

EDWARD J. MARKEY
MASSACHUSETTS

COMMITTEES:

ENVIRONMENT AND PUBLIC WORKS

FOREIGN RELATIONS

RANKING MEMBER:

SUBCOMMITTEE ON EAST ASIA, THE PACIFIC,
AND INTERNATIONAL CYBERSECURITY POLICY

COMMERCE, SCIENCE, AND TRANSPORTATION

RANKING MEMBER:

SUBCOMMITTEE ON

SPACE, SCIENCE, AND COMPETITIVENESS

SMALL BUSINESS AND ENTREPRENEURSHIP

CHAIRMAN:

U.S. SENATE CLIMATE CHANGE TASK FORCE

United States Senate

January 28, 2019

SUITE SD-255
DIRKSEN BUILDING
WASHINGTON, DC 20510-2107
202-224-2742

975 JFK FEDERAL BUILDING
15 NEW SUDBURY STREET
BOSTON, MA 02203
617-565-8519

222 MILLIKEN BOULEVARD, SUITE 312
FALL RIVER, MA 02721
508-677-0523

1550 MAIN STREET, 4TH FLOOR
SPRINGFIELD, MA 01103
413-785-4610

Rick Bright, Ph.D
Deputy Assistant Secretary for Preparedness and Response
Director, Biomedical Advanced Research and Development Authority
U.S. Department of Health and Human Services
200 Independence Ave., S.W.
Washington, DC 20201

Major General Julie Bentz
Acting Senior Director, Weapons of Mass Destruction Directorate
National Security Council
The White House
1600 Pennsylvania Avenue, N.W.
Washington, DC 20500

Dear Dr. Bright and Major General Bentz:

I write regarding the frightening prospect that the synthetic opioid fentanyl will be weaponized and used in terrorist attacks against civilians, and to seek your views on the likelihood of such an eventuality and what can be done to prevent it.

The United States is in the midst of a fentanyl epidemic. According to the Centers for Disease Control and Prevention, synthetic opioids like fentanyl were involved in more than 28,000 deaths in the United States in 2017.¹ In my state of Massachusetts, where a toxicology screening was available last year, fentanyl was present in 90 percent of the roughly 1,500 opioid-related overdose deaths the state is estimated to have suffered.²

China is the primary source for the drug, which is relatively easy and inexpensive to produce, and yields high profits for those who traffic in it. According to the Drug Enforcement Administration, “[b]ecause of its low dosage range and potency, one kilogram of fentanyl purchased in China for \$3,000 - \$5,000 can generate upwards of \$1.5 million in revenue on the illicit market with the potential of being lethal for 500,000 people.”³

¹ <https://www.cdc.gov/drugoverdose/data/fentanyl.html>.

² <https://www.mass.gov/files/documents/2018/11/16/Opioid-related-Overdose-Deaths-among-MA-Residents-November-2018.pdf>.

³ *Tackling Fentanyl: The China Connection*, Hearing Before the Subcomm. on Africa, Global Health, Global Human Rights and International Organizations of the H. Comm. on Foreign Affairs, 115th Cong. 20 (2018)

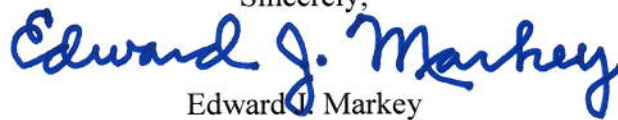
The combination of high demand, plentiful supply, and alarming potency has made fentanyl dangerously ubiquitous, and raised the prospect of it falling into the hands of those who would use it for even more nefarious purposes than selling it to those who struggle with substance use. Indeed, Dr. Bright was recently quoted as stating that “[f]entanyl-based drugs have been used in conflicts in other countries, so we know it’s possible, and we need to be ready to save lives and protect Americans from potential health security threats.”⁴

To help me better understand the threat to national security that weaponized fentanyl presents, I ask that, by February 11, 2019, you either respond to the following questions in writing or arrange a briefing for my staff at which you can answer them:

1. How much fentanyl would terrorists need to conduct a small-, medium-, or large-scale civilian attack against U.S. civilians?
2. How would terrorists acquire the fentanyl needed for such attacks?
3. How would such attacks likely be carried out? How have fentanyl-based drugs been used in conflicts in other countries? How did other countries respond to these attacks?
4. What is the likelihood of such attacks being carried out successfully in the United States?
5. Is BARDA developing, assisting in the development of, or planning to develop medical countermeasures to respond to a potential fentanyl-based attack? If not, why not?
6. What steps should U.S. authorities be taking to prevent the weaponization of fentanyl and its use in terrorist attacks?
7. Should such attacks occur, how effectively could authorities respond? For example, how effective would the antagonist naloxone (commonly referred to by its brand name, Narcan) be against a fentanyl-based attack?

Thank you in advance for your attention to this matter. If you have any questions, please contact Andrew Cohen of my staff at 202-224-2742.

Sincerely,



Edward J. Markey
United States Senator

(statement of Paul E. Knierim, Deputy Chief of Operations, Office of Global Enforcement, Drug Enforcement Administration, U.S. Dep’t of Justice), <https://docs.house.gov/meetings/FA/FA16/20180906/108650/HHRG-115-FA16-Transcript-20180906.pdf>.

⁴ Anna Edney, *This Killer Opioid Could Become a Weapon of Mass Destruction*, Bloomberg (Dec. 12, 2018), <https://www.bloomberg.com/news/features/2018-12-12/killer-opioid-fentanyl-could-be-a-weapon-of-mass-destruction>.