



Capitol Hill Steering Committee on Pandemic Preparedness & Health Security



JOHNS HOPKINS
BLOOMBERG SCHOOL
of PUBLIC HEALTH

Center for
Health Security

Transcript from November 17: Modernizing Research & Development for Pandemic Readiness

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00:00:02.580 --> 00:00:13.590

Andrea Lapp: Welcome to today's webinar modernizing research and development for pandemic preparedness for pandemic readiness our moderator Anita Cicero will now begin.

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00:00:15.299 --> 00:00:23.190

Anita Cicero: Thank you so much welcome everyone, thank you for joining us today for the Capitol Hill steering committee on pandemic preparedness and health security.

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00:00:23.640 --> 00:00:28.560

Anita Cicero: My name is Anita Cicero and i'm deputy director at the Johns Hopkins Center for health security.

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Anita Cicero: So, as many of you know by now our Capitol Hill Steering Committee is a bipartisan effort that's run with the support of 14 members of Congress and also former administration officials.

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Anita Cicero: These leaders are all committed to making the country and the world more prepared for the greatest health security threats.

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Anita Cicero: We are extremely grateful for the continued support of these thought leaders and also and elected officials, as we move into our second year as the Steering Committee.

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Anita Cicero: or Johns Hopkins Center for health security manages the Steering Committee and we're very grateful for support provided for this effort by the open flat rate project.

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00:01:09.180 --> 00:01:16.590

Anita Cicero: We have a very important session today today we're going to be talking about modernizing research and development for pandemic preparedness.

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00:01:17.220 --> 00:01:31.920

Anita Cicero: Over the last two years in the US and the rest of the world has really seen the immense value of research and development in terms of new tools technologies, drugs and vaccines to combat infectious disease threats.

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00:01:32.610 --> 00:01:37.290

Anita Cicero: During our conversation today we're going to take stock of what has worked well.

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00:01:37.530 --> 00:01:38.730

Anita Cicero: What we were we.

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00:01:38.820 --> 00:01:51.060

Anita Cicero: have struggled the most and how we can modernize the United States government's investments structures and partnerships and R amp D to transform our capabilities and prevent future pandemics.

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Anita Cicero: We all saw the US government's partnerships with several vaccine manufacturers under operation warp speed, which has now become the countermeasures acceleration group operation warp speed, as we know, led to the development of safe and effective coven 19 vaccines in record time.

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00:02:10.200 --> 00:02:16.740

Anita Cicero: But there is a question about whether we can apply any of the lessons from that effort toward future research and development.

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Anita Cicero: of not only vaccines, but also of rapid diagnostics therapeutics respirators and better masks for the general public and our healthcare workers, and this is especially I think a question mark when we face a new viral threat.

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00:02:33.240 --> 00:02:49.860

Anita Cicero: As we know, there's increasing interest also in broad spectrum and threat agnostic technologies, but how possible is that and what is the role of the experience private sector partners, as well as government agencies, like the FDA and that kind of approach.

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00:02:50.940 --> 00:02:58.020

Anita Cicero: In September, we all saw and welcome to the White House plan, the American pandemic preparedness plan.

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Anita Cicero: which offers an ambitious framework for investing 65 billion over several years across a variety of functions to improve pandemic preparedness, it calls for a mission control office to lead a focused accountable and Apollo like effort.

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00:03:15.240 --> 00:03:34.350

Anita Cicero: We know that the Senate health committee is in parallel preparing draft legislation that may touch on many pandemic preparedness issues and there's an emphasis on the roles of the authorities of the Assistant Secretary for preparedness and response barbara CDC and I ah and FDA.

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00:03:35.430 --> 00:03:44.910

Anita Cicero: So on our session today we're going to examine how these federal agencies Congress and the White House can reimagine how they work with each other and the private sector.

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00:03:45.180 --> 00:03:51.840

Anita Cicero: to foster greater agility speed, innovation and coordination in research and development for pandemic readiness.

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00:03:52.770 --> 00:04:03.990

Anita Cicero: We are very honored to have with us today, former congresswoman Susan Brooks Dr Eric Lander the director of the White House office of science and technology policy.

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00:04:04.650 --> 00:04:17.010

Anita Cicero: Miss Don O'Connell the Assistant Secretary for preparedness and response at the Department of Health and Human Services and my colleague Dr Gigi Groundball, who is the senior scholar at the Johns Hopkins Center for Health Security.

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00:04:18.330 --> 00:04:25.950

Anita Cicero: Well we're going to start first with former congresswoman Susan Brooks, who is also an honorary founding member of our Capitol Hill Steering Committee.

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Anita Cicero: Mrs Brooks represented the fifth district of Indiana from 2013 to 2012 she served on house energy and commerce Committee was also a member of the health, the communications and technology and the oversight and investigation subcommittees.

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00:04:42.240 --> 00:04:49.920

Anita Cicero: Through her membership on the energy and commerce committee congresswoman Brooks worked on mental health substance abuse biodefense.

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00:04:50.130 --> 00:05:02.370

Anita Cicero: public safety telecommunications issues and more she has also served on the House Select Committee on modernization of Congress, we are so thrilled to have you, Mrs Brooks I'll turn it over now to you Thank you so much.

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00:05:03.660 --> 00:05:04.290

Susan Brooks: Thank you so much.

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Susan Brooks: it's been an incredible honor to help lead this Capitol Hill steering committee after I left earlier this year, the steering committee launched.

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00:05:15.660 --> 00:05:27.270

Susan Brooks: One year ago, in the midst of the COVID-19 pandemic as a bipartisan educational forum to talk about the pandemic preparedness and response policy issues facing our country.

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00:05:27.930 --> 00:05:39.600

Susan Brooks: we've discussed many major challenges during the worst pandemic in our lifetime and we looked ahead to think about how we can prevent future pandemics and better prepare for biological threats.

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00:05:40.290 --> 00:05:45.780

Susan Brooks: Today I'd like to mark the start of the second year of the Steering Committee.

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Susan Brooks: And thank all of the senators and representatives who serve as the our honorary co chairs I'm excited to hear from our speakers today.

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Susan Brooks: From the White House from the Department of Health and human services and Johns Hopkins as we continue this incredibly important work before we hear from them i'd like to share just a few observations.

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Susan Brooks: United States is high, is completely and rightly considered a leader in R amp D and in technological innovation in the world.

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Susan Brooks: Yet during my tenure in Congress, it was clear that the Federal bureaucracy was often not known for being nimble.

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Susan Brooks: or for its transparency or its ability work outside the rigid guidelines and met funding mechanisms with non federal partners.

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Susan Brooks: However, what the coven pandemic did show us is that the Federal Government is quite capable of harnessing biomedical innovation.

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Susan Brooks: With the private sector to deliver effective vaccines and therapeutics faster than we ever thought possible in fact operation workspace was one of the bright spots in our investors.

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Susan Brooks: That partnership between hhs do D in the private sector work remarkably well.

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Susan Brooks: Technological innovation and robustly funded public private partnerships have the potential to improve our ability to detect and contain deadly pathogens.

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Susan Brooks: So, in order to be better prepared for future threats and potentially prevent future pandemics, we have to modernize our research and development, we have to leverage, new technologies and incentivize collaboration.

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00:07:20.400 --> 00:07:27.180

Susan Brooks: And we must incorporate this reality across the many federal agencies that are involved, so the question becomes now.

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Susan Brooks: What structural changes are needed, what funding is required, what strategies must be institutionalized, how can the government efficiently lead and coordinate these efforts.

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00:07:38.850 --> 00:07:44.970

Susan Brooks: We have asked these questions in the past by might say, because I was involved in asking so many of these questions.

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00:07:45.420 --> 00:07:54.360

Susan Brooks: So I look forward to hearing what our speakers have to say about lessons their offices have learned from this coven pandemic and how we can implement those lessons going forward.

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Susan Brooks: There are major Congressional efforts underway now to ensure that the country is even more prepared for future pandemic threats and I commend my former colleagues for working through these incredibly difficult issues.

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Susan Brooks: So I have to say, we do know as Anita has just said, the Senate health committee is working on pandemic preparedness legislation.

