

- ① Entry Prod.
- ② Surveillance 1
- ③ International cooperation

Tales from the Hot Seat – "When science matters"

I thank you for the invitation to participate in this ^{conference} ~~first Euro-~~
~~Atlantic Conference dealing with~~ ^{on} Science and Technology. It is
 most timely. Societal security has a new and different meaning
 than it did 20 years ago, even 10 years ago. And the new swine
 influenza pandemic is an emphatic reminder. ^{That virus} ~~is~~ traversed the
 world with blinding speed – well before the best of our vaccine
 producers could create needed vaccines. Had the far more
 lethal H5N1 bird influenza acquired a comparable ability to
 spread, we would today be dealing with a global crisis such as
 we have never before witnessed. Societal security today is more
 fragile than it has ever been. ^{It is an ever shrinking world we inhabit} ~~But it~~ is everyone's problem and
^{in early detection and security} transnational cooperation in the development and application of
 counter-measures is needed as never before.

During my 50 years ~~career~~ ^{I, my colleagues} in public health, I have found
 myself surprisingly often on a "hot seat" as ~~we~~ ^a faced problems ^{posed}
~~caused~~ by polio ~~vaccines~~, influenza, ^{smallpox} ~~monkeypox~~, anthrax, and ^{Ebola virus} ~~others~~
~~food-borne outbreaks of every imaginable sort.~~

For me September 16, 2001 began some of my most
 anxious days -- and weeks. It was a Sunday afternoon, only 5
 days after the airplanes struck the World Trade Towers. I was
 then head of a ^{U.S.} Johns Hopkins ^{for bio security} Center that was struggling to
 persuade a complacent country that biological weapons had to
 be taken seriously. The telephone rang. It was a call from the
 Secretary of Health and Human Services. The Bush
 administration had been in office for less than a year. I had

never met the Secretary. He said: "I need you to attend a meeting at 7:00". I asked whether that was Monday morning or Monday night. He said tonight.

I met with the Secretary and a small staff until nearly midnight. The concern -- intelligence intercepts ^{had} indicated that there would be a second attack and that it would ~~likely~~ be biological—probably smallpox or anthrax. The question was "what can we do". The following morning I called the Centers for Disease Control which was the steward of ~~smallpox vaccine~~ ^{such as we had. It} ~~that~~ had been stored for the past 20 years. How quickly could they ship this vaccine ~~to the states?~~ ^{me} Later that day, they informed ~~us~~ ^{me} that only 90,000 doses of ~~the smallpox~~ ^{our} vaccine were then suitable for use. Five weeks later, the first of the anthrax cases was reported, followed shortly by 21 more. ~~The~~ ^{Our} country was ill-prepared to deal with the problem; laboratory competence was at a premium-- our medical and public health staffs were still in the early stages of simply learning about ^{discuss} such as smallpox and anthrax. ~~There was no question but that~~ the nation was highly vulnerable.

The Secretary established a new office called the "Office of Public Health Preparedness". He insisted that I direct it. Two months later, the office received an emergency appropriation of 3,000 million dollars. It was the beginning ^{for me} of nearly three years of seven-day-weeks as we tried to shape both a research and operational program -- constantly struggling to formulate a response to deal with the next attack-- and we considered such an event probable. Much had to be done -- and done quickly.

We needed smallpox vaccine urgently. There were ~~no~~ ^{no} manufacturers at that time and a 5 year delivery date for each country. 3

Science and technology were ~~even more~~ ^{especially} critical ~~than they had~~ ^{in 18 months we had} been during smallpox eradication. ^{200 million doses.}

It is notable that 2009 marks the 30th anniversary of the declaration ~~by a WHO International Commission~~ that smallpox eradication had been achieved. ~~One of the 25 signatories to the declaration was Dr. Holger Lundbeck, a steadfast supporter and contributor to the program.~~

The challenge ^{in 1967} had been to eliminate smallpox world-wide in 10 years—a disease which over ~~the past~~ ^{the past} three millennia had been the most serious pestilence known to man. To succeed, it required the participation of every country and this was

achieved, even during some of the darkest days of the cold war. ^{It required many new and untried approaches.} In all, health staff from some 73 countries served in the field.

It was not a program, as some ~~believed~~ ^{speculated}, whose execution was a simple matter of buying enough vaccine and sending an army of vaccinators into the field. Indeed, strategy, tactics, and tools for implementation changed steadily as science and technology continually brought new insights and new tools.

This June, I published a book which portrays the challenges and realities in candid detail. ^{I am happy to say that}

^{might be drawn} ~~from this challenge~~ ^{from this challenge} ~~in hopes that~~ ^{in hopes that} ~~lessons~~

Smallpox, the worst of you a forgotten disease -

Tropics
developing countries

It was far more than this -

[see #7 for the balance]