

From: Fauci, Anthony (NIH/NIAID) [E]
Sent: Tue, 24 Mar 2020 16:27:17 +0000
To: Lerner, Andrea (NIH/NIAID) [E]
Subject: FW: You may be able to help

Linda is a former NIH Institute Director. Please figure out what she is talking about and respond to her on my behalf

Anthony S. Fauci, MD
Director
National Institute of Allergy and Infectious Diseases
Building 31, Room 7A-03
31 Center Drive, MSC 2520
National Institutes of Health
Bethesda, MD 20892-2520
Phone: (b) (6)
FAX: (301) 496-4409
E-mail: (b) (6)

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From: Birnbaum, Linda (NIH/NIEHS) [V] (b) (6) >
Sent: Tuesday, March 24, 2020 12:22 PM
To: Fauci, Anthony (NIH/NIAID) [E] (b) (6) >
Subject: You may be able to help

Hi Tony,

Thank you for your tireless efforts to clearly communicate about the pandemic, including correcting the President when necessary. You do it in such a non-threatening and respectful style. I think everyone appreciates it.

(b) (6) runs a home health care company in NC and many other states in the nation. He has managed to get some of the largest home care companies as well as the Home Care Association of America (their trade organization) to sign off on this call for guidance for their industry which provides professional care givers, largely CNAs, to those needing assistance with daily living throughout the nation.

I am reaching out hoping that you might know to whom this message should really go.

Thanks again for all you do – and take care of yourself! The nation needs you.

Sincerely, Linda

Linda S. Birnbaum, Ph.D., D.A.B.T., A.T.S
Scientist Emeritus (Retired)
Former Director, National Institute of Environmental Health Sciences
and National Toxicology Program

phone: (b) (6)

cell (b) (6)

e-mail: (b) (6)

personal email: (b) (6)

From: (b) (6)

Sent: Monday, March 23, 2020 10:45 PM

To: Linda Birnbaum (b) (6) >

Subject: Message to Dr. Fauci

Dear Dr. Fauci,

The home care industry cares for tens of millions of our most vulnerable citizens in their homes every day. We provide assistance with activities of daily living and instrumental activities of daily living, which keeps our clients in their homes and in the lowest risk setting. **Our professional Caregivers are able and willing to continue to provide care to clients who test positive for COVID-19 or have been exposed to the virus.**

But we need your help so that home care companies do not face unreasonable liability for providing such care. To that end, we ask for your support in getting a bill through congress like the Public Readiness and Emergency Preparedness Act (PREP Act), 42 USC 247d-6d, that will insulate providers like us from claims related to the care we will be providing in these extraordinary times.

We also ask that you support creating a fund that will provide appropriate personal protective equipment to our caregivers. Our clients should not have to bear the additional burden of the added cost of PPE.

Additionally, we would like you to encourage the CDC to clarify its guidance on caring for COVID-19 patients (found [here](#), [here](#) and [here](#)) that the guidance is applicable to "professional, licensed and insured, home based care agencies."

This clarification will give the industry a workable standard to protect caregivers caring for COVID-19 clients. In essence, it would establish that facemasks and gloves are sufficient PPE to care for COVID-19 clients in the home, and not require its caregivers to comply with the healthcare setting requirements of wearing N95 respirators, eye protection (goggles or face shields) or gowns. This is important as a practical matter because respirators and gowns are not readily available at this time. Moreover, most home care workers are not trained in the proper use of respirators.

Finally, we need your help in pressuring congress to provide day care for the children of our caregivers. If they cannot find adequate care for their children, then our clients will suffer. This is a vital step to keep our clients in their homes.

With your help, home care companies will be able to:

1. Relieve the burden on the healthcare system by keeping our clients out of the hospital; and
2. Adhere to shelter-in-place measures which will flatten the curve of COVID-19's spread.