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Susan Brooks: And Papa reauthorization which last was reauthorized in 2019 is once again on the horizon and trust me it takes years to get that reauthorized so do not wait, it must be focused on now.

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Susan Brooks: I look forward to seeing what my former colleagues, particularly colleagues like representative and an issue in the House why work so closely with and what the Senate.

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Susan Brooks: senators propose so In addition, the administration has obviously put out it's American pandemic preparedness plan calling for 65 billion over several years for these purposes that does certainly sound like a lot of money, but in the face of a \$16 trillion impact from coven.

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00:08:55.710 --> 00:09:08.400

Susan Brooks: That actually sounds like a bargain so let's think outside the box let's double down on what has worked well look forward to hearing what's worked well and what we need to do to make sure we are even better prepared.

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00:09:09.030 --> 00:09:20.970

Susan Brooks: For the future, so I hope that today's discussion will contribute ideas and how we best do that and Anita i'm going to turn it back to you and thank you so much, thanks to our speakers for being here, I look forward to hearing your remarks.

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00:09:22.140 --> 00:09:33.150

Anita Cicero: Well, thank you for those remarks and we were just Reminiscing before webinar went live this morning about when congresswoman brooks participated in a former.

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Anita Cicero: tabletop pandemic tabletop exercise that our Center put on and in, and I think the only than sitting member of Congress to participate in our exercise so you've long been a champion for these issues really appreciate having you today.

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00:09:48.180 --> 00:09:51.390

Susan Brooks: Thank you for your leadership and nita and to Johns Hopkins Thank you.

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00:09:51.630 --> 00:10:02.700

Anita Cicero: Thank you, our next speaker is Dr Eric lander Dr lander is President Biden science advisor and the director of the White House office of science and technology policy.

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Anita Cicero: He was formerly the President and founding director of the road Institute, which is a research institute that is closely affiliated with MIT Harvard and five of boston's major hospitals focused on genomic medicine.

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00:10:16.950 --> 00:10:21.390

Anita Cicero: Dr lander was one of the principal leaders of the human genome project.

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Anita Cicero: He said geneticist molecular biologist and mathematician and he played a pioneering role in the reading understanding and biomedical application of the human genome.

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Anita Cicero: Including developing powerful methods for discovering the molecular basis of human diseases, he has received numerous national and international honors for this important work.

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00:10:43.410 --> 00:10:56.940

Anita Cicero: Dr Lander has served as a science advisor to the federal government across multiple administrations, including to the White House HHS and the Department of Defense. Thank you so much for joining us today. I'll turn it down to you.

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00:11:03.840 --> 00:11:03.990

Anita Cicero: Oh.

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00:11:04.020 --> 00:11:05.370

Anita Cicero: Sorry here's your unmute.

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00:11:07.320 --> 00:11:08.190

Eric Lander: We started again.

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00:11:08.910 --> 00:11:20.460

Eric Lander: Great. Thank you so much, thanks to Anita Cicero and to Congressman Brooks of the Capitol Hill steering committee on pandemic preparedness at Johns Hopkins University.

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Eric Lander: For focusing on and caring about this incredibly important problem, it's important to keep that focus up at all times, even when it's not in front of our eyes.

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00:11:31.140 --> 00:11:40.110

Eric Lander: So let me just briefly summarize this American pandemic preparedness plan that was released, maybe as a foundation for discussion to go forward here.

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00:11:40.770 --> 00:11:50.220

Eric Lander: You know this pandemic showed up at a remarkable time. It has been five years earlier, we would not have had a lot of the tools that we relied on.

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00:11:51.780 --> 00:11:59.850

Eric Lander: That allowed us to respond better than ever before, vaccines and training 14 days, but we have to remember that.

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00:12:00.720 --> 00:12:12.540

Eric Lander: There was still huge still ongoing huge loss of life disruption cost \$16 trillion, and it was a virus, we knew a lot about sure it could have been a lot worse.

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00:12:12.870 --> 00:12:19.830

Eric Lander: And so we have to say that five years from now, we have to be able to do a lot better.

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00:12:20.340 --> 00:12:28.350

Eric Lander: And so we tried to sketch out a plan that would describe what a lot better could mean and it's important because we have to be prepared, because we have.

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00:12:29.010 --> 00:12:38.790

Eric Lander: To address the disparities that occur during that clearly occurred during this pandemic and I think we'll probably most diabetics if we don't pay attention to them.

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Eric Lander: And one of the things we should be thinking about is the things that we do.

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00:12:43.410 --> 00:12:53.880

Eric Lander: will have benefits and should have benefits, not just for the next pandemic whenever it comes, but also for everyday health and for continuing response to this and.

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00:12:54.270 --> 00:12:57.570

Eric Lander: So it isn't they just distant over the horizon thing.

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Eric Lander: it's a continuation for coven it's things we put in place for everyday health, and it is when the next pandemic comes whether it's natural or God forbid someday a bio weapon there wherever used against this country.

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00:13:11.850 --> 00:13:19.020

Eric Lander: We need to be prepared so just very briefly to summarize what's the plan with regard to vaccines.

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Eric Lander: Producing a flu vaccines and 100 days, little more than three months.

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00:13:26.310 --> 00:13:37.770

Eric Lander: We need within the next three months hundred days after that really to be able to shoot me sure that we can have enough vaccines to be able to vaccinate a world, we need to be able to do it more efficient.

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00:13:38.400 --> 00:13:42.600

Eric Lander: Perhaps not sterile injections, but with in patches or inhalation.

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00:13:43.170 --> 00:13:58.050

Eric Lander: We need to be able to adapt vaccines to viruses, with more variance so I can go on, but you get the picture we did well, we must be much better, because there are 26 families a human viruses not infinite number.

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00:13:58.320 --> 00:14:02.880

Eric Lander: We could know that we must know that we must be prepared same for therapies.

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00:14:03.150 --> 00:14:15.690

Eric Lander: We need to be able to have small molecules that can inhibit the key proteins of these viruses we're seeing now coming on the market examples of small molecules we could be an advanced doing a bunch of that or.

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00:14:16.050 --> 00:14:28.650

Eric Lander: diagnostics well ideally in the limit, we would love to have the case that every American to do diagnostic at home that was accurate liable every day if they wanted to.

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00:14:28.980 --> 00:14:37.080

Eric Lander: And that means driving down the cost \$100 per test but it's not crazy to think about that we can think about such that.

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00:14:37.740 --> 00:14:49.440

Eric Lander: We need early warning systems where our clinical sit there are clinical system can identify or the appearance of viruses pandemic potential.

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Eric Lander: And then, when they do appear we do that, over the clinics wastewater, we need to put in place reliable systems that collect data and monitor those data.

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00:15:00.750 --> 00:15:10.050

Eric Lander: We need to have real time monitoring for the pandemic comes to be able to trace and see where it's moving to and how it's changing and growing in real time.

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00:15:10.530 --> 00:15:19.230

Eric Lander: We need to strengthen is laid out in this plan US public health system by expanded capabilities to respond to public health emergencies.

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00:15:19.830 --> 00:15:29.790

Eric Lander: We need global not security capacity as laid out of a plan, we need innovation and people be, we need to strengthen biosecurity.

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00:15:30.180 --> 00:15:39.090

Eric Lander: We need to anticipate the regulations that we're going to need at the time, this addressing regulations in the emergency or not the best way to consume.

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00:15:39.540 --> 00:15:47.250

Eric Lander: And finally, as has been indicated, we need to manage the mission, and we need a mission control, because we need all these pieces ticket to get.

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00:15:47.550 --> 00:16:02.220

Eric Lander: that's the plan we laid out i'd love to talk more about it, but I thought I just close out those pieces that it's it's all available on the White House, so people would like more detail but i'll turn it back to you, so we can hear from all the speakers that ever which is done.

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00:16:05.160 --> 00:16:07.830

Anita Cicero: Okay excellent Thank you so much for those remarks.

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00:16:09.180 --> 00:16:23.400

Anita Cicero: Next, I will turn to the expert on o'connell miss o'connell has was confirmed by the Senate and a serve for several months now, as the expert at hhs.

