

From: Fauci, Anthony (NIH/NIAID) [E]
Sent: Fri, 28 Feb 2020 11:25:43 +0000
To: Conrad, Patricia (NIH/NIAID) [E]
Subject: FW: Coronavirus update for your upcoming Keystone Symposia meeting

FYI

From: Allison Ogdon <AllisonO@keystonesymposia.org>
Sent: Friday, February 28, 2020 12:10 AM
To: Allison Ogdon <AllisonO@keystonesymposia.org>
Cc: Heidi Daetwyler <HeidiD@keystonesymposia.org>
Subject: Coronavirus update for your upcoming Keystone Symposia meeting
Importance: High



Greetings,

In light of the current coronavirus situation, we would like to provide an update on your upcoming Keystone Symposia conference.

The health and safety of our meeting attendees and speakers is our top priority, and we are carefully monitoring the coronavirus situation around the world to ensure we take the necessary precautions as recommended by healthcare providers and public health organizations.

Currently, ***your meeting will proceed as scheduled***, and we will contact you immediately if anything changes. Decisions will be made on a moment to moment basis, as new information becomes available. We assure you that the leadership team at Keystone Symposia is closely monitoring global developments and will take swift action to ensure the health and safety of all meeting participants.

As a speaker, you hold a very special role at the meeting as a field leader. We very much appreciate your contribution to both the scientific program, and the community of luminary scientists who will convene to direct the future of the field. Your presentation will be a highlight for many attendees, and your insights will inspire others to take on new and innovative directions in their own work. This is the essence of Keystone Symposia -- convening communities of leading scientists to inspire each other to advance biomedicine, and this would not be possible without your engagement.

We realize the current situation may add some inconveniences to travel at this time, but we also remind you that each and every one of our speakers is hand-selected by a committee of the world's leading experts to represent their field at the meeting. You are among a very select few to receive this honor.

The meeting organizers, and our team at Keystone Symposia, have put a great deal of time and effort over the last two years into designing the program, and your presentation is a key part of that. We hope you will take these thoughts into consideration as the meeting approaches.

While this is a time we must all be vigilant about public health measures, we are reminding conference attendees that this is also a time to remain calm, rational and scientific in addressing the situation. We encourage you to engage with your fellow colleagues at the meeting as you normally would, to forge new collaborations and novel ideas that will drive your research and the field in innovative and fruitful directions. **At the meeting, we are providing the following suggestions based on recommendations from the National Foundation of Infectious Disease:**

- ***The best way to protect yourself against COVID-19 is similar to how you would take precautions against the cold or flu.*** Wash your hands often using soap and water for at least 20 seconds. Cover your cough or sneeze with a tissue or the crook of your elbow rather than your hands.
- ***There is no need to wear a face mask if you are well and do not have symptoms—masks protect the sick from spreading germs but will not prevent you from getting sick.***
- ***Do not assume that anyone of Asian descent is more likely to have coronavirus—***do not forget about the importance of inclusivity and evidence-based information.

Again, we thank you for your contributions and commitment to Keystone Symposia and wish for a very successful and inspiring meeting.

Sincerely,



Deborah L. Johnson, Ph.D.
President and Chief Executive Officer
Keystone Symposia on Molecular and Cellular Biology

KEYSTONE  SYMPOSIA™
on Molecular and Cellular Biology
Accelerating Life Science Discovery

INCLUDE
DIVERSITY IN THE SCIENTIFIC WORKFORCE

PO Box 1630 | Silverthorne | CO 80498 | USA (regular mail only)
160 US Highway 6, Ste. 200 | Silverthorne | CO 80498 | USA (courier only)
970.262.1230 | 800.253.0685 | www.keystonesymposia.org
Visit virtual.keystonesymposia.org to view our digital content.

From: Fauci, Anthony (NIH/NIAID) [E]
Sent: Sat, 22 Feb 2020 20:38:12 +0000
To: Conrad, Patricia (NIH/NIAID) [E]
Cc: Routh, Jennifer (NIH/NIAID) [E]
Subject: RE: interview request: draft responses for Greek newspaper

Good job! See my minor edits in **red**. Thanks.

Anthony S. Fauci, MD
Director
National Institute of Allergy and Infectious Diseases
Building 31, Room 7A-03
31 Center Drive, MSC 2520
National Institutes of Health
Bethesda, MD 20892-2520
Phone: (b) (6)
FAX: (301) 496-4409
E-mail: (b) (6)

The information in this e-mail and any of its attachments is confidential and may contain sensitive information. It should not be used by anyone who is not the original intended recipient. If you have received this e-mail in error please inform the sender and delete it from your mailbox or any other storage devices. The National Institute of Allergy and Infectious Diseases (NIAID) shall not accept liability for any statements made that are the sender's own and not expressly made on behalf of the NIAID by one of its representatives.

