

AT BORDER



Tuesday for food at a sports field in Oaxaca State, Mexico.

New sanctions for China

The Associated Press

WASHINGTON — The Trump administration on Tuesday escalated its aggressive actions on trade by proposing 25 percent tariffs on \$50 billion in Chinese imports to protest Beijing's alleged theft of American technology.

The Office of the U.S. Trade Representative issued a list targeting 1,300 Chinese products, including industrial robots and telecommunications equipment. A public comment period will last until May 11, and a hearing on the tariffs is set for May 15. Companies and consumers will have the opportunity to lobby to have some prod-

ucts taken off the list or added.

The move risks heightening trade tensions with China, which on Monday slapped taxes on \$3 billion in U.S. products in response to earlier U.S. tariffs on steel and aluminum.

China immediately threatened to retaliate against the new U.S. tariffs, which target the high-tech industries that Beijing has been nurturing, from advanced manufacturing and aerospace to information technology and robotics.

Early Wednesday in Beijing, China's Commerce Ministry said it "strongly condemns and firmly opposes" the proposed U.S. tariffs and warned of retaliatory action.

"We will prepare equal measures for U.S. products with the same scale" according to regulations in Chinese trade law, a ministry spokesman said in comments carried by the official Xinhua News Agency.

The U.S. sanctions are intended to punish China for deploying strong-arm tactics in its drive to become a global technology power. These include pressuring American companies to share technology to gain access to the Chinese market, forcing U.S. firms to license their technology in China on unfavorable terms and even hacking into U.S. companies' computers to steal trade secrets.

CDC warns of drug-resistant bacteria spread

BY DELTHIA RICKS

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Deadly "nightmare bacteria" that are resistant to most antibiotics were identified in 221 instances nationwide last year in an intensive surveillance program aimed at stopping superbugs before they spread, federal health officials said Tuesday.

These resistant bacterial strains — formally known as CRE, which stands for carbapenem-resistant Enterobacteriaceae — can colonize medical equipment and adhere to the hands of health-care workers.

Hospital environmental experts highlight that key "touch points" also may be sources of contamination: hospital beds, curtains, bedside trays, telephones and other surfaces in hospital rooms.

The bacteria have developed unique genetic mechanisms that allow them to repel multiple families of antibiotics, including the carbapenem class, which are considered the drugs of last resort.

Dr. Anne Schuchat, principal deputy director of the Centers for Disease Control and Prevention, said federal and state health officials found evidence of unique mutations in nightmare strains during the surveillance and then isolated patients before the bacteria spread.

Nightmare bacteria can cause pneumonia, bloodstream and urinary tract infections. The death rate from the organisms is estimated at about 50 percent.

Because the bugs are difficult to treat, they threaten hospitalized patients who need antibiotics most: cancer patients, organ recipients, children with cystic fibrosis and people with other forms of immune suppression.

Antibiotic resistance of all kinds, not only CRE, affects 2 million people annually in the United States and kills about 23,000, she said during a teleconference Tuesday afternoon.

The World Health Organization has declared resistance to antibiotics an explosive global threat and CRE — nightmare bacteria — are at

the epicenter of concern.

Schuchat said many people who are infected with such strains "are virtually untreatable with modern medicine."

In New York, CRE incidence in hospitals must be reported to the state Health Department and the data are made available to consumers annually in a Hospital-Acquired Infections Report.

A 2015 map of CRE incidence in the state — the most recent year for complete data — showed the largest concentration of cases was in New York City. A lesser incidence was evident on Long Island and in Westchester County. Most of upstate New York had barely any incidence of nightmare bacteria.

The CDC's National Healthcare Safety Network, which works with state and local health departments, reported being successful last year in isolating infected patients, though not all of them survived, officials said.

Dr. Arjun Srinivasan, also of the CDC, stressed the importance of aggressively pursuing all cases of nightmare bacteria and of isolating patients to prevent the emergence of new genetic subtypes.

"Samples are tested for a number of resistance genes," Srinivasan said. "When you have something that's unusual, that presents the greatest opportunity to prevent it from spreading."

Schuchat and other experts noted Tuesday that while the sickest patients are the most vulnerable, healthy people can be carriers of these superbugs.

She and Srinivasan emphasized the importance of handwashing, the wearing of gloves by health-care workers, and isolating affected patients. The CDC's surveillance program found many instances of nightmare bacteria "hiding in plain sight," Schuchat said.

For example, endoscopic tubes that examine the upper gastrointestinal tract were voluntarily recalled two years ago. The devices harbored nightmare bacteria and were the cause of outbreaks worldwide.

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