

“Mobilizing to Fight an Avian Flu Pandemic”
Remarks by Senator Tom Harkin
Woodrow Wilson International Center for Scholars

December 7, 2005

“Thank you, Lee for those kind words.

“I met Lee more than three decades ago, when I was first elected to the House of Representatives. I was a freshman in the Watergate class of 1974, and Lee was already one of the senior statesmen in the House. Well, today, Lee has risen well beyond statesman status. He has become one of those rare Washington wise men like George Kennan and Averell Harriman . . . universally respected . . . people of long and deep experience in world affairs, who we count on to keep us out of trouble. So, Lee, I’m honored that you invited me to speak, this morning.

“I understand that just last week, the Center convened a conference on avian flu. I assume that most of you are already well-versed in the topic. So, this morning, I intend to commit an unnatural act for a United States Senator: I intend to speak briefly and to reserve the lion’s share of our time for questions and an exchange of views.

“It is interesting to note, Lee, that our topic is avian flu, and the date, today, is December 7, the anniversary of the Japanese attack on Pearl Harbor. But let’s be clear, when a flu pandemic hits – and the experts say it is, indeed, a matter of when, not if -- it will not be a sneak attack. It will be an attack that we have been warned about for years, but chose to all but ignore.

“And the allusion to Pearl Harbor is relevant in another respect. Because avian flu is more than a public health issue. It is a threat to our national security—and a threat to our economy—of the first order. As Business Week magazine put it in its Nov. 28 issue: “The impact of a flu crisis would be comparable . . . to the Great Depression . . . Essential services such as water or power would be disrupted, supply chains cut, international travel and trade halted, and crucial workers sickened or killed.”

“By the way, I would add that this is not Chicken Little alarmism; much the same thing happened during the catastrophic flu epidemic of 1918.

“All of which makes it just unfathomable – and maddening – that the administration refused for years to get serious about avian flu. Think about it: Japan came up with its plan to fight avian flu in 1997! Last month, the Chinese announced a plan to vaccinate 14 billion birds for avian flu. But, here in the U.S., we are woefully unprepared to vaccinate human beings. We have enough doses of antiviral medication for less than two percent of our population. France and Britain have enough for 25 percent of their population – the amount recommended by the World Health Organization.

“So, obviously, we are playing catch-up ball.

“Every day we delay is another day that we can’t purchase vaccine.

“Every day we delay is another day we are not stockpiling antiviral drugs.

“Every day we delay is another day that other countries get in line ahead of us.

“Now, I can’t claim that avian flu was on my radar screen back in 1997, when the Japanese came up with their plan. It wasn’t. But it has been since early this year. And—as ranking member on the Labor-HHS subcommittee of appropriations—I have made it my business to prod and goad the administration to get moving on preparations for an avian flu pandemic. Unfortunately, it’s been like trying to move a mule off the railroad tracks.

“Last April—fully seven months ago—Senator Arlen Specter and I wrote to Secretary Leavitt of HHS requesting a plan for avian flu. No plan was forthcoming.

“Even into late summer, as avian flu crossed the species barrier and we had 67 human deaths in Asia, there was still no U.S. plan.

“Frankly, I was at wit’s end trying to get the administration to act. So, in October—as avian flu spread to Europe—I attached my own rudimentary avian flu plan to the Department of Defense appropriations bill. But, still, there was no significant response from the administration.

“A month later, in November, I attached a beefed up avian flu plan, funded at \$8 billion, to the Labor-HHS appropriations bill. At this point, I was not the only member of Congress worried about the administration’s tardy response to avian flu. It passed overwhelmingly.

“And maybe that’s what got the mule moving, because, in early November, the President went to NIH to announce an avian flu plan. I assumed that, thanks to the \$8 billion I put in the Labor-HHS bill, we would be able to get moving immediately. And, by the way, my amendment explicitly stated that every dime of that \$8 billion would be spent “at the discretion of the President.” So the administration had complete freedom of action.

“But there was yet another snag. In the middle of November, in conference, the House Republicans removed every dime of avian flu funding from the Labor-HHS bill. House Majority Leader Roy Blunt was quoted by Bloomberg News as saying that the Republicans didn’t think there was a “compelling” need for avian flu funding . . . and that it could wait until the next fiscal year begins in October 2006!

“The real stumbling block, apparently, was the increasingly powerful Conservative Study Group in the House. The President sent up his avian flu plan as an emergency appropriation, meaning that it would not be offset with budget cuts elsewhere. But the conservative faction in the House was insisting that the cost of the avian flu plan be 100 percent offset.

“So, think about it: Funding for the Iraq war is not offset. The House conservatives have no problem with that. But avian flu—which could kill upwards of a half million Americans—is not an emergency, in the eyes of the House conservative. Which is just absurd.

“Fortunately, cooler heads will prevail and we will provide money for flu in December – and that money will likely be attached to the DOD appropriations bill. Bear in mind that the DOD conference report cannot be amended, and is all but certain to pass in both Houses, because nobody wants to shut down DOD in time of war.