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00:16:24.030 --> 00:16:37.830

Anita Cicero: And the asperger's the secretary's principal advisor on public health emergencies her office leads the nation in preventing responding to and recovering from the adverse health effects of manmade and naturally occurring disasters.

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00:16:38.400 --> 00:16:53.850

Anita Cicero: The Office coordinates the Interagency activities between hhs other agencies and state and local officials who are responsible for emergency preparedness and the protection of the civilian population from public health emergencies.

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00:16:54.900 --> 00:17:02.190

Anita Cicero: Prior to this important role Assistant Secretary o'connell served as the senior counsel to Secretary viscera for coven.

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Anita Cicero: She was also the director of the US office for the coalition for epidemic preparedness and innovation, also known as sippy.

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Anita Cicero: This is a global partnership to develop vaccines and stop epidemics.

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Anita Cicero: as Director of SEPI she was responsible for managing the broad spectrum of selfies us and North American interests, including its relationships with stakeholders government entities and industry partners.

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00:17:30.060 --> 00:17:47.340

Anita Cicero: Assistant Secretary o'connell has also served as senior counselor to Secretary Sylvia burwell and deputy chief of staff to Secretary sebelius at hhs during the Obama Administration so Assistant Secretary o'connell I will now turn the microphone to you, thank you for joining us.

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00:17:48.000 --> 00:17:55.170

Dawn O'Connell: I need to thank you so much, I so grateful to be here, thank you representative brooks the steering committee members and the terrific Johns Hopkins team.

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00:17:55.590 --> 00:18:03.300

Dawn O'Connell: it's a real pleasure to have this conversation and Anita I thank you for giving a little background on Asperger I know that not everybody is familiar with what we do.

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00:18:04.350 --> 00:18:04.860

Dawn O'Connell: But we.

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00:18:05.940 --> 00:18:17.010

Dawn O'Connell: Carry of you know, a significant amount of the burden in the pandemic response we're currently undergoing so it'll be you know my pleasure to talk a little bit about some of those responsibilities and some of our lessons learned.

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Dawn O'Connell: As for for those that really aren't familiar was born out of the aftermath of two of the greatest tragedies in the last 20 years September 11 and hurricane Katrina.

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00:18:27.330 --> 00:18:34.440

Dawn O'Connell: And after experiencing those very different but devastating tragedies Congress representative brooks and her colleagues recognized.

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00:18:34.770 --> 00:18:44.670

Dawn O'Connell: The need for a coordinated approach to public health emergency preparedness and response and pass the bill the Papa bill that was referenced earlier establishing asked for in 2006.

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Dawn O'Connell: as per our fundamental mission is to help strengthen the health security of the nation and we've learned a lot in this pandemic.

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Dawn O'Connell: That we want to be sure to apply it moving forward, as we look at modernizing research and development.

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Dawn O'Connell: And for those of you that are new to ask for the biomedical advanced research and development authority or barda which was referenced earlier as well, is a sub agency with an esper.

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00:19:08.850 --> 00:19:24.510

Dawn O'Connell: bard is the only federal entity dedicated to the advanced stages of development to get emergency medical countermeasures over the regulatory finish line and make them available under a are full FDA approval, while NIH DARPA and did.

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00:19:25.800 --> 00:19:36.180

Dawn O'Connell: Some of our terrific partners cover the early stages of R amp D barda picks up for phase two and phase three clinical trials manufacturing process work and regulatory support needed.

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00:19:36.720 --> 00:19:45.450

Dawn O'Connell: By our private sector partners to request the FDA approval that I talked about, and during the pandemic barta and its work with God it was a critical partner.

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Dawn O'Connell: to God and what was formerly known as Operation warp speed and through that partnership contributed significantly to the effort.

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00:19:53.790 --> 00:19:58.530

Dawn O'Connell: That resulted in the to authorized in one improved covert vaccines in less than a year.

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00:19:59.010 --> 00:20:06.480

Dawn O'Connell: bartos also contributed other significant tools to our response they've developed 15 therapeutics and 55 diagnostics.

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00:20:06.780 --> 00:20:11.520

Dawn O'Connell: And in order to do this work barter works closely with private industry partners to support and guide.

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00:20:11.940 --> 00:20:20.280

Dawn O'Connell: Our development efforts and coven alone barta worked with over 100 private companies on diagnostics treatments vaccines and other technologies.

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00:20:20.700 --> 00:20:35.910

Dawn O'Connell: And this is approaches, one that we think we need to maintain this sort of pace and engagement with the private industry moving forward, and as we look at what worked and what didn't want to capture and retain those places where barta innovated along the way.

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00:20:37.020 --> 00:20:45.210

Dawn O'Connell: barta conducted development and manufacturing phases in parallel that approach, while coming with some financial risks save time and worked well.

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00:20:45.540 --> 00:20:52.980

Dawn O'Connell: And should be a standard operating procedure for future public health emergencies barta also learned some lessons with manufacturing.

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Dawn O'Connell: We learned that we needed more than reserve capacity, we also needed reserve capability to manufacture safe and effective vaccines that meet FDA quality standards.

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Dawn O'Connell: And this is something we were applying moving forward, as evidenced by the rfp that bar to put out today, so you can partnerships with experience manufacturers of em RNA vaccines to expand capacity.

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00:21:14.940 --> 00:21:20.490

Dawn O'Connell: And this relationship that we have with God that was operation warp speed is now the countermeasures acceleration group.

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Dawn O'Connell: It comes in the form of an mo you that's going to expire at the end of this year and to ensure that we don't lose the capability we've gained during this pandemic response in our partnership with God.

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00:21:33.120 --> 00:21:45.480

Dawn O'Connell: That work is now going to transition into an esper and live and, as far as a as something called the H4 and we're very grateful that several of our God colleagues are going to transition with us.

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00:21:45.960 --> 00:21:53.070

Dawn O'Connell: So we're pleased to have this capacity and capability living and ask for moving forward the beginning of the year.

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Dawn O'Connell: Another lesson we've learned in this pandemic, because that it's not enough to focus on the innovation and rapid development practices.

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00:22:00.420 --> 00:22:13.620

Dawn O'Connell: We also have to be sure we have the components necessary to manufacturing administer medical countermeasures moving forward to that and aspirin has been charged with in this administration, securing the public health supply chain.

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Dawn O'Connell: The supply chain, as you all know, is complex, comprises different private sector players and market dynamics across multiple domains of medical equipment and supplies.

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Dawn O'Connell: So ask for strengthening the industrial base to secure and develop domestic capacity retool and expand industry machinery scale production facilities.

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00:22:33.360 --> 00:22:41.130

Dawn O'Connell: Train workforces and ultimately infuse a supply chain and marketplace with products, the US needs to contain further pandemic waves.

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00:22:41.820 --> 00:22:46.920

Dawn O'Connell: These investments in the industrial base overall require dedicated persistent management and engagement.

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00:22:47.310 --> 00:22:58.050

Dawn O'Connell: And i'm working to integrate and organized supply chain situational awareness industrial analysis domestic industrial base expansion supply chain logistics all into a new office within esper.

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00:22:58.560 --> 00:23:08.220

Dawn O'Connell: That will be stood up to beginning of the year, so a lot going on a lot of lessons learned trying to process trying to capture trying to make sure we can apply these moving forward.

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00:23:09.360 --> 00:23:15.270

Dawn O'Connell: And we're looking forward to working with eric's team putting these resources in place, continuing to capture this innovation.

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00:23:15.930 --> 00:23:27.090

Dawn O'Connell: Working together on novel countermeasure portfolios to prepare for whatever comes next, and unfortunately we know something will come next so Anita Thank you so much for having me i'm looking forward to the discussion.

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00:23:28.080 --> 00:23:33.990

Anita Cicero: Okay, thank you, a lot of ground to cover there, and thank you for your for your service on all those issues.

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00:23:34.830 --> 00:23:39.480

Anita Cicero: Are the final panelist before the discussion starts as Dr GG groundball.

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00:23:39.930 --> 00:23:50.490

Anita Cicero: gigi is a senior scholar at our Johns Hopkins Center for health security she's also an associate professor in the department of environmental, health and engineering at the Johns Hopkins Bloomberg school of public health.

