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## United States Senate

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President Barack Obama 1600 Pennsylvania Ave. NW Washington, DC 20500

Dear Mr. President:

I am writing to inquire about the Administration's plans to build appropriate systems and infrastructure that would allow our country to prepare for and respond quickly to any new emerging infectious disease. As we have seen with Ebola and now Zika, manifestations of viruses are emerging in areas of the world that have been previously unexposed, including the United States, necessitating the need for our country to be able to respond quickly and appropriately in both an international and domestic context. This need will become more acute as a result of climate change that will expand the range of mosquitos that carry diseases such as Zika into previously unaffected areas and elevations.

The most recent example of Zika virus infection has, over the last few months, escalated through the Americas at an explosive rate. While the virus itself usually causes only mild symptoms, the link between Zika infection and microcephaly in newborns is unprecedented and alarming. Additionally, the connection between a rare immune driven neurological disorder that causes paralysis, known as Guillain-Barré syndrome, and Zika infection is equally troubling.

As we learned from influenza and Ebola pandemics, the slow development of a coordinated approach among U.S. agencies and international partners reduced and delayed our ability to respond to these disease threats effectively and efficiently. The response to the Zika virus outbreak is shared among a number of agencies. The Department of Health and Human Services (HHS) has been leading the U.S. efforts to respond to Zika with a variety of its partner agencies, including the Centers for Disease Control and Prevention (CDC), the National Institute of Allergy and Infectious Diseases (NIAID), and the Food and Drug Administration (FDA). The U.S. Agency for International Development (USAID) also plays a role as it works extensively in the area of global health. These agencies are also coordinating with international partners such as the World Health Organization (WHO) and the Pan-American Health Organization (PAHO). Additionally our federal agencies are communicating and working with state and local health departments throughout the U.S. to mitigate the spread of the disease and support research and surveillance activities. Ensuring adequate coordination among these numerous partners can be extremely complex.

To maximize effectiveness, there should be a single person at the White House level responsible for organizing policy and interagency efforts as well as liaising with our international and domestic partners in the face of an infectious disease pandemic. It is important, in our increasingly interconnected and globalized world, that such a coordinating function is established and made permanent to address not only the immediate and potential threat from Zika, but the next, more dangerous and more easily communicable pandemic that will eventually hit home.

It is imperative that the U.S also have the systems and infrastructure in place to be able to quickly mobilize a response to a major outbreak in the United States. In the case of Zika, the health manifestation is not immediate, and the transmission through specific types of mosquitos is somewhat predictable. Similarly, Ebola transmission is easily traceable and also difficult, in comparison to other deadly infectious diseases that could be transmitted through air or contaminated surfaces. If the U.S. were to face an outbreak of a highly infectious and dangerous disease that was more difficult to contain and necessitated specialized health training or if a specific and large distribution of health supplies were needed to be quickly deployed, the U.S. currently does not have the systems or infrastructure in place to deal with the logistics of this medical emergency efficiently and effectively.

Rather than responding to each infectious disease outbreak anew, and developing protocols and systems that fade with time, we must build on the emergency investments made during the Ebola outbreak to create a sustainable health emergency preparedness model for the United States that can respond rapidly both domestically and internationally to the next health threat.

Designating a single person at the White House level to coordinate the overall U.S. government response to infectious disease health threats and to regularly communicate with international health agencies is important to optimize surveillance, leverage resources dedicated to researching vaccines, therapeutics, and other countermeasures and to ensure the timely sharing of information that will be critical in early identification, isolation, and response.

Therefore, I urge you to identify a single expert who can serve as the United States point to oversee response to all emerging infectious disease threats, including the Zika virus, and to outline a plan to help establish rapid response systems and infrastructure so that the United States stands ready and prepared to tackle the next global health threat.

Sincerely,

Edward J. Markey