From: Conrad, Patricia (NIH/NIAID) [E] (b) (6)
Sent: Friday, February 21, 2020 4:57 PM
To: Fauci, Anthony (NIH/NIAID) [E] (b) (6)
Subject: FW: interview request: draft responses for Greek newspaper

Do you want to edit these..greek paper/pring?

Patricia L. Conrad
Public Health Analyst and
Special Assistant to the Director
National Institute of Allergy and Infectious Diseases
The National Institutes of Health
31 Center Drive, MSC 2520 - Room 7A03
Bethesda, Maryland 20892
(b) (6)
301-496-4409 fax

Disclaimer:

The information in this e-mail and any of its attachments is confidential and may contain sensitive information. It should not be used by anyone who is not the original intended recipient. If you have received this e-mail in error please inform the sender and delete it

from your mailbox or any other storage devices. National Institute of Allergy and Infectious Diseases (NIAID) shall not accept liability for any statement made that are sender's own and not expressly made on behalf of the NIAID by one of its representatives.

From: Routh, Jennifer (NIH/NIAID) [E] (b) (6)>
Sent: Friday, February 21, 2020 4:52 PM
To: Conrad, Patricia (NIH/NIAID) [E] (b) (6)>; NIAID FOG <fog@niaid.nih.gov>
Cc: NIAID COGCORE <COGCORE@mail.nih.gov>; NIAID Media Inquiries <mediainquiries@niaid.nih.gov>
Subject: interview request: draft responses for Greek newspaper

Reporter: Theodora Tsoli
Organization: Greek newspaper To VIMA (www.tovima.gr)
Phone #(s): (b) (6), ttsoli@tovima.gr
Subject: COVID-19
Deadline: Monday 2/24

The reporter emailed questions for ASF. I have drafted proposed responses for his review, also attached.

- 1. Do you believe that SARS-COV2 is capable of causing a pandemic? Are you expecting many secondary transmissions of the virus outside China?**
A pandemic is generally defined as sustained transmission of a new pathogen in multiple regions of the world. COVID-19 does not yet meet that definition, and I hope that China and other countries in Asia with some transmission are able to contain the outbreak. However, it is possible that COVID-19 could become a pandemic. It would not be surprising to see additional secondary transmissions of the virus outside of China.
- 2. Chinese authorities are reporting a decline of new cases. Could we say that the virus has peaked and maybe it will slow down? When are you expecting to have a clearer picture about the evolution of this epidemic?**
Although the number of **daily** cases in China appears to have gone down, it is too early to tell if this is really a decline in the outbreak.
- 3. Could the virus become endemic and give seasonal outbreaks?**
If China is not able to contain the outbreak, it is possible COVID-19 could become endemic and lead to seasonal outbreaks. However, it is too early to know the likelihood of this scenario.
- 4. What about its transmissibility? Some experts say that WHO is underestimating it's transmissibility. Could the reality be different maybe because, among other things, many cases stay undetected?**
Because of the many unknowns about SARS-CoV-2, it is difficult to make any firm conclusions regarding overall transmissibility and severity. However, it appears to be much more transmissible than SARS. Also, there are likely asymptomatic COVID-19 infections that are not getting counted because people do not go to the doctor for testing or treatment if they are not sick.

5. **Do you believe that the measures taken by China and countries around the world are adequate to stop SARS-COV2 spread? There is a lot of discussion about thermal cameras and travel restrictions for example.**
China has taken extreme measures to control the outbreak. Restricting the movement of 50 million people is unprecedented. However, it might ultimately have an effect on slowing transmission. Precautions implemented in the U.S. are not intended to detect every person with COVID-19 entering the country. However, our approach has allowed us time to better plan and prepare our health system.
6. **What is the key to stop the worldwide spread of the virus?**
Though we have mobilized a rapid research response to quickly develop effective countermeasures, right now, the outbreak response remains focused on the proven public health practices of identifying cases, isolating patients and tracing contacts.
7. **In the northern hemisphere we have a flu outbreak - in Greece as well. Some experts say that this is the real danger and not the coronavirus. What is your view?**
I am always concerned about influenza. Every flu season, millions of people are at risk of getting very sick or dying. Currently people in the U.S. and most countries in the northern hemisphere are at a much higher risk of being exposed to influenza than SARS-CoV-2. However, the COVID-19 outbreak is an evolving situation and we are treating it as a very serious public health threat.
8. **Many efforts are being in process for the development of a vaccine for the new coronavirus. Are you coordinating any of them and which ones? Are there any efforts more promising than others? Which platforms of vaccine development are more promising? When do you believe that we could have a vaccine available for clinical trials and then for human use?**
NIAID is exploring multiple candidates and is on track to test an experimental messenger RNA (mRNA) vaccine in a Phase 1 clinical trial this spring. This first phase of clinical testing will involve giving the vaccine to healthy adults in the United States to see if it is safe and if it can induce an immune response in recipients. It is important to realize that the development of investigational vaccines and the clinical testing to establish their safety and effectiveness takes time. A vaccine against the novel coronavirus will likely not be widely available for **more than** a year.
9. **What about therapies? Dozens are being tried - from plasma to herbal medicines in China. Which are the most promising?**
NIAID is pursuing the development of antivirals and monoclonal antibodies for potential use against COVID-19. NIAID is preparing protocols for *in vitro* and *in vivo* studies of the antiviral remdesivir, which has shown promise against other coronaviruses in animal models. NIAID also plans to evaluate Kaletra (lopinavir/ritonavir) and interferon-beta for their activity against SARS-CoV-2. In addition, NIAID scientists are working to identify monoclonal antibodies with

therapeutic potential from stored SARS patient samples as well as COVID-19 patient samples.

