Science Advancement & Outreach
A DIVISION OF PETA

1536 16th St. N.W., Washington, DC 20036

September 23, 2026

Dear National Advisory Allergy and Infectious Diseases Council members:

I am writing on behalf of Science Advancement and Outreach, the biomedical science policy division of People for the Ethical Treatment of Animals, to again request that the National Advisory Allergy and Infectious Diseases Council advise the National Institute of Allergy and Infectious Diseases (NIAID) to prioritize and support sepsis research and training that focuses exclusively on non-animal methods, and to end the conduct and funding of sepsis research that uses other animals.

NIH has already recognized the need for both sides of this transition. In April 2025, the agency said it would "expand innovative, human-based science while reducing animal use in research."[1] While NIH has made progress toward increasing funding and resources for human-based science, it has yet to make corresponding progress toward reducing animal use in research. We urge NIAID to do both by expanding support for human-based approaches while deliberately ending funding for sepsis experiments on animals.

1. **End the use of animals in sepsis research**

The numerous biological differences between humans and other animals used in sepsis research,[2,3,4,5,6,7,8,9] along with the inability of experimental methods[10,11] and conditions[12,13,14,15] to replicate human sepsis induction and progression, help explain why more than 150 therapeutic candidates that appeared effective in animal experiments have failed in human sepsis clinical trials.[16,17]

In response, a 2019 working group on sepsis convened by the National Institute of General Medical Sciences (NIGMS) recommended rebalancing its sepsis research funding portfolio to place a stronger emphasis on clinical research.[18] This recommendation was reiterated in a related Notice of Information[19] and by a NIGMS official at the 2025 Shock Society Annual Conference.[20]

According to NIH RePORTER, NIAID is currently funding at least 60 projects that use mice in sepsis experiments. While NIGMS has taken steps to shift its sepsis portfolio toward a more human-focused approach, NIAID continues to fund a substantial number of studies using mice in an attempt to model human sepsis. We urge NIAID to discontinue conducting and funding experiments on mice and other animals in attempts to model human sepsis and instead redirect resources toward human-relevant methodologies.

2. **Increase training and support for sepsis researchers using human-based approaches**

Non-animal, human-based technologies are already transforming sepsis research. Three-dimensional human tissue models are being used to study sepsis pathogenesis,[21] while microfluidic systems are enabling analysis of patient blood samples to identify biomarkers.[22,23] Additionally, advances in genomics[24,25] and machine-learning[26,27] are improving sepsis diagnosis and prognosis.

With NIH investing in initiatives to expand funding and training in human-relevant science, NIAID has a critical opportunity to accelerate this transition by:

- Creating training grants and fellowships that equip researchers with hands-on experience using non-animal methodologies in sepsis research.
- Partnering with universities and research institutes to establish continuing education and certification programs focused on non-animal approaches.
- Offering transition and early-career awards that incentivize investigators to replace experiments on animals with human-based systems and establish human-focused research programs.

These efforts should be paired with a deliberate end to funding for sepsis experiments on animals. Increasing support for human-based approaches while continuing to fund ineffective animal experiments will not end experiments on animals. NIH continues to support animal research infrastructure, breeding programs, training, model development, and research projects, creating institutional and financial incentives for animal experimentation to continue even when human-relevant tools are available.

These and related recommendations are expanded on in our policy roadmap, Research Modernization NOW, including an appendix on sepsis.

Implementing these recommendations would allow NIAID to align with NIH's Unified Strategy,[28] the wishes of the administration and the public, and advance a predictive, efficient, and human-specific research paradigm—accelerating progress toward effective sepsis treatments and improving patient outcomes.

Thank you for considering these recommendations.

Sincerely,



Gabby Vidaurre, Ph.D.
Research Associate

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