145

00:23:51.150 --> 00:24:01.530

Anita Cicero: she's an immunologist by training she leads the center's ongoing efforts to track the development and marketing of molecular and antigen test and serology tests for coven 19.

146

00:24:02.160 --> 00:24:05.580

Anita Cicero: she's developed recommended national strategies for the use of.

147

00:24:06.210 --> 00:24:18.000

Anita Cicero: antibody test and the Sarah surveys in the US she's also published commentaries on the scientific response to coven 19 and implications for national and international security.

148

00:24:18.990 --> 00:24:32.490

Anita Cicero: GG has worked at the intersection of science, technology national security and pandemic preparedness policy for the last 20 years she's authored books on bioterrorism, as well as synthetic biology and national security.

149

00:24:33.360 --> 00:24:45.330

Anita Cicero: she's The co Chair of the National Academy of Sciences committee on reviewing the public health emergency medical countermeasures enterprise which released its consensus study findings on November 3 so we'll hear about that.

150

00:24:45.900 --> 00:25:00.420

Anita Cicero: she's also a member of the novel and exceptional technology and Research Advisory Committee, which provides recommendations to the director of NIH and she is a life member of the Council on Foreign Relations GG so great to have you today thanks.

151

00:25:00.990 --> 00:25:09.360

Gigi Gronvall: Thank you so much, and Thank you everyone it's really a privilege to get the opportunity to talk to you about our national academies report.

152

00:25:10.110 --> 00:25:16.410

Gigi Gronvall: The title of which is ensuring and effective public health emergency medical countermeasure enterprise or fmc.

153

00:25:16.980 --> 00:25:28.140

Gigi Gronvall: And the fmc, as you know, is the sole federal coordinating body responsible for ensuring end to end medical countermeasure mcs preparedness and response.

154

00:25:28.620 --> 00:25:34.170

Gigi Gronvall: So the, the report was sponsored by the office of the Asperger so thank you miss o'connell.

155

00:25:34.740 --> 00:25:44.730

Gigi Gronvall: I co chair this committee, along with Dr Ellen Ieshner who is emeritus CEO of the American Association for the advancement of science or triple as.

156

00:25:45.210 --> 00:25:52.260

Gigi Gronvall: This was a fast track report we started meeting in August and our report was made public on November 3.

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00:25:52.800 --> 00:26:00.510

Gigi Gronvall: Our committee consisted of world renowned experts in medical countermeasure development, as well as the decision and organizational sciences.

158

00:26:00.810 --> 00:26:04.920

Gigi Gronvall: And they all cleared their very busy schedules for this intense and important effort.

159

00:26:05.340 --> 00:26:16.770

Gigi Gronvall: We were also helped by an amazing national academies staff, a very rigorous review process and the testimony of expert witnesses for our three public meetings that we had along the way.

160

00:26:17.550 --> 00:26:32.400

Gigi Gronvall: So the mission of the MC is written into law that it works quote to advance national preparedness for natural accidental and intentional threats by coordinating medical countermeasure related efforts within hhs.

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00:26:32.700 --> 00:26:45.960

Gigi Gronvall: And, in cooperation with MC Interagency partners so those Interagency partners are mostly Department of Defense DHS and hhs component agencies FDA and CDC.

162

00:26:46.620 --> 00:26:52.920

Gigi Gronvall: And the fmc also has the mission to conduct annual reviews of the strategic national stockpile.

163

00:26:53.790 --> 00:27:05.190

Gigi Gronvall: Our committee of course wouldn't have had anything to discuss if there was no if there weren't a problems with fmc before so that's why we're called we were called into action.

164

00:27:06.120 --> 00:27:24.570

Gigi Gronvall: The fmc has been reorganized several times over its history, but was reorganized almost out of existence, a few years ago and we heard expert testimony about long standing problems that the fmc had and communication and interest with it stakeholders.

165

00:27:25.770 --> 00:27:37.110

Gigi Gronvall: Also, regardless our nation's experience with coven so far should influence the how we think about how MC is constituted and its operations.

166

00:27:37.560 --> 00:27:47.160

Gigi Gronvall: And so, our committee was able to reflect upon that experience, so our first and most important recommendation for the report was that the fmc mandate should be restated.

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00:27:47.700 --> 00:27:54.480

Gigi Gronvall: The Secretary of hhs they asked for the White House and all of you listening should reflect.

168

00:27:55.140 --> 00:28:04.290

Gigi Gronvall: should reaffirm the fmc mandate as the nation's major coordinating body for all aspects of medical countermeasure preparedness and response programs.

169

00:28:04.920 --> 00:28:11.880

Gigi Gronvall: Our report covers a lot of detail about how to set up MC as a coordinating body based on ethical principles.

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00:28:12.210 --> 00:28:20.970

Gigi Gronvall: to minimize political interference avoid conflicts of interest and to engage and communicate with stakeholders, the MC is a federal coordinating body.

171

00:28:21.210 --> 00:28:32.700

Gigi Gronvall: But to accomplish its mission, it needs to work with the private sector, of course, to create medical countermeasures, as well as local public health and medical systems which are planning for and implementing health.

172

00:28:33.210 --> 00:28:40.110

Gigi Gronvall: Emergency responses we also have recommendations for setting up data and record keeping systems in the in the report.

173

00:28:41.310 --> 00:28:45.780

Gigi Gronvall: Another important recommendation is the creation of an advisory committee to the fmc.

174

00:28:46.260 --> 00:28:53.970

Gigi Gronvall: The committee can help with communication to Congress to stakeholders and the public, it can also help with prioritization.

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00:28:54.360 --> 00:28:59.760

Gigi Gronvall: there's a vast array of potential health security threats that the nation may face and.

176

00:29:00.240 --> 00:29:11.250

Gigi Gronvall: An expert input will be necessary to be able to focus on what's most important and what's most technologically possible and advisory committee can also help the fmc test the system.

177

00:29:11.850 --> 00:29:27.060

Gigi Gronvall: Through exercises, as well as France, so we recommend that the process, as well as the strategic national stockpile annual reporting be examined to determine if it's done in the best way to make sure that the cupboard isn't bare when it's needed.

178

00:29:28.350 --> 00:29:38.670

Gigi Gronvall: Finally, I want to say something about the fancy and national security, what the nation decides to prepare for and by is of course extremely important to national security.

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00:29:39.060 --> 00:29:46.980

Gigi Gronvall: And it may seem to son that those activities should be closely held but public health can't prepare for threats, they don't know about.

180

00:29:47.490 --> 00:30:04.080

Gigi Gronvall: And they they can't use P P or plan to use P P or ventilators or countermeasures that they don't know exist, so to the extent possible public health planning and MC operations, need to be done transparently and we believe that advisory committee can help with that.

181

00:30:05.190 --> 00:30:10.050

Gigi Gronvall: Thank you for the opportunity to briefly describe the report and i'm happy to answer your questions.

182

00:30:11.100 --> 00:30:23.100

Anita Cicero: Okay Thank you so much to all of our panelists and now we're going to be turning to our Q amp a portion of today's webinar I see the questions coming in, already.

183

00:30:23.760 --> 00:30:35.790

Anita Cicero: But I will kick us off with some questions in the meantime for additional questions, please put them in the Q amp a box, rather than the chat feature and we'll try to get to as many of your questions as as we can.

184

00:30:36.900 --> 00:30:37.740

Anita Cicero: Dr lander.

185

00:30:38.940 --> 00:30:45.360

Anita Cicero: A question that has come up is to ask that you would please elaborate on.

186

00:30:46.410 --> 00:30:57.180

Anita Cicero: What you think the mission control functions going to look like over you know why is mission control necessary and how would you envision that playing out over the course of the plan.

187

00:31:04.680 --> 00:31:05.430

Eric Lander: it's a great question.

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00:31:08.550 --> 00:31:21.630

Eric Lander: There are so many pieces that have to fit together seamless if you're going to pull things off like respond to a pandemic, or a bio threat in 100 days.

189

00:31:22.770 --> 00:31:38.040

Eric Lander: it'd be great to have all the parts lying around, but unless you figured out that they all fit together and that you can execute them in some amazing choreography it's not going to do this, much good so maybe you know.