Warmly,
(b) (6)

On behalf of:

Michael Coccaro, Chief Operating Officer and General Counsel, Synergy Home Care

Emma Dickison, Chief Executive Officer and President, Home Helpers

Lisa Foster, Chief Clinical Officer, MGA Homecare

Daniel Gottschalk, Co-owner and President, Genova Health

Margaret Haynes, Chief Operating Officer, Right at Home

Vicki Hoak, Executive Director, Home Care Association of America

Peter Ross, Chief Executive Officer and Co-Founder, Senior Helpers

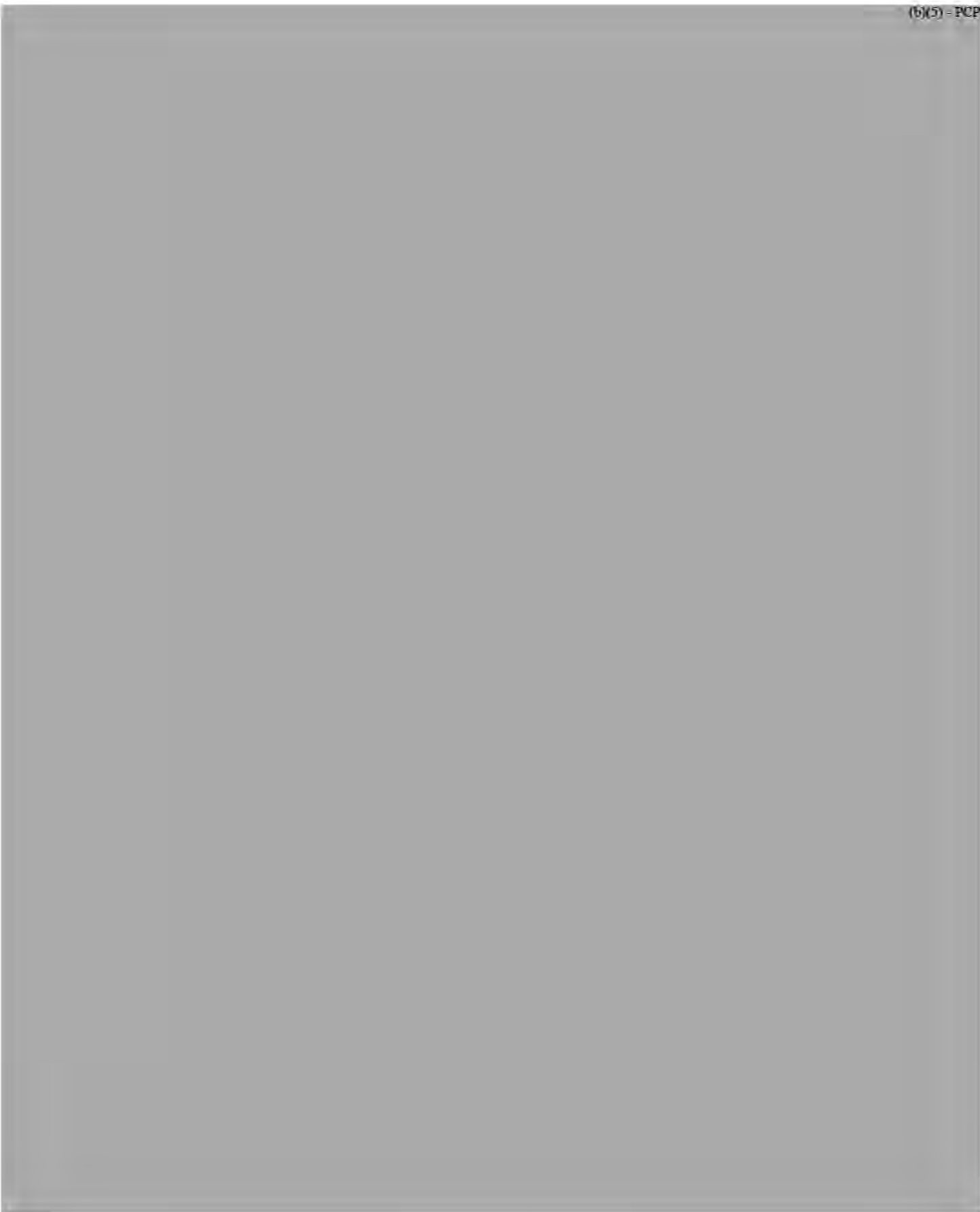
Timothy Ryan, General Counsel, AccentCare, Inc.