10. **Are the things we know about this new virus more than the ones we don't know? Which are the main questions about it that remain to be answered?**
New data **are** published about SARS-CoV-2 every day. However, we still have a lot to learn. For example, we do not know why there are **so few cases among** children, which is uncommon for a respiratory virus.
11. **How worried should people outside China be about SARS-COV2? What is the biggest danger from this virus?**
. The risk to the general American public remains low at this time; **however, this could change and that is why we are treating the emergence of a novel coronavirus as a very serious public health threat.** We understand that people may be worried. We ask that people not let fear or panic guide their actions.
12. **Which are the protective measures anyone should take against the new virus? Do masks work?**
The vast majority of people outside of China do not need to wear a mask. A mask is more appropriate for someone who is infected than for people trying to protect against infection.

Jennifer Routh [E]
News and Science Writing Branch
Office of Communications and Government Relations
National Institute of Allergy and Infectious Diseases (NIAID)
NIH/HHS
31 Center Drive Room 7A17C
Bethesda, MD 20892
Direct: (b) (6)
(b) (6)

Disclaimer: The information in this e-mail and any of its attachments is confidential and may contain sensitive information. It should not be used by anyone who is not the original intended recipient. If you have received this e-mail in error please inform the sender and delete it from your mailbox or any other storage devices. The National Institute of Allergy and Infectious Diseases shall not accept liability for any statements made that are sender's own and not expressly made on behalf of the NIAID by one of its representatives.

From: Fauci, Anthony (NIH/NIAID) [E]
Sent: Wed, 22 Apr 2020 14:55:57 +0000
To: Conrad, Patricia (NIH/NIAID) [E]
Cc: Barasch, Kimberly (NIH/NIAID) [C]
Subject: FW: Coronavirus Questions for the Office of the Surgeon General

Please make sure that I call this person tomorrow [REDACTED] (b) (6).

Anthony S. Fauci, MD
Director
National Institute of Allergy and Infectious Diseases
Building 31, Room 7A-03
31 Center Drive, MSC 2520
National Institutes of Health
Bethesda, MD 20892-2520
Phone: [REDACTED] (b) (6)
FAX: (301) 496-4409
E-mail: [REDACTED] (b) (6)

The information in this e-mail and any of its attachments is confidential and may contain sensitive information. It should not be used by anyone who is not the original intended recipient. If you have received this e-mail in error please inform the sender and delete it from your mailbox or any other storage devices. The National Institute of Allergy and Infectious Diseases (NIAID) shall not accept liability for any statements made that are the sender's own and not expressly made on behalf of the NIAID by one of its representatives.

From: [REDACTED] (b) (6) MEDCOM (USA) [REDACTED] (b) (6)
Sent: Tuesday, April 21, 2020 9:58 PM
To: Fauci, Anthony (NIH/NIAID) [E] [REDACTED] (b) (6)
Subject: RE: Coronavirus Questions for the Office of the Surgeon General

Dr. Fauci,

Thank you for responding to my request for information. Please be safe.

[REDACTED] (b) (6)
[REDACTED] (b) (6) My cell phone number is [REDACTED] (b) (6).

r/
[REDACTED] (b) (6)

From: Fauci, Anthony (NIH/NIAID) [E] [REDACTED] (b) (6)
Sent: Tuesday, April 21, 2020 12:49 PM
To: [REDACTED] (b) (6) MEDCOM (USA) [REDACTED] (b) (6)
Cc: Lerner, Andrea (NIH/NIAID) [E] [REDACTED] (b) (6)
Subject: [Non-DoD Source] FW: Coronavirus Questions for the Office of the Surgeon General

All active links contained in this email were disabled. Please verify the identity of the sender, and confirm the authenticity of all links contained within the message prior to copying and pasting the address to a Web browser.

(b) (6)

Thank you for your note. Shown below are my answers to your questions. I hope that you find them helpful.