190

00:31:38.490 --> 00:31:43.500

Eric Lander: Pretty unique amongst missions that we made prepare for we're going to have very little time.

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00:31:43.920 --> 00:31:52.140

Eric Lander: When the alarm goes off, and so we have to work really closely together, also means we have to honestly evaluate our capabilities.

192

00:31:52.500 --> 00:32:02.850

Eric Lander: Oh, how do we really have effective vaccines do we really have effective diagnostics means we're gonna have to run hot drills where we try to do things quickly.

193

00:32:03.210 --> 00:32:15.630

Eric Lander: So it's going to work government to work together, obviously hhs has a central role in this, and thank God, they have all of these amazing agencies in hhs or gonna have to coordinate with department Defense as well.

194

00:32:16.290 --> 00:32:20.490

Eric Lander: Because it may be a bias weapon threat, for example, we're dealing with.

195

00:32:20.970 --> 00:32:30.030

Eric Lander: usda has roles va has roles and so we've got to make sure that, from a scientific point of view we're all coordinated with each other.

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00:32:30.210 --> 00:32:47.400

Eric Lander: From from kind of an evaluation point of view we're all coordinated, and so I think lead agencies in the White House have to work together in some structure that we call mission control, you know in homage to how you get to the move, where there are a lot of pieces and.

197

00:32:48.150 --> 00:32:51.150

Eric Lander: The White House should be involved, the White House can't just you know.

198

00:32:51.570 --> 00:33:00.150

Eric Lander: You know, sit here and direct it's got to be that this is really a tight working group amongst agencies, but one that's driven by.

199

00:33:00.420 --> 00:33:11.280

Eric Lander: Transparency and the kind of honest regular scientific evaluation that tells us how we're doing there are great discussions right now with hhs about how to.

200

00:33:11.580 --> 00:33:18.960

Eric Lander: Best do that and i'm enthusiastic that everybody is treating this with tremendous serious.

201

00:33:19.710 --> 00:33:31.260

Eric Lander: Not something where we just start a pandemic preparedness activity and then go back to business as usual and kind of forget about it, but rather something where we ought to be checking in safe quarterly.

202

00:33:31.650 --> 00:33:41.010

Eric Lander: And, at least, you know with each other, reporting at least annually to the American people, how are we doing so, we don't allow ourselves to be done in place.

203

00:33:42.780 --> 00:33:51.450

Anita Cicero: Thank you very much for that response and i'm just wanting to acknowledge that congresswoman brooks I know you are leading another engagement soon and we'll need to hop off so.

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00:33:51.810 --> 00:33:59.490

Anita Cicero: wanted to first of all thank you for being here, but also if you had any question you wanted to flow with the group, the floor is yours.

205

00:34:01.320 --> 00:34:12.990

Susan Brooks: Thank you, Anita and I think a couple of the terrific speakers and again, thank you for spending the time with this audience today, and thanks to all the audience for coming on and listening.

206

00:34:13.650 --> 00:34:21.630

Susan Brooks: My question has to do with the strategic national stockpile and i'd be interested in hearing from the esper.

207

00:34:23.550 --> 00:34:26.370

Susan Brooks: system in Secretary of Donald what what.

208

00:34:27.450 --> 00:34:37.710

Susan Brooks: What is the plan for instance in the next 30 days as to what you're working on relative to the strategic national stockpile because I think we have always focused on vaccines.

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00:34:37.980 --> 00:34:52.050

Susan Brooks: But certainly the issues around P P was not something that anyone had truly been very focused on and so can you just tell us what you know what what is happening with the strategic national stockpile right now.

210

00:34:52.920 --> 00:34:58.290

Dawn O'Connell: Thank you representative brooks great question, of course, this is a significant focus of my time as you can imagine.

211

00:34:58.560 --> 00:35:07.050

Dawn O'Connell: You know, we saw last spring spring 2020 what it was like when the whole world needed the exact same things at the exact same time and they were all made overseas.

212

00:35:07.320 --> 00:35:17.070

Dawn O'Connell: So one of the things i've been focusing on is restocking the stockpile to make sure it's got the level of equipment that we need, but also broadening the stockpile and that's one of the reasons why the conversation.

213

00:35:17.400 --> 00:35:29.040

Dawn O'Connell: And the tasking we had two g's group at the National Academy, what should be in here what process needs to go in, how do we build pee pee into what has otherwise been a very targeted countermeasure.

214

00:35:29.910 --> 00:35:40.290

Dawn O'Connell: stockpile you know how do States know what's in it, how do States know how to access what's in it, how do we make sure everything that's in it is not expired, you know all those things that were so surprising to us.

215

00:35:40.680 --> 00:35:52.200

Dawn O'Connell: Last March 2020 we're trying to recover from and move forward and one of the things we have been able to do, which i'm so proud of is we've got 56 times the number of and 95 masks we had at the start of the pandemic.

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00:35:52.500 --> 00:35:59.100

Dawn O'Connell: All domestically manufactured, so we really are investing in domestic manufacturing to make sure that we aren't.

217

00:36:00.450 --> 00:36:06.150

Dawn O'Connell: You know needing to rely on these big cartons that are sitting on you know, on harbor shores that can't.

218

00:36:06.480 --> 00:36:12.840

Dawn O'Connell: get into the supply chain and get things moving that we actually have things you know onshore that we can rely on and so we're.

219

00:36:13.170 --> 00:36:22.470

Dawn O'Connell: Congress gave us with the American rescue plan a significant amount of money to invest in industrial base expansion work and domestic manufacturing we're doing that we're also restocking.

220

00:36:22.770 --> 00:36:27.780

Dawn O'Connell: The stockpile in addition to the 56 times number of and 95 masks we have 190.

221

00:36:28.680 --> 00:36:35.220

Dawn O'Connell: times the number of gloves I mean the list goes on and on, they really are but that's not enough, it was those things that we weren't expecting.

222

00:36:35.820 --> 00:36:42.570

Dawn O'Connell: That we couldn't find and so it's working with with report that GG was talking about and thinking with Eric.

223

00:36:43.260 --> 00:36:51.720

Dawn O'Connell: What our future pandemic needs are to make sure that we're accounting for those two and the stockpile so all of that work under underway, but most importantly I want States, local.

224

00:36:52.140 --> 00:37:00.450

Dawn O'Connell: Communities we've had to head tribal Councils to make sure they know how to access what's in there, just so there are no more surprises is one of our first priorities.

225

00:37:03.300 --> 00:37:04.110

Anita Cicero: Right, thank you, my.

226

00:37:04.140 --> 00:37:13.470

Gigi Gronvall: God, if I could just add to that the, this is not our report but there's another national academies effort, I believe, also funded by the US for.

227

00:37:14.250 --> 00:37:30.090

Gigi Gronvall: To look at supply chain issues as far as the SNS goes and that wasn't a three month report that's an 18 month or that's due to be publicly released in the next couple of months, so it was a really in depth look at the supply chain and how that affects SMS.

228

00:37:31.200 --> 00:37:32.040

Anita Cicero: And thank you gigi.

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00:37:33.390 --> 00:37:39.600

Anita Cicero: And now i'll turn to my colleague, Margaret Miller who's been triage any questions in the in the Q amp a.

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00:37:40.560 --> 00:37:53.370

Margaret Miller, JHU: Thanks so much this questions for Dr director lander the White House plan for pandemic for greatness is a home run but it looks like the reconciliation visible only fund a very small piece of it, what is the plan to work through and be to get through that the rest of the plan funded.

231

00:37:54.330 --> 00:38:07.020

Eric Lander: thoroughly the plan that we laid out is about \$65 billion over seven to 10 years was never intended to be able to fit in the reconciliation bill whatever amount.

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00:38:07.470 --> 00:38:15.000

Eric Lander: ends up in there, we will need to have funding on a continuous basis it really ought to be annual.

233

00:38:15.300 --> 00:38:26.640

Eric Lander: It ought to be a steady amount over the course of seven to 10 years or a couple of ways to do that and we're working with omb and the Hilton think about what's the best way to do it.