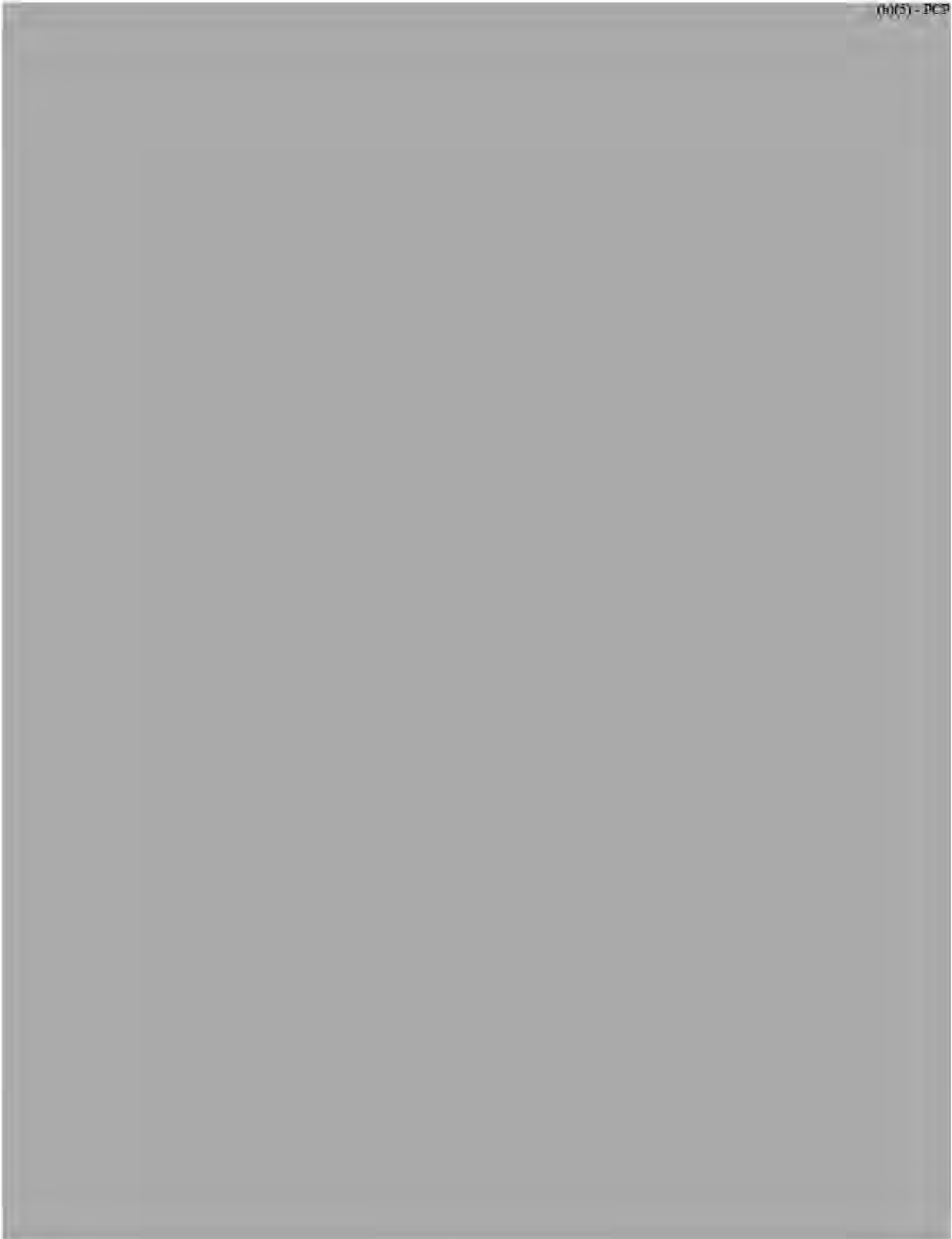
Shelly Sun, Founder, BrightStar Care

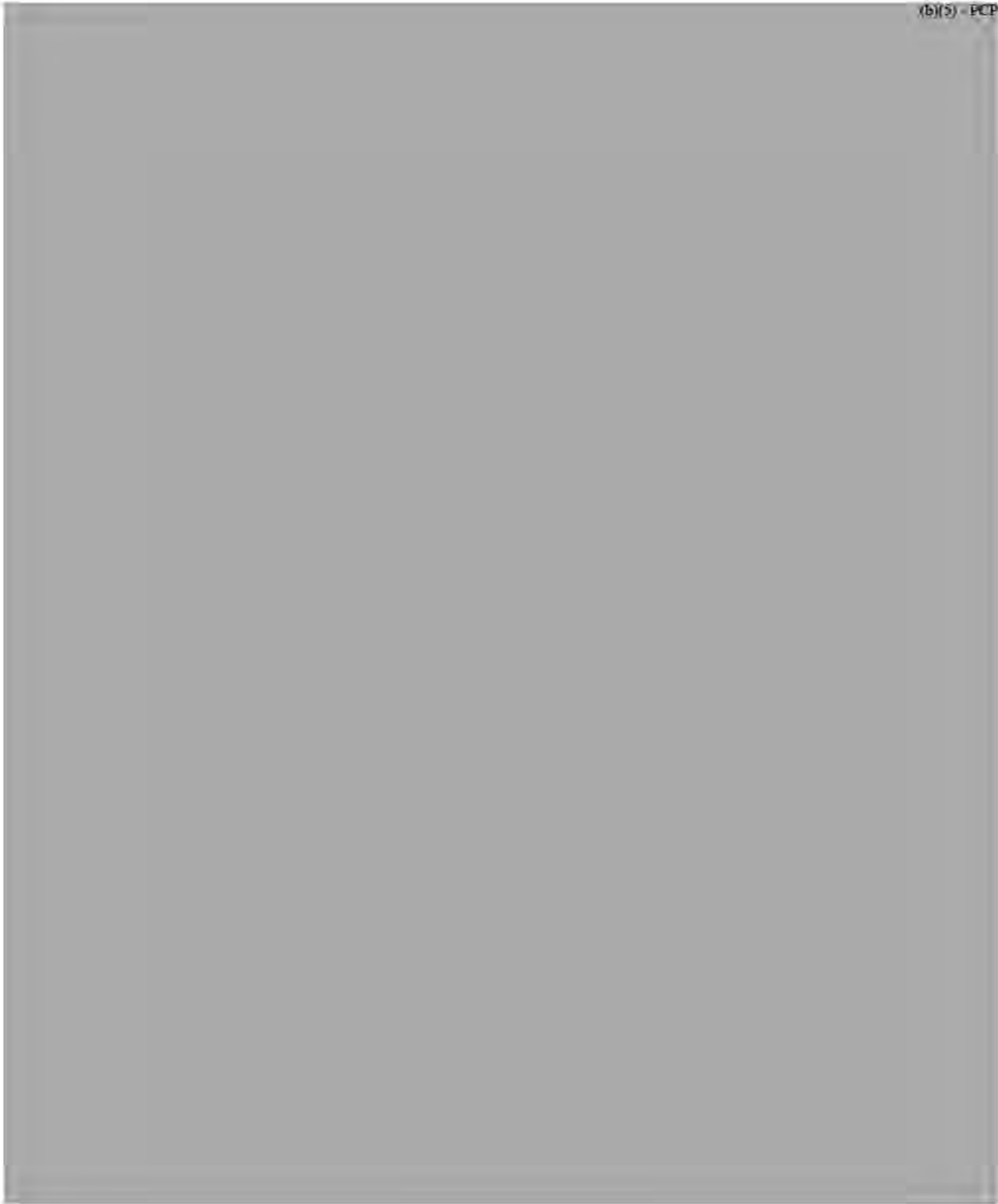
(b) (6)

www.nursecarenc.com

www.livhome.com







From: Fauci, Anthony (NIH/NIAID) [E]
Sent: Tue, 24 Mar 2020 15:33:11 +0000
To: Barasch, Kimberly (NIH/NIAID) [C]
Subject: FW: The global health leaders call, Wednesday 25 March at 13:00 CET
Attachments: (b) (4) Swisscom Call code.pdf