- 1. How do you recommend I reassure our staff on dealing with the stressors of COVID-19?**

This is indeed an unprecedented and stressful time. Stress can often come from the unknown. In times of stress it is critical to take care of one's physical health, by eating well, getting enough sleep, and exercising. In addition, maintaining connections with family and friends (via phone calls, email, or video chatting) while physically socially distancing is very important.
- 2. Can COVID-19 be contracted from a corpse?**

Infection control measures should be undertaken when dealing with deceased individuals with known or suspected COVID-19. The CDC provides guidance on this issue here: [Caution-https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-postmortem-specimens.html](https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-postmortem-specimens.html) < [Caution-https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-postmortem-specimens.html](https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-postmortem-specimens.html) >
- 3. If someone has been a user of Hydroxychloroquine for years, are they susceptible to contracting COVID-19?**

Clinical trials are underway to determine if hydroxychloroquine is effective in preventing COVID-19 in exposed persons. Until we know the answer to this question, persons who take hydroxychloroquine on a daily basis for another medical condition should consider themselves vulnerable to COVID-19 and take appropriate and recommended measures to protect themselves.
- 4. Are masks and gloves truly effective, if so, why are so many medical professionals contracting the virus?**

I believe that infection control strategies which include proper use of personal protective equipment (PPE) as recommended by the CDC are effective. [Caution-https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html?CDC_AA_refVal=https%3A%2F%2FCaution-www.cdc.gov%2Fcoronavirus%2F2019-ncov%2Finfection-control%2Fcontrol-recommendations.html](https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html?CDC_AA_refVal=https%3A%2F%2FCaution-www.cdc.gov%2Fcoronavirus%2F2019-ncov%2Finfection-control%2Fcontrol-recommendations.html) < [Caution-https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html?CDC_AA_refVal=https%3A%2F%2FCaution-www.cdc.gov%2Fcoronavirus%2F2019-ncov%2Finfection-control%2Fcontrol-recommendations.html](https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html?CDC_AA_refVal=https%3A%2F%2FCaution-www.cdc.gov%2Fcoronavirus%2F2019-ncov%2Finfection-control%2Fcontrol-recommendations.html) >

In cases where inadequate PPE is worn, or if is not put on/taken off according to proper procedure, the risk of contracting COVID is increased. In addition, healthcare workers on the front lines can be exposed if they encounter a patient who is not initially suspected of having COVID-19 without PPE, especially if they are exposed to aerosol generating processes.

5. What is the most important thing we should be doing, other than social distancing?

Social distancing is key in order to avoid coming into contact with someone with COVID-19, but washing one's hands often (or using an alcohol-based hand sanitizer) and avoiding touching one's face with unwashed hands are critical as well, especially when coming into contact with surfaces that may have been touched by others or public places.

6. Finally, what keeps you up at night, regarding COVID-19?

I have said in the past that what keeps me up at night is the possibility of a pandemic respiratory infection. We are in that reality now, and what keeps me up at night is the response, a major part of which is the development of an effective vaccine and treatments for COVID-19.

Best regards,

Tony

Anthony S. Fauci, MD

Director

National Institute of Allergy and Infectious Diseases

Building 31, Room 7A-03

31 Center Drive, MSC 2520

National Institutes of Health

Bethesda, MD 20892-2520

Phone: (b) (6)

FAX: (301) 496-4409

E- (b) (6)

The information in this e-mail and any of its attachments is confidential and may contain sensitive information. It should not be used by anyone who is not the original intended recipient. If you have received this e-mail in error please inform the sender and delete it from your mailbox or any other storage devices. The National Institute of Allergy and Infectious Diseases (NIAID) shall not accept liability for any statements made that are the sender's own and not expressly made on behalf of the NIAID by one of its representatives.

From: (b) (6) MEDCOM (USA) (b) (6) -
(b) (6) > >

Sent: Tuesday, April 14, 2020 9:13 AM

To: Fauci, Anthony (NIH/NIAID) [E] (b) (6) > >

Subject: Coronavirus Questions for the Office of the Surgeon General

Dr. Fauci,

I am (b) (6), the antiterrorism and insider threat officer for the Office of the Surgeon General (Army) / U.S. Army Medical Command. I have been in government for nearly thirty-four years, and this is new to me. I see and hear the concerns of many people. You are the voice of reason for millions of concerned citizens. I have a few questions for you:

1. How do you recommend I reassure our staff on dealing with the stressors of COVID-19?

2. Can COVID-19 be contracted from a corpse?
3. If someone has been a user of Hydroxychloroquine for years, are they susceptible to contracting COVID-19?
4. Are masks and gloves truly effective, if so, why are so many medical professionals contracting the virus?
5. What is the most important thing we should be doing, other than social distancing?

Finally, what keeps you up at night, regarding COVID-19?