234

00:38:27.030 --> 00:38:41.820

Eric Lander: The most important thing I can say is a sustained commitment on an annual basis to do these things laid out on the plan and to be accountable for doing them, so if we think in terms of comparison.

235

00:38:42.480 --> 00:38:45.690

Eric Lander: Maybe that's seven \$7 billion a year.

236

00:38:46.230 --> 00:38:56.820

Eric Lander: We spent \$20 billion a year on Missile Defense 170 billion dollars a year on counter terrorist Missile Defense is a very important thing to terrorism it's.

237

00:38:57.090 --> 00:39:09.360

Eric Lander: Very important thing, but so is pandemic preparedness and bio weapons Defense very important and, in fact, they have in the last 20 years killed far more people a pandemic.

238

00:39:09.630 --> 00:39:15.000

Eric Lander: than those other things we have defenses against them, I don't need to trade off against each other.

239

00:39:15.240 --> 00:39:27.030

Eric Lander: But you know the calculation that was done before \$16 trillion impact of this pandemic, even if they are currently once every 20 years that's \$800 billion annually.

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00:39:27.840 --> 00:39:37.980

Eric Lander: I think we can, should and must find the funding to immediately transform our capabilities and I didn't make you vomit he'll agree with that and I think.

241

00:39:41.190 --> 00:39:51.720

Anita Cicero: Okay, thank you and i'll i'll jump in again, this question is is for assistant director o'connell the esper has a growing number of responsibilities.

242

00:39:52.260 --> 00:40:15.510

Anita Cicero: That you outlined in your opening remarks so taking in you know operation warp speed and range of other things, how what is asked for doing now to prepare for assuming all of these new responsibilities and roles that you know used to be shared across a number of federal agencies.

243

00:40:16.050 --> 00:40:22.830

Dawn O'Connell: course thank you for that question, and I want to be clear, even as the coordinating entity, we will continue to have.

244

00:40:23.490 --> 00:40:28.740

Dawn O'Connell: Participation significant participation from our Interagency colleagues, we couldn't do it without them.

245

00:40:29.250 --> 00:40:38.730

Dawn O'Connell: We just happened to be the place where the work will be coordinated, where it will be run, where it will be driven and project manager, you know, the current when general purnell left the keg.

246

00:40:40.080 --> 00:40:49.500

Dawn O'Connell: Robert Johnson took over as the CEO he's a barta he's a bar to employee, so we have you know, been a primary partner with God and all of this.

247

00:40:50.340 --> 00:40:53.400

Dawn O'Connell: And we've learned a lot from God, you know we're never going to be God.

248

00:40:53.640 --> 00:41:03.480

Dawn O'Connell: And no one wants us to be God, but we've learned a lot, and one of the things I like to do is take these opportunities to make sure that we're internalizing some of these things and boy does God know how to transition.

249

00:41:03.840 --> 00:41:10.650

Dawn O'Connell: As soon as I got in the door, they had a six month transition plan you know they have so many other missions that they're focused on.

250

00:41:10.920 --> 00:41:21.510

Dawn O'Connell: They were pleased to be with us, but also wanted to know what their exit strategy was going to be, and they mapped it out for six months we sat left seat right seat we identified who from hhs who from God.

251

00:41:21.840 --> 00:41:26.160

Dawn O'Connell: are going to take these responsibilities moving forward they're going to drive for the first two months.

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00:41:26.640 --> 00:41:33.780

Dawn O'Connell: Will will drive and they'll sit as the passenger for the next I mean they knew exactly how to do this, of course, we're still very much in that transition process.

253

00:41:34.200 --> 00:41:40.560

Dawn O'Connell: But it's been important for us not to do this overnight, but to build together and they have.

254

00:41:41.310 --> 00:41:47.250

Dawn O'Connell: promised that they're not going to leave until they are sure we're ready to take control, so this has been a wonderful.

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00:41:47.520 --> 00:41:54.630

Dawn O'Connell: Investment of time and energy on their part to make sure that we get it right, so to say, we don't take this responsibility lightly we've been focused on it.

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00:41:55.050 --> 00:41:59.640

Dawn O'Connell: For the better part of four months now, and we'll have a full six month transition, by the time we get.

257

00:42:00.510 --> 00:42:12.600

Dawn O'Connell: To January so so appreciate the question what you know we're sobered by the amount of responsibility we're taking on and we're just putting one foot in front of the other to drop no balls to keep moving and to continue to learn and respond as we can.

258

00:42:13.890 --> 00:42:16.110

Anita Cicero: Thank you for that response go ahead, Margaret.

259

00:42:16.500 --> 00:42:20.220

Margaret Miller, JHU: Great thanks i'm Dr lander or this isn't a secretary.

260

00:42:20.940 --> 00:42:31.710

Margaret Miller, JHU: Secretary sorry, please expand on today's White House announcement about expanding vaccine manufacturing capacities well that'd be driven through ask for slash barda or will other agencies, like the development finance Corporation.

261

00:42:32.190 --> 00:42:36.240

Margaret Miller, JHU: be engaged in driving these investments from a global capacity, strengthening perspective.

262

00:42:38.610 --> 00:42:39.600

Dawn O'Connell: Would you like me to take that.

263

00:42:41.010 --> 00:42:43.170
Eric Lander: came okay so once.

264
00:42:43.890 --> 00:42:45.330
Dawn O'Connell: Absolutely, and please jump in.

265
00:42:46.440 --> 00:42:57.900
Dawn O'Connell: Eric so terrific so one of the things that we learned along the way, and we've talked about this a little bit I mentioned it in my opening comments is manufacturing capacity is one of the things that we that we didn't exactly have.

266
00:42:59.520 --> 00:43:06.090
Dawn O'Connell: in abundance of heading into this pandemic and not only that we didn't have the capability, we didn't have the trained workforce that could go in.

267
00:43:06.420 --> 00:43:13.530
Dawn O'Connell: and actually manufacture, you know run the machines that are needed, you know, we had a significant amount of capacity we didn't have that capability.

268
00:43:14.250 --> 00:43:20.340
Dawn O'Connell: So we through this effort, have learned how important it is to be able to work with the private industry to use their.

269
00:43:21.000 --> 00:43:26.700
Dawn O'Connell: Infrastructure and work for us to work together in this public private partnership that we've seen as Operation warp speed.

270
00:43:27.120 --> 00:43:32.760
Dawn O'Connell: But I think one of the things that's become apparent is the capacity to manufacturing, Mr na vaccines.

271
00:43:33.540 --> 00:43:44.490
Dawn O'Connell: The need is increasing, especially for our global partners so barta put out this request for information today to do some market research to understand which of the manufacturers.

272
00:43:44.880 --> 00:43:52.320
Dawn O'Connell: who have manufactured of successful Mr in a vaccine would be willing to share with us, let us rent some of this capacity.

273

00:43:52.950 --> 00:44:02.730

Dawn O'Connell: To be able to generate these Mr na vaccines that other countries and other partners could buy at cost, so we have 30 days out there to get this information, back in.

274

00:44:03.330 --> 00:44:11.790

Dawn O'Connell: to review the proposals that come in and then to see what our next step is but really you know Eric you should jump in here too I know you've been thinking a lot about manufacturing.

275

00:44:12.330 --> 00:44:17.610

Dawn O'Connell: But that is one of the lessons learned that we've got to get right moving forward, and this is one of the steps in that direction.

276

00:44:19.500 --> 00:44:29.850

Eric Lander: Great explanation of the announcement today, maybe i'll just foreshadow that, in addition to bringing online additional capacity, which is incredibly important.

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00:44:31.020 --> 00:44:38.460

Eric Lander: We also should be thinking and will be thinking about how we can improve manufacture, how we can innovate manufacturer.

278

00:44:39.690 --> 00:44:50.880

Eric Lander: Because while it's amazing that we think about Britney online and other billion doses year we ought to be asking what can we do to increase the efficiency manufacturing by a factor of five or 10.

279

00:44:51.510 --> 00:45:03.270

Eric Lander: or change it, so we can scale up, and I think we ought to match production with innovation and there's discussions about how we can bring online innovations will company that.

