

119TH CONGRESS
2D SESSION

H. RES. 1561

Expressing support for the designation of the third week of September as “Fungal Disease Awareness Week” and encouraging efforts to improve awareness, diagnosis, treatment, surveillance, and prevention of fungal diseases in the United States.

IN THE HOUSE OF REPRESENTATIVES

SEPTEMBER 17, 2026

Mr. FONG (for himself, Mr. VALADAO, Mr. CALVERT, and Mrs. KIM) submitted the following resolution; which was referred to the Committee on Energy and Commerce

RESOLUTION

Expressing support for the designation of the third week of September as “Fungal Disease Awareness Week” and encouraging efforts to improve awareness, diagnosis, treatment, surveillance, and prevention of fungal diseases in the United States.

Whereas the Centers for Disease Control and Prevention observes Fungal Disease Awareness Week each September to raise awareness of fungal diseases and promote the message to “think fungus” to save lives, and September 14 to 18, 2026, will mark the 10th anniversary of Fungal Disease Awareness Week;

Whereas fungal diseases are an increasing public health concern and fungal infections are increasingly resistant to antifungal medications;

Whereas fungal infections can resemble bacterial or viral pneumonia, contributing to missed or delayed diagnoses, inappropriate antibiotic use, preventable complications, prolonged illness, hospitalization, disability, and death;

Whereas coccidioidomycosis, commonly known as Valley Fever, is primarily a lung infection caused by breathing in spores of *Coccidioides*, a fungus found in soil and dust in parts of the United States, particularly the Southwest and parts of the Pacific;

Whereas the Centers for Disease Control and Prevention reports that approximately 20,000 Valley Fever cases are reported in the United States each year and that 21,037 cases were reported in 2023;

Whereas Valley Fever causes approximately 15 percent to 30 percent of community-acquired pneumonias in the Bakersfield, California, Phoenix, Arizona, and Tucson, Arizona metropolitan areas, and symptomatic patients may experience fatigue, cough, shortness of breath, headache, night sweats, muscle aches, and rash;

Whereas the Centers for Disease Control and Prevention states that approximately 5 percent to 10 percent of patients with Valley Fever fail to recover and develop complications or chronic pulmonary disease, disseminated disease occurs in an estimated 1 percent of cases, and meningitis can lead to permanent neurologic damage;

Whereas histoplasmosis is a fungal lung infection caused by breathing in spores of *Histoplasma*, which can be found in soil contaminated with bird or bat droppings, and the

Centers for Disease Control and Prevention states that histoplasmosis is often misdiagnosed or diagnosed late because symptoms resemble more common pneumonias caused by bacteria or viruses;

Whereas the Centers for Disease Control and Prevention has responded to recent fungal disease outbreaks, including a histoplasmosis outbreak between 2025 and 2026 affecting Tennessee and required rapid public health communication;

Whereas the Emerging Infectious Diseases journal published by the Centers for Disease Control and Prevention reported a large 2023 blastomycosis outbreak among employees at a paper mill in northern Michigan, with 162 identified cases and a case prevalence of nearly 20 percent among mill employees, demonstrating the importance of occupational awareness, testing, and outbreak response capacity;

Whereas *Candida auris*, or *C. auris*, is an emerging, often drug-resistant fungus that can cause life-threatening infections leading to severe illness, and spreads easily among patients in healthcare facilities;

Whereas the Centers for Disease Control and Prevention reported 6,304 new clinical cases of *C. auris* in the United States in 2024 and the total number of clinical cases has increased each year since the first case was reported in 2016;

Whereas early recognition, accurate fungal identification and drug susceptibility testing, antifungal treatment when indicated, infection prevention and control, environmental and occupational risk awareness, and improved surveillance can help reduce the burden of fungal diseases; and

Whereas patients and families affected by fungal diseases often experience delayed diagnosis, prolonged treatment, treatment toxicities, financial strain, disability, lasting physical, emotional, and social impacts, and death: Now, therefore, be it

1 *Resolved*, That the House of Representatives—

2 (1) supports the designation of “Fungal Dis-
3 ease Awareness Week” and the importance of im-
4 proving awareness of fungal diseases among the
5 public, healthcare professionals, public health agen-
6 cies, employers, educators, and policymakers;

7 (2) honors patients, survivors, caregivers, clini-
8 cians, laboratorians, public health professionals, re-
9 searchers, and advocates working to prevent, diag-
10 nose, treat, and respond to fungal diseases;

11 (3) encourages healthcare professionals to
12 “think fungus” when evaluating patients with pneu-
13 monia-like illness, severe respiratory disease, menin-
14 gitis, sepsis, healthcare-associated infections, unex-
15 plained symptoms after environmental, healthcare,
16 or occupational exposures, or illness that does not
17 improve with treatment;

18 (4) supports expanded education and outreach
19 on Valley Fever, histoplasmosis, blastomycosis,
20 aspergillosis, mucormycosis, fungal meningitis, se-

1 vere ringworm, candidiasis, *Candida auris*, and other
2 serious fungal diseases;

3 (5) recognizes Valley Fever as a growing public
4 health concern, particularly in California, Arizona,
5 and other areas where *Coccidioides* exists, and sup-
6 ports efforts to improve timely diagnosis, treatment,
7 surveillance, occupational awareness, and patient-
8 centered care;

9 (6) recognizes recent fungal disease outbreaks
10 as evidence of the need for stronger public health
11 readiness, including outbreak investigation capacity,
12 laboratory testing, clinician alerts, occupational and
13 environmental risk communication, and coordination
14 across local, State, Tribal, territorial, and Federal
15 agencies;

16 (7) recognizes *Candida auris* as an urgent
17 healthcare-associated fungal threat that requires
18 early detection, screening when appropriate, infec-
19 tion prevention and control, environmental disinfec-
20 tion, interfacility communication, laboratory capac-
21 ity, and antifungal resistance monitoring;

22 (8) recognizes there are existing knowledge
23 gaps and a need to better understand the preva-
24 lence, transmission, and public health impacts of
25 *Candida auris* in community settings;

1 (9) encourages the Centers for Disease Control
2 and Prevention and local, State, Tribal, and terri-
3 torial health departments, healthcare facilities, pro-
4 fessional societies, patient organizations, and com-
5 munity partners to expand education, surveillance,
6 and prevention activities during Fungal Disease
7 Awareness Week and throughout the year;

8 (10) supports improved fungal disease surveil-
9 lance and reporting, including consideration of gaps
10 in reporting for serious fungal diseases that are not
11 uniformly reportable across States;

12 (11) supports research and innovation to im-
13 prove fungal diagnostics, antifungal treatments, vac-
14 cines where feasible, environmental and occupational
15 prevention strategies, infection prevention practices,
16 and patient-reported outcomes; and

17 (12) affirms that fungal disease awareness
18 saves lives by promoting earlier recognition, timely
19 and appropriate testing and treatment, better out-
20 break response, and more effective prevention.

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