Thank you for your time and please be safe.

r/

(b) (6) Antiterrorism and Insider Threat Officer
Office of the Surgeon General and U.S. Army Medical Command
Mission Assurance and Protection Division
Fort Sam Houston, TX 78234
Cell phone: (b) (6)

 (b) (6)

✉ NIPRNet: (b) (6)

✉ SIPRNet:

Level I Antiterrorism Awareness Training:

Caution-<http://jko.jten.mil/courses/at1/launch.html> < Caution-
<http://jko.jten.mil/courses/at1/launch.html> >

Organizational Mailbox:

(b) (6) < Caution-
mailto:(b) (6) >

To submit contracts for AT/OPSEC review:

Caution-(b) (6) Caution-
(b) (6) >

"Not on My Watch"

CONFIDENTIALITY NOTE: This electronic transmission, including all attachments, is directed in confidence solely to the person(s) to whom it is addressed, or an authorized recipient, and may not otherwise be distributed, copied or disclosed. The contents of the transmission may also be subject to intellectual property rights and all such rights are expressly claimed and are not waived. If you received this transmission in error, please notify the sender immediately by returning the electronic transmission and then immediately delete this transmission, including all attachments, without copying, distributing or disclosing same.

"PRIVACY ACT INFORMATION"

In compliance with the Privacy Act of 1974, this information is Personal Data and must be protected from public disclosure.

From: Fauci, Anthony (NIH/NIAID) [E]
Sent: Thu, 16 Apr 2020 02:50:34 +0000
To: DuBois, Raymond N.
Subject: RE: Mask wearing policy at our University Hospital

Ray:

Thank you for your note. I would keep the policy "voluntary" but I would "encourage" employees to wear them.

Best regards,
Tony

From: DuBois, Raymond N. (b) (6)
Sent: Wednesday, April 15, 2020 7:18 AM
To: Fauci, Anthony (NIH/NIAID) [E] (b) (6)>
Subject: Mask wearing policy at our University Hospital

Dear Dr. Fauci,

My name is Ray DuBois and in addition to being the Dean of Medicine here at the Medical University of South Carolina in Charleston, I chair the Board of Scientific Councilors for the NCI. The mask wearing policy for our Health System is developed by our infection control group and not by the College of Medicine.

Currently, we have a "voluntary" mask wearing policy for the health system and our main University Hospital. Based on your recent comments about asymptomatic and pre-symptomatic carriers of COVID-19, do you agree that keeping this voluntary is the correct approach?

Obviously, your opinion here is extremely well respected and I would like for us to provide the safest environment possible for our faculty, employees and patients.

Ray DuBois, M.D., Ph.D.
Dean of Medicine
The Medical University of South Carolina....Charleston, SC
Member of the National Academy of Medicine

From: Conrad, Patricia (NIH/NIAID) [E] on behalf of Fauci, Anthony (NIH/NIAID) [E]
Sent: Tue, 31 Mar 2020 21:07:00 +0000
To: NIAID OD AM
Subject: FW: Additional data on masks
Attachments: MacIntyre BMI.pdf, Figure 3.jpg

Adding everyone since it was discussed in am meeting. thx

From: Lerner, Andrea (NIH/NIAID) [E] (b) (6) >
Sent: Tuesday, March 31, 2020 5:04 PM
To: Fauci, Anthony (NIH/NIAID) [E] (b) (6) >
Cc: Folkers, Greg (NIH/NIAID) [E] (b) (6) >; Marston, Hilary (NIH/NIAID) [E]
<(b) (6)>; Eisinger, Robert (NIH/NIAID) [E] (b) (6) >; Doepel, Laurie
(NIH/NIAID) [E] (b) (6)
Subject: Additional data on masks

Dr. Fauci,

In addition, I found the attachedd review on masks that addresses use in the community settings. Attached are the paper and figure 3, which summarizes the data from 9 very diverse RCTs (overlapping with what I had sent earlier).

Bottom line: generally there were not differences in ILI/URI/or flu rates when masks were used, although when early use and compliance was taken into account, a few times a difference was seen.

In addition:

This case control study noted that, among SARS patients in Hong Kong without a known source of infection, cases (27.9%) were less likely than uninfected controls (58.7%) to report wearing a mask frequently in public, for what that's worth.

https://wwwnc.cdc.gov/eid/article/10/4/03-0628_article

(b) (5)

Andrea

From: (b) (6)
Sent: Mon, 16 Mar 2020 06:09:17 -0400
To: Lerner, Andrea (NIH/NIAID) [E]
Subject: Fwd: Dental

Respond

Sent from my iPad

Begin forwarded message:

From: (b) (6)
Date: March 16, 2020 at 5:54:34 AM EDT
To: "Fauci, Anthony (NIH/NIAID) [E]" <(b) (6)>
Subject: Dental

I ask you to address the explosion of concerns among the dental community in regards to COVID-19. We, the dental community, already high risk personnel, are at an even higher risk at this point and time. Many of those who do not work in the dental community are not aware of how high risk our current situation is. For 8-12 hours a day we are creating aerosols while sitting 8-12 inches from a persons open mouth. These aerosols contain saliva and blood droplets, along with billions of other bacteria and materials. In dentistry, saliva is considered a blood borne pathogen. Although OSHA requires Level 3 masks for all aerosol producing procedures, not all offices are complying. This DOES NOT matter anyway as **we know SURGICAL MASKS DO NOT FILTER OUT THE COVID-19 virus**. I ask that you suspend non essential dental procedures such as dental cleanings and other procedures that are non-emergent. That we triage patients and accept EMERGENCIES ONLY. We are at such a HIGH risk, not only to ourselves and our families, but a HIGH RISK to spreading this virus COMMUNITY wide. Many of us are taking extra precautions but screening patients, but with a up-to-14 day incubation period, that obviously does not matter.

