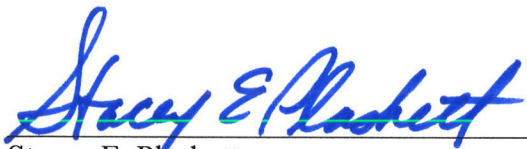
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