

**IN THE UNITED STATES DISTRICT COURT  
FOR THE SOUTHERN DISTRICT OF NEW YORK**

NATURAL RESOURCES DEFENSE )  
COUNCIL, INC.; CENTER FOR SCIENCE )  
IN THE PUBLIC INTEREST; FOOD )  
ANIMAL CONCERNS TRUST; PUBLIC )  
CITIZEN, INC.; and UNION OF )  
CONCERNED SCIENTISTS, INC., )

Plaintiffs, )

v. )

UNITED STATES FOOD AND DRUG )  
ADMINISTRATION; MARGARET )  
HAMBURG, in her official capacity as )  
Commissioner, United States Food and Drug )  
Administration; CENTER FOR )  
VETERINARY MEDICINE; BERNADETTE )  
DUNHAM, in her official capacity as )  
Director, Center for Veterinary Medicine; )  
UNITED STATES DEPARTMENT OF )  
HEALTH AND HUMAN SERVICES; and )  
KATHLEEN SEBELIUS, in her official )  
capacity as Secretary, United States )  
Department of Health and Human Services, )

Defendants. )

11 CIV 3562 (THK)  
ECF Case

**DECLARATION OF  
ANNE KAPUSCINSKI**

I, Anne Kapuscinski, declare as follows:

1. I am a professor of sustainability science with training in biology, specifically in fisheries science. I live in New Hampshire.
2. I joined the Board of Trustees of the Union of Concerned Scientists in 2002, and I have been a member of the organization since 2003.
3. A few years ago, I developed a serious urinary tract infection. I was not prone to such infections. The few times I had gotten them in the past, I had taken sulfa antibiotics, which

had always cured them. This time, the infection was resistant to the first antibiotic I took. My doctor didn't identify that the infection was resistant until it was almost too late. I went to my doctor when I developed a very high fever, almost passed out in the doctor's office, and nearly had to be hospitalized. My doctor prescribed another antibiotic and ordered me not to do anything for a month. It wasn't hard to follow her instructions because the infection took such a toll on me that all I could do was sleep. I recovered after about six weeks. The episode was a frightening disruption to my career and my personal life.

4. Because of my scientific background, I have long been aware of the issue of antibiotic resistance. Whenever antibiotics were prescribed to me, I was religious about taking the full course. But although I was aware of the issue, it had never affected me personally. When my doctor discovered that I had a resistant infection, it shocked me. It heightened my awareness of the resistance issue and made me much more vigilant than I had been in the past. Now that I've had a resistant infection once, I know it can happen again.

5. After recovering from the infection, I changed my eating habits. I had always been in favor of eating foods from sustainable agriculture operations, but after my infection, I vowed to focus more on local foods. I had read some news stories about the antibiotics used in large livestock operations and the associated increase in drug-resistant bacteria in humans and the environment. My husband and I decided to reduce the amount of meat we eat and to try to buy most of our meat from farmers we know, so that we can be sure they are not using antibiotics in their animal feed.

6. Before my infection, I ate meat nearly every day. Now my husband and I eat meat three to four times a week. We buy all the meat we prepare at home from the local co-op or the farmer's market so that we can find out where it came from and whether antibiotics were used. It

is more expensive and takes more time to purchase our meat this way. In my experience, meat that is not industrially produced is generally one-and-a-half or two times more expensive than the alternative. Seeking it out requires more effort: at the market, you have to take the time to ask the farmers what they feed their animals, and at the store you have to read all the labels carefully.

7. Making the transition to eating less meat wasn't easy. My husband does most of our cooking. We both had to make a commitment to changing our diet and learning how to cook different foods.

8. I travel for work up to five times a year for three to ten days at a time, and I have to eat all of my meals in restaurants. Because I have food intolerances to milk and corn, it is not always easy to find vegetarian options that I can eat, so I often end up eating chicken or turkey. It is difficult to find restaurants that serve meat raised locally, so I usually cannot find out whether antibiotics were used.

9. From what I have read about industrial farming operations, I presume that most of the meat I eat in restaurants comes from livestock that were given antibiotics. I am concerned that I may be exposing myself to drug-resistant bacteria by eating this meat, and I am frustrated that I don't have more choices. I would feel much safer if livestock producers were no longer permitted to use antibiotics in their animal feed.

10. My impression is that when we misuse antibiotics by feeding them to healthy livestock, we are playing with fire, because we are in jeopardy of losing the drugs that keep people alive in critical situations. My brother was recently seriously ill with a rare tumor, which required hospitalization for three surgeries plus complications and months of intravenous nutrition. He developed a bacterial infection and had to receive daily antibiotic infusions for several months. If he were to contract a resistant bacterial infection, it would be very dangerous

for him because he was in such a fragile condition already. When I see someone that sick, I can't make sense of a world where we are increasing the prevalence of drug-resistant bacteria through the unnecessary use of antibiotics in animal feed. These drugs can save human lives. But people like my brother are sitting ducks.

I declare under penalty of perjury that the foregoing is true and correct, to the best of my knowledge, information, and belief.

Executed on October 3, 2011, at Hanover, New Hampshire.

*Anne R. Kapuscinski, Ph.D.*  
Anne Kapuscinski, Ph.D.