Please hear our plea to address our concerns. The American Dental Association and the American Dental Hygienists Association has failed us.

Thank you
Alicia Jewell

Sent from my Verizon, Samsung Galaxy smartphone

From: Fauci, Anthony (NIH/NIAID) [E]
Sent: Tue, 11 Feb 2020 23:45:51 +0000
To: Lerner, Andrea (NIH/NIAID) [E]
Subject: FW: Pharmacist's/Prescriber's Letter Review Request - Coronavirus

Please take a look at this and respond for me.

Thanks,
Tony

Anthony S. Fauci, MD
Director
National Institute of Allergy and Infectious Diseases
Building 31, Room 7A-03
31 Center Drive, MSC 2520
National Institutes of Health
Bethesda, MD 20892-2520
Phone: (b) (6)
FAX: (301) 496-4409
E-mail: (b) (6)

The information in this e-mail and any of its attachments is confidential and may contain sensitive information. It should not be used by anyone who is not the original intended recipient. If you have received this e-mail in error please inform the sender and delete it from your mailbox or any other storage devices. The National Institute of Allergy and Infectious Diseases (NIAID) shall not accept liability for any statements made that are the sender's own and not expressly made on behalf of the NIAID by one of its representatives.

From: Jennifer Nieman <jnieman@pletter.com>
Sent: Tuesday, February 11, 2020 11:00 AM
To: Fauci, Anthony (NIH/NIAID) [E] (b) (6)
Subject: Pharmacist's/Prescriber's Letter Review Request - Coronavirus

Dear Dr. Fauci,

In the March 2020 issues of *Pharmacist's Letter* and *Prescriber's Letter*, we plan to write about coronavirus.

Pharmacist's and *Prescriber's Letter* is an independent advisory service for pharmacists and physicians. We are not affiliated with any other group, organization, or company. We are 100% subscriber supported. Our focus is providing practical, unbiased advice to subscribers on issues related to drug therapy. Each month we turn to experts like you to help us pin down the most relevant and important information to share with our readers. Our newsletter is well known for being concise and accurate. You will notice the excerpt we are sending you is relatively short.

We would be most appreciative if you would take just a few moments to review what we have written for accuracy and content. Please share any comments or suggestions for changes you may have on the article.

In order to incorporate your comments into the final *Letter*, please let me hear from you by **Monday, Feb. 17th**. I can be reached by email jnieman@PLetter.com or phone (402) 660-4715.

I look forward to your reply.

INFECTION CONTROL

The ongoing outbreak of the novel coronavirus will raise questions about how to limit the spread of respiratory infections.

Managing this situation is similar to outbreaks of SARS and MERS...since coronaviruses are spread by respiratory secretions.

Put the risk in perspective to calm worried patients...since it doesn't come close to the risk of influenza.

For example, over 35 MILLION U.S. patients got the flu last season...with about 500,000 hospitalizations and 34,000 deaths.

Emphasize getting a flu vaccine each year.

And use this coronavirus outbreak as an opportunity to stress infection control...since there's no treatment or vaccine yet.

Reinforce proper hand hygiene. Educate that handwashing with soap and water is the best way to get rid of germs. Advise washing for 20 seconds...about the time it takes to sing the ABC song.

Or recommend using a hand sanitizer with at least 60% alcohol if handwashing isn't practical. Many products contain this much.

But tell patients to be wary of efficacy claims. For example, hand sanitizers are shown to kill enveloped viruses. Coronaviruses are enveloped viruses...but they aren't specifically studied.

Tell patients to avoid touching their eyes, nose, and mouth.

Clear up confusion about masks. Emphasize that masks are for SICK patients...to help keep their germs from getting into the air.

But discourage surgical masks for most patients without symptoms...there's no evidence they help. They're too loose to limit inhaling germs...and viruses can also get in through the eyes.

If patients ask about N95 respirators, tell them these require fitting and training before use. Save them for healthcare workers.

Caution that unnecessary mask use may contribute to shortages.

Continue to ask patients WITH respiratory symptoms to put a surgical mask on when they come to clinic.

And suggest that sick patients wear a mask at home if in close contact with infants, elderly, or immunocompromised patients.

Tell patients to discard masks when damp...and to use a fresh one at least daily.

Encourage patients to stay home when they're sick.