280

00:45:04.170 --> 00:45:15.330

Eric Lander: teaches colleagues about it because I think the lesson from this pandemic is to never be satisfied with where we are thinking about science and technology is.

281

00:45:15.570 --> 00:45:29.160

Eric Lander: We can we can imagine and see how we could do even better and I don't think we're going to be sorry about investing heavily in further improvements better, how will did further improvements in the air.

282

00:45:31.470 --> 00:45:33.630

Margaret Miller, JHU: hey Thank you Dr lander I have another question.

283

00:45:34.440 --> 00:45:36.870

Margaret Miller, JHU: Why is the usga only describing 100 days target for.

284

00:45:36.870 --> 00:45:42.810

Margaret Miller, JHU: vaccine development and, at the target also be applied for rapid development of diagnostics therapeutics and other countermeasures.

285

00:45:43.140 --> 00:45:52.920

Eric Lander: was a question what a great question, so these vaccines is chosen deliberately do you think that is a stretch, where we are today but fees.

286

00:45:53.430 --> 00:46:01.860

Eric Lander: If we take the other components like diagnostics, yes, we it's too long way to, we need to have diagnostics out there much facts.

287

00:46:02.310 --> 00:46:20.100

Eric Lander: And there's every reason we put so I think the diagnostic targets have to be you know well, under a month, we need to have these people will assume the diagnostic is going to be some form of nucleic acid test PCR tests or something like that.

288

00:46:21.480 --> 00:46:30.330

Eric Lander: No one can design those rapidly and drop them into platforms, we have diagnostic platforms being used in routine everyday public health.

289

00:46:30.570 --> 00:46:39.090

Eric Lander: And what we needed to do is drop in some Lucy points to detect a new virus which takes way too long, we ought to be able to do that rapid.

290

00:46:39.840 --> 00:46:50.700

Eric Lander: On the other hand, third cubes are the opposite of designing small molecules refining them and testing is still slower than making a vaccine.

291

00:46:51.150 --> 00:47:00.900

Eric Lander: Because at the moment it's not just programming genetics inputs it's adding little methyl groups and other things, the molecules so there really are two answers to that.

292

00:47:01.200 --> 00:47:14.100

Eric Lander: Number One can we make therapeutics that really work program where we be using RNA, for example, to inhibit the gene of a virus act as a therapeutic.

293

00:47:14.520 --> 00:47:29.190

Eric Lander: All that might be very rapid when we got to develop the science for another possibility would be to have on the shelf therapeutics work pretty well for most viral families, in which case might be zero days.

294

00:47:30.000 --> 00:47:33.690

Eric Lander: Because we didn't build those things in advance, we can improve them.

295

00:47:33.930 --> 00:47:43.920

Eric Lander: So we pick the hundred days on vaccines, this is a clear target of what we do, but I love this question because it says, for each and every important this.

296

00:47:44.130 --> 00:47:49.500

Eric Lander: We ought to stretch ourselves and how we structured cells is really depend on the science.

297

00:47:49.800 --> 00:48:08.280

Eric Lander: what's possible or what's imaginable, and I really want to thank the question the escrow for that question because it underscores the spirit of what we all hhs and others are trying to do, which is, which is push ourselves to the limit of what we realize that there is.

298

00:48:09.690 --> 00:48:15.120

Anita Cicero: Thank you and i'll just jump in here and ask a question directed at you gigi.

299

00:48:16.350 --> 00:48:24.660

Anita Cicero: And their staffers on the phone who are thinking about Papa reauthorization and it will take some time and your work for the national academies did you.

300

00:48:24.990 --> 00:48:34.620

Anita Cicero: uncover anything, or just for your own observation see anything that needs to change in terms of MC and its authorities and how it works.

301

00:48:35.010 --> 00:48:44.880

Gigi Gronvall: yeah We thought that that you know, the idea of having a coordinating body, I mean it's always going to be needed to have coordination, especially because the.

302

00:48:45.420 --> 00:48:57.600

Gigi Gronvall: The type of threats that the US Government needs to prepare for our it's so vast I mean it's not just biological threats, but fancy also covers radiological threats and nuclear threats and so there's a lot of.

303

00:48:58.500 --> 00:49:06.540

Gigi Gronvall: Other things that need to be kept track of and a lot of differing different kinds of expertise sets that's required so.

304

00:49:07.200 --> 00:49:12.840

Gigi Gronvall: We we are our suggestions are really about how to modernize the MC how to.

305

00:49:13.260 --> 00:49:24.420

Gigi Gronvall: Make sure it's keeping track of the data that it needs has the records that it requires and in you know and that it's built with all these principles, so that it is engaging with its non federal partners because.

306

00:49:24.660 --> 00:49:29.340

Gigi Gronvall: At the end of the day, it's the people who are implementing the public health emergency.

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00:49:29.670 --> 00:49:39.900

Gigi Gronvall: responses that are going to require a lot of communication with fmc and federal partners to be able to work effectively so so are a lot of management went into a lot of management.

308

00:49:40.380 --> 00:49:51.420

Gigi Gronvall: Advice went into this fancy report and we, we hope that that is helpful and reconstituting the fmc so it's useful for further the next tell security crisis.

309

00:49:54.870 --> 00:50:07.110

Margaret Miller, JHU: Great Thank you Assistant Secretary, what is the decision making and how far to take medical countermeasures through research and development and potentially into the regulatory process how has the risk of different buyer threats, determined and communicated.

310

00:50:09.150 --> 00:50:18.000

Dawn O'Connell: Well, I have to say that was a perfect segue GG wasn't it it's the fmc that makes those decisions that's who we rely on across the Interagency to come to the table.

311

00:50:18.600 --> 00:50:26.010

Dawn O'Connell: to review the threats, you know DHS is there, with the threat assessment God is there with their portfolios we're there and I ah FDA.

312

00:50:26.370 --> 00:50:34.860

Dawn O'Connell: usda I think Eric went through all the list of people that have equities here, they were around this table and they, together we, together, get to sit.

313

00:50:35.280 --> 00:50:42.930

Dawn O'Connell: Review evaluate here the different perspectives and make sure that we have a balanced approach to which countermeasures do move forward.

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00:50:43.380 --> 00:50:50.340

Dawn O'Connell: Which which, which we think which ones we think are the most necessary to have on stock and how much how much goes into the stock pile.

315

00:50:51.090 --> 00:51:02.610

Dawn O'Connell: All of those are decisions that live with the MC, which is why I was so pleased with GG in her team's report coming out, it was so important that we take advantage of the view of our outside stakeholders.

316

00:51:03.330 --> 00:51:07.140

Dawn O'Connell: You know and experts to weigh in and tell us what we're missing.

317

00:51:07.680 --> 00:51:16.080

Dawn O'Connell: One of the things i'm sure of is I don't have all the answers but i'm learning how to find them and many of them live within the Interagency that will be sitting around the fmc and then GG to the.

318

00:51:16.350 --> 00:51:28.650

Dawn O'Connell: Outside stakeholders and experts that have been studying this an awful lot so really looking forward to reconstituting you know we're on track for beginning of the New Year to have our fantasy up and going and we'll be looking to many of you, I know, for that.

319

00:51:30.060 --> 00:51:48.510

Anita Cicero: it's another question in the queue that that I think could be answered by by all of the panelists today, and that is know you're talking a lot about us pandemic preparedness, but how are you viewing the US role in terms of global pandemic preparedness, given what we're learning about.

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00:51:49.860 --> 00:51:57.120

Anita Cicero: What opportunities do you see going forward for us global leadership on pandemic preparedness so i'll just open up to the floor.

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00:51:58.440 --> 00:52:02.190

Eric Lander: Maybe i'll take a quick stab that my colleagues also.

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00:52:03.840 --> 00:52:04.860

Eric Lander: address it as well.

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00:52:06.390 --> 00:52:10.680

Eric Lander: President Biden when he went to the G seven in June.

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00:52:10.980 --> 00:52:25.320

Eric Lander: I had this on the agenda and the G seven leaders tasks the science advisors of their countries with staying on top of this there's a stock, taking as the British call it to be done later this month.