“So, this week, we will finally nail down funding to fight avian flu. Unfortunately, however, it will not be the \$8 billion level specified in my amendment. It will likely be at the \$7.1 billion level requested by the President, largely because it gives short shrift to state and local preparedness. I’ll have more to say about that shortly.

“In most respects, the President’s plan is the same basic plan that I offered. This is to be expected, because we are all talking to the same experts at the National Institutes of Health and the Centers for Disease Control. We’re all agreement on the need to do four broad things:

“One, to create an early-warning tripwire, we need to dramatically step up international surveillance of avian flu outbreaks overseas. Right now, CDC is doing an excellent job working with governments in Asia and elsewhere. But we need to do even better. If an outbreak occurs, every day, every hour will matter. And, to coin a phrase: It’s better to fight H5N1 over there, than here at home.

“Two, we need to ramp up our vaccine-production infrastructure here in the United States. It is an astonishing fact that the United States currently has just one plant – one plant! – capable of manufacturing flu vaccines.

“Three, we need to build up stockpiles of vaccines currently believed to be effective against avian flu, as well as anti-viral medications.

“And, four, we need to strengthen our state and local public health infrastructure. Right now, state and local agencies—and local hospitals—are simply not capable of dealing with an avian flu pandemic. Even if we had an adequate stock of vaccine, it would be wasted if we lacked the public health infrastructure to deliver it.

“So I give the administration full credit for embracing all the essential pieces of a credible plan to fight avian flu. But I still have major concerns.

“The weakest link in the administration’s plan is state and local preparedness. Right now, hospital emergency rooms across the United States would be utterly overwhelmed . . . they would collapse . . . in the face of a full-fledged pandemic or major act of bioterrorism.

“The parallel with Hurricane Katrina is depressingly appropriate. In New Orleans—despite decades of dire warnings—we confronted a Category Five hurricane with levies built to withstand, at best, a Category Three storm. Well, right now, we are confronting the very real prospect of a Category Five pandemic, but we have a public health infrastructure—with local hospitals on the front line—that has trouble coping with a busy Saturday night.

“We need to hire more public health professionals: epidemiologists, physicians, laboratory technicians, and others. At the same time, we need to dramatically increase the surge capacity of hospitals all across the country. As Dr. Rick Blum, president of the American College of Emergency Room Physicians, recently said: “We’ve pumped billions of dollars into preparedness since 9/11, but virtually none of that has gone to the one place where we know 80 percent of patients go first,” the emergency room.

“For example, most victims of avian flu would need ventilators to help them breathe. Right now there are only 105,000 ventilators in the entire United States, and three quarters of them are already in use on a typical day.

“But instead of channeling new resources into state and local preparedness, the administration would take us backward. The President’s budget for fiscal year 2006 actually proposed to cut \$120 million from state public health agencies. Now they want to put only \$100 million back in. But they want each state to build—and largely pay for—its own stockpile of antiviral drugs.

“For Iowa, that would mean a measly \$1 million in new funding . . . \$1 million spread across the entire state of Iowa to pay for an antiviral stockpile, to beef up emergency rooms with equipment and personnel, and to do all the other things to get ready for a pandemic. This funding is just totally inadequate—dangerously inadequate.

“Moreover, it is a mistake to require each state to build its own stockpile of antivirals. Some states can’t afford it—Louisiana and Mississippi come to mind. What happens when states own their stockpiles? Does that mean that neighboring states can’t get help if they have an outbreak first and need help? Instead of having 50 states each hoarding its own stockpiles, we should have a national stockpile and a national quick-response plan that will deliver the drugs to wherever an outbreak occurs.

“This is why we have a national government! An avian flu pandemic is going to move across state lines with impunity. It is going to be a national crisis, and it’s going to require a federal response. The feds need to be able to respond massively not only with vaccines and antivirals, but with thousands of extra health care professionals and mobile hospitals. It is just not reasonable to expect each state to independently come up with this kind of infrastructure and capacity.

“So, my friends, we have our work cut out for us. We face tremendous technical and logistical challenges. Instead of the administration’s \$7.1 billion in funding, I strongly recommend \$8 billion in funding, with that additional \$1 billion allocated for state and local preparedness—the front line where the war on avian flu will be won or lost.

“Bear in mind that the \$8 billion total that I have proposed is less than we spend in two months in Iraq. And, as I said, with avian flu, we are confronting an enemy that could kill a half a million Americans.

“This is potentially an unprecedented threat to the American people—many magnitudes greater than then 9/11 attacks. We can’t afford to be penny wise, pound foolish. And we can’t afford preparation timelines that stretch out to 2009 and 2010.

“In World War II, we built the Pentagon in six months. To beat an avian flu pandemic, we need that same sense of crisis and can-do commitment. And we need to get moving now.”