1. <https://www.who.int/emergencies/diseases/novel-coronavirus-2019>
2. <https://www.cdc.gov/coronavirus/2019-ncov/index.html>
3. <https://www.cdc.gov/flu/professionals/infectioncontrol/maskguidance.htm>
4. [https://www.who.int/publications-detail/advice-on-the-use-of-masks-the-community-during-home-care-and-in-health-care-settings-in-the-context-of-the-novel-coronavirus-\(2019-ncov\)-outbreak](https://www.who.int/publications-detail/advice-on-the-use-of-masks-the-community-during-home-care-and-in-health-care-settings-in-the-context-of-the-novel-coronavirus-(2019-ncov)-outbreak)

Sincerely,

Jennifer A. Nieman, PharmD, BCPS

Associate Editor, [TRC Healthcare](#)

M: 402-660-4715 **E:** jnieman@pletter.com **W:** TRCHealthcare.com

Pharmacist's Letter | Prescriber's Letter | Natural Medicines | Pharmacy Technician's Letter | Pharmacy Technicians University

From: Fauci, Anthony (NIH/NIAID) [E]
Sent: Mon, 10 Feb 2020 20:22:28 +0000
To: Routh, Jennifer (NIH/NIAID) [E]
Subject: FW: Wpost: Q&A with Anthony Fauci: Are we past the point of containment for coronavirus?

Let us discuss.

Anthony S. Fauci, MD
Director
National Institute of Allergy and Infectious Diseases
Building 31, Room 7A-03
31 Center Drive, MSC 2520
National Institutes of Health
Bethesda, MD 20892-2520

Phone: (b) (6)

FAX: (301) 496-4409

E-mail: (b) (6)

The information in this e-mail and any of its attachments is confidential and may contain sensitive information. It should not be used by anyone who is not the original intended recipient. If you have received this e-mail in error please inform the sender and delete it from your mailbox or any other storage devices. The National Institute of Allergy and Infectious Diseases (NIAID) shall not accept liability for any statements made that are the sender's own and not expressly made on behalf of the NIAID by one of its representatives.

From: Folkers, Greg (NIH/NIAID) [E] (b) (6) >
Sent: Monday, February 10, 2020 2:37 PM
Subject: Wpost: Q&A with Anthony Fauci: Are we past the point of containment for coronavirus?

[Opinions](#)

Q&A with Anthony Fauci: Are we past the point of containment for coronavirus?



A man wears a protective mask while walking in Wuhan, China, on Feb. 10. (Stringer/AFP/Getty Images)



By

[Robert Gebelhoff](#)

Assistant editor and Opinions contributor

Feb. 10, 2020 at 2:22 p.m. EST

The latest strain of coronavirus continues to rage across China. Its death toll has surpassed 900, [eclipsing the body count](#) from China's SARS outbreak in 2002 and 2003.

To get a better sense of the disease and the U.S. government's response to it, we spoke to Anthony S. Fauci, immunologist and director of the National Institute of Allergy and Infectious Diseases at the National Institutes of Health. Below is a transcript of an interview with Fauci, edited for clarity and brevity.

Robert Gebelhoff: Right off the bat, what makes this virus different?

Anthony Fauci: Well, we have to be concerned whenever there's a virus that has — and I'm going to use a big word here — pathogenic potential. ... [The coronavirus] is brand-new, and there's no real underlying experience with it, so the general population is naive with regard to protection. And it has serious potential, because it's already spreading rapidly. It's the unknown aspect of something that already tells you it's a serious problem. We don't know where it's going.

Gebelhoff: Are we past the point of containment for this coronavirus?

Fauci: No, we're not. The short answer is we're not past the point of containment. But it really does have the potential to turn into a global pandemic. What we have now is a very serious epidemic in China. ... [But outside of China,] there is very little — but some — transmission from person to person. Once you get multiple countries that have sustained transmission from person to person, then it's beyond the situation where you can contain it. You can only mitigate it.

In the United States, we are clearly in the containment phase. ... And what we've done is we've identified. We've isolated. And we've done contact-tracing [identifying who might have come in contact with an infected person]. That seems to be successful. But once it starts spreading all over the world ... then it's almost inevitable that it's going to start spreading here.

Gebelhoff: The Post [reported](#) last week that China withheld information from the public, including silencing medical professionals, and that this made the spread of the virus worse. How does the United States work with a government that we can't even trust to tell the truth to its people?

Fauci: That is an issue. And it's the reason why I have been saying that we need some of our people — CDC, NIH people — there on the ground, both helping and seeing with their own eyes exactly the extent of this. We want to be part of a [World Health Organization] convening group that goes there. But thus far, we've not been able to make that a reality.

Gebelhoff: And why's that?

Fauci: I don't know. We have asked. We have colleagues — scientific colleagues — in China that we've dealt with for years if not decades. Many of them have trained in the United States. And we know them as friends and as colleagues. They are the ones that are not holding back. ... But they're not the ones that make the official proclamations of what comes out. The solution to the problem in the question you're posing is that we really do want people there, so that we can not only help them but also provide some expertise that might supplement or complement their own expertise.