325

00:52:25.560 --> 00:52:39.630

Eric Lander: And the seven countries have been working very closely together around them set of goals this idea of 100 days mission is something that's been adopted by all those countries and then at the G 20 again, this was on the agenda, the.

326

00:52:40.440 --> 00:52:52.860

Eric Lander: And the G 20 countries have addressed this so The short answer is pandemics are issuing global problem and we all need to work together on all aspects other.

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00:52:54.180 --> 00:53:08.250

Eric Lander: Within that it's fair to say some countries that have the most advanced science and technology communities i've infrastructures, they are a special responsibility because they have special capabilities.

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00:53:08.670 --> 00:53:17.400

Eric Lander: US is one of those countries, and I think we have to say that you know 190 some odd countries in the world can all.

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00:53:17.910 --> 00:53:27.750

Eric Lander: contribute to transforming our capabilities for that, and then we and a few others, that really special roles, I think we feel that responsibility.

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00:53:28.050 --> 00:53:39.090

Eric Lander: But we've got to work closely with all these countries on those capabilities we have to understand the capabilities, have to be useful in every context around the world.

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00:53:39.630 --> 00:53:43.980

Eric Lander: You know just from if we only protect this country if we prevent the.

332

00:53:44.490 --> 00:53:50.550

Eric Lander: pandemic starting around the world, that means we care about how do we rapidly vaccinate the whole world.

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00:53:50.910 --> 00:54:00.540

Eric Lander: that's why I was mentioned things like skin patches nasal treats is because you can line up a whole lot of people and no vaccinate that we want to require.

334

00:54:00.750 --> 00:54:12.570

Eric Lander: vaccines that don't require cold chains and things like that, so this is a global problem we focused largely year on Americans contributions that it's got to be important nation.

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00:54:14.520 --> 00:54:15.060

Anita Cicero: Thank you.

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00:54:16.830 --> 00:54:17.880

Anita Cicero: And the response us.

337

00:54:20.910 --> 00:54:31.740

Dawn O'Connell: I would just add one additional thought agree completely with what was just said, but also to say, one of the golden rules is making sure that what we contribute to other countries, they can use both in a pandemic response and in peacetime.

338

00:54:32.040 --> 00:54:32.790

Dawn O'Connell: You know so.

339

00:54:32.850 --> 00:54:44.640

Dawn O'Connell: yeah it's important that the capability, we share is useful and that they build you know what they need in their countries, based on what we're able to provide in this pandemic context.

340

00:54:46.530 --> 00:54:57.960

Gigi Gronvall: i'll just add that you did the experiencing coven one of the one of the shining lights was just the how much international cooperation, there was in the science and the scientific response to the pandemic.

341

00:54:58.740 --> 00:55:11.010

Gigi Gronvall: You know, scientists have, as long as they could contribute did and the pace of information that we learned about the virus and how it behaved it, you know this is unparalleled and.

342

00:55:11.310 --> 00:55:27.900

Gigi Gronvall: We need to build on that kind of success and the US could do a lot to lead to foster more international collaborations when it comes to science to set the rules of the road, and to make sure that that we have you know, continue to grow our bio economy take advantage of all of it.

343

00:55:30.210 --> 00:55:40.740

Anita Cicero: Thank you also asked another viewers question, which is about monoclonal antibodies so monoclonal antibodies, especially the long lasting forms.

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00:55:41.400 --> 00:55:56.250

Anita Cicero: are on the horizon and they may protect for a year or more, and that seems like a very powerful and promising technology and the question is shouldn't this technology and stockpiling opportunity also be a major focus for preparedness preparedness efforts.

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00:55:58.680 --> 00:56:05.040

Dawn O'Connell: I agree, some of the things that we're seeing a very exciting, especially for those that are immunocompromised in the vaccines aren't taking.

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00:56:05.400 --> 00:56:14.880

Dawn O'Connell: You know these monoclonal is that last so long might begin to be the solution for the you know, for that part of our population, so there will be a role for these.

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00:56:15.600 --> 00:56:23.670

Dawn O'Connell: monoclonal is in addition to any vaccine work we do so, I think that's something that's very important to flag, because the vaccines don't work for everybody in all situations.

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00:56:24.360 --> 00:56:39.810

Eric Lander: Oh there's no demand preparedness plan explicitly calls out monoclonal antibodies I didn't mention it in my racket run through the list, but the question is absolutely right that there are very important thing, and I think the word is portfolio.

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00:56:40.320 --> 00:56:51.030

Eric Lander: We need to have a portfolio of solutions here vaccines are very important therapeutics of different kinds small molecules monoclonal antibodies diagnostics.

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00:56:51.300 --> 00:57:03.870

Eric Lander: So another reason why all the agencies are working together, and why we want it to be a coordinated effort is, at the end of the day, our protections when it comes down to one magic bullet, but an overall grow as it seems to be.

351

00:57:06.840 --> 00:57:07.320

Anita Cicero: Okay.

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00:57:08.250 --> 00:57:17.700

Margaret Miller, JHU: One final question and then we'll we'll wrap so we can get everyone on time and, what is the US Government doing differently to prevent pandemics in the future.

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00:57:23.580 --> 00:57:27.000

Dawn O'Connell: i'll offer one thought and, of course, encourage fellow panelists to jump in as well.

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00:57:27.660 --> 00:57:33.450

Dawn O'Connell: CDC setting up this forecasting Center which is going to be critical for us to understand what's coming around the horizon.

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00:57:33.780 --> 00:57:39.090

Dawn O'Connell: And this didn't have to be a pandemic, it could have been an epidemic, it could have been regionally located.

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00:57:39.300 --> 00:57:47.400

Dawn O'Connell: We weren't fast enough with some of these countermeasures that Eric's been talking about the diagnostics that didn't come quick enough, we weren't able to identify where it was when it was happening.

357

00:57:47.940 --> 00:57:55.650

Dawn O'Connell: But hopefully it, you know for future outbreaks and outbreak is just an outbreak will see it it'll be forecasted will know what's coming we'll have.

358

00:57:56.040 --> 00:58:01.230

Dawn O'Connell: You know in this portfolio a diagnostic that we can pull down that works with that viral family.

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00:58:01.740 --> 00:58:07.770

Dawn O'Connell: That becomes a prototype that we can use will have a therapeutic and we can contain it, but a lot of it was really knowing.

360

00:58:08.340 --> 00:58:14.640

Dawn O'Connell: When it broke through where it was and being able to find it in the diagnostics, where the piece, I think that was missing this round.

361

00:58:15.300 --> 00:58:23.250

Dawn O'Connell: And will be one of the things that we focus on in this pandemic preparedness plan moving forward, so we can identify I'm sure others have additional thoughts on this question.

362

00:58:24.990 --> 00:58:37.680

Eric Lander: I thought that was great I mean we can't prevent outbreaks, we can try to read outbreaks from turning into epidemics and pandemics and the awareness you're talking about is our leading Defense.

363

00:58:38.970 --> 00:58:51.300

Gigi Gronvall: Things aside a plea for we need to implement one health, you know, we need to do, what do much better job of understanding the human, animal interface and making sure that we can stop epidemics from becoming pandemics.

364

00:58:52.620 --> 00:58:59.550

Anita Cicero: And that that need for one health is a common refrain over the last several years but potentially.

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00:59:00.090 --> 00:59:07.230

Anita Cicero: Maybe we can do it, a topic for the steering committee in the new year, that is, you know what does that mean exactly and what will it take to get there.

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00:59:07.860 --> 00:59:13.950

Anita Cicero: But for now, I just wanted to thank all of our panelists Thank you so much for participating today but also.

367

00:59:14.640 --> 00:59:26.610

Anita Cicero: For your service during this pandemic and for not getting enough sleep i'm sure, as you help feverish Lee to respond to this and to and to also Pat, you know form the.

368

00:59:27.000 --> 00:59:38.250

Anita Cicero: path forward for us show us the way forward, so thank you very much for your time today and that concludes our webinar for today really appreciate you attending Thank you.

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00:59:38.550 --> 00:59:39.390

Eric Lander: Thank you.

370

00:59:39.600 --> 00:59:40.200

Gigi Gronvall: Thank you.