Gebelhoff: What does the United States do if [the coronavirus] does become a pandemic in the developing world?

Fauci: Well obviously we will try to help them to contain as best as possible. ... Right now, by definition, it is not truly a global pandemic. It is a very serious outbreak and epidemic in China, but the amount of sustained transmission outside of China is still minimal. ... But there are some countries where it is going to be very difficult to stop the evolution into sustained transmission. Obviously the [World Health Organization] and the global security network that we put up over the years will try to help those countries, but there's no guarantee that we'll be successful.

Gebelhoff: On that point, the head of the WHO [has criticized](#) travel bans and restrictions around the world as not helpful to stopping the outbreak. He said it was potentially "increasing fear and stigma." What

Fauci: Everyone agrees that travel bans and restrictions are almost never successful in completely stopping something that invariably going to turn into a pandemic. ... What we are trying to do is to pause temporarily and give China enough time to put the lid on [this virus] to prevent it from becoming global and to give us a little more time to prepare. There's no indication or imagination that if this becomes a global pandemic that travel restrictions are going to mean anything. But they can mean something, as a temporizing activity.

Gebelhoff: What should the average person be doing right now about coronavirus?

Fauci: It's a good question. 1) They should realize at this point, it is a low risk. And 2) that risk can change, so pay attention to what's going on [and] to the ... announcements coming from the CDC. ... The things that you do for influenza — get vaccinated, wash your hands, avoid crowded places — are exactly the same things that you would do if we did get coronavirus here. So the question is, should we do anything different from what we're already doing? No. **Should we all be wearing a mask? Absolutely not.**

Read more:

[The Post's View: The virus that shook China's system](#)

[Chen Guangcheng: Warning: Chinese authoritarianism is hazardous to your health](#)

[David Ignatius: The coronavirus outbreak shows the vulnerability of the 'Chinese model'](#)

[John M. Barry: Can this virus be contained? Probably not.](#)

[John Pomfret: The coronavirus reawakens old racist tropes against Chinese people](#)



[Robert Gebelhoff](#)

Robert Gebelhoff is an assistant editor for The Post's Opinions section. He has been with The Post since 2015.[Follow](#)

Disclaimer: Any third-party material in this email has been shared for internal use under fair use provisions of U.S. copyright law, without further verification of its accuracy/veracity. It does not necessarily represent my views nor those of NIAID, NIH, HHS, or the U.S. government.

From: Fauci, Anthony (NIH/NIAID) [E]
Sent: Wed, 5 Feb 2020 03:48:11 +0000
To: Sylvia Burwell
Subject: RE: A couple of quick questions.

Sylvia:

Masks are really for infected people to prevent them from spreading infection to people who are not infected rather than protecting uninfected people from acquiring infection. The typical mask you buy in the drug store is not really effective in keeping out virus, which is small enough to pass through the material. It might, however, provide some slight benefit in keep out gross droplets if someone coughs or sneezes on you. I do not recommend that you wear a mask, particularly since you are going to a vey low risk location. Your instincts are correct, money is best spent on medical countermeasures such as diagnostics and vaccines.

Safe travels.

Best regards,
Tony

From: Sylvia Burwell [REDACTED] (b) (6) >
Sent: Tuesday, February 4, 2020 10:24 PM
To: Fauci, Anthony (NIH/NIAID) [E] [REDACTED] (b) (6)
Subject: A couple of quick questions.

Begin forwarded message:

From: Sylvia Burwell [REDACTED] (b) (6)
Date: February 4, 2020 at 9:35:03 PM EST
To: Sylvia Burwell [REDACTED] (b) (6)
Subject: Fwd: Advice re a donation

EXTERNAL EMAIL: Use caution with links and attachments.

Begin forwarded message:

From: Sylvia Burwell [REDACTED] (b) (6)
Date: February 4, 2020 at 9:33:47 PM EST
To: Tony Fauci [REDACTED] (b) (6) >
Subject: Fwd: Advice re a donation

Tony

Two quick questions

1. I am traveling to [REDACTED] (b) (6) Folks are suggesting I take a mask for the airport. Is this something I should do.

2. Please see below. Do the Chinese have needs for support right now? Would money be better spent on diagnostics or vaccine work?

Thanks!

Sylvia

Begin forwarded message:

From: Richard Falkenrath [REDACTED] (b) (6)
Date: February 4, 2020 at 5:27:32 PM EST
To: [REDACTED] (b) (6) Sylvia Mathews Burwell
[REDACTED] (b) (6)
Subject: Advice re a donation

Hi Sylvia

I hope this find you well.

Quick question, a little bit from left field, but drawing on your experience at Gates and HHS. Ray Dalio and Bridgewater are interested in making a very sizable donation to help China deal with the global public health challenge arising from the new coronavirus. Any suggestions of where we should look to donate the funds?

Thanks so much. [REDACTED] (b) (6) Looking forward to seeing you again soon.

Richard
[REDACTED] (b) (6)