Please print this out for me for possibility doing the call tomorrow. Thanks.

Anthony S. Fauci, MD
Director
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From: RYAN, Michael J. (b) (6)
Sent: Tuesday, March 24, 2020 10:59 AM
To: SHOC <shoc@who.int>; Office of the Director-General <DGOoffice@who.int>; Redfield, Robert R. (CDC/OD) (b) (6); David Heymann (b) (6); Felicity Harvey (b) (6); (b) (6); Chris.Elias (b) (6); (b) (6) J.Farrar (b) (6); ; Fauci, Anthony (NIH/NIAID) [E] (b) (6); GREIN, Thomas (b) (6); COX, Paul Michael (b) (6); SCHWARTLANDER, Bernhard F. (b) (6); MINHAS, Raman (b) (6); Conrad, Patricia (NIH/NIAID) [E] (b) (6); MAHJOUR, Jaouad (b) (6); FALL, Ibrahima Soce (b) (6); Thomas R. Frieden (b) (6); Lynn Banks (b) (6); President | Resolve to Save Lives <president@resolvetosavelives.org>; (b) (6); AL-SHORBAJI, Farah (b) (6); Robynn Leidig (b) (6); DRURY, Patrick Anthony (b) (6); Dr VAN KERKHOVE, Maria (b) (6); cherylc (b) (6); GRAAFF, Peter Jan (b) (6); POOLE, Marcia <(b) (6)>; Tarik Mohammed (b) (6); Carlos Navarro Colorado (b) (6); Ryan Morhard (b) (6)

(b) (6) BRIAND, Sylvie (b) (6); MORGAN, Oliver
(b) (6); Harries, Jenny (b) (6); Awwad, David (NIH/NIAID) [C]
(b) (6); SIMONSON, Stewart (b) (6); SINGER, Peter Alexander
(b) (6) Jayatunga, Wikum <(b) (6)>
(b) (6); Julie.HALL (b) (6); Amelie RIOUX <(b) (6)>
KABIR, Sophia (b) (6)
(b) (6); SHIN, Young-Soo (b) (6);
(b) (6); Feng Ding (b) (6)

Cc: SHOC <shoc@who.int>; Office of the Director-General <DGOoffice@who.int>; SCHWARTLANDER, Bernhard F. (b) (6); MAHJOUR, Jaouad (b) (6); FALL, Ibrahima Soce (b) (6); GREIN, Thomas (b) (6); MINHAS, Raman (b) (6); COX, Paul Michael (b) (6); AL-SHORBAJI, Farah (b) (6); POOLE, Marcia (b) (6); DRURY, Patrick Anthony (b) (6); GRAAFF, Peter Jan (b) (6); Dr VAN KERKHOVE, Maria (b) (6); KABIR, Sophia (b) (6); FARES, Christine Youssef (b) (6); AYLWARD, Raymond Bruce J. (b) (6); SMITH, Ian Michael (b) (6)

Subject: The global health leaders call, Wednesday 25 March at 13:00 CET

Dear colleagues,

Dr Tedros would like to invite you to the next informal discussion about the ongoing 2019 novel coronavirus.

The teleconference will be hosted on Wednesday, 25 March at 13:00 CET and the dial-in number with a passcode is attached.

If you experience any technical difficulties joining this conference call, please contact the WHO HQ EOC operator at: +41227912490

It would be appreciated if you could kindly confirm your participation to Ms Sophia Kabir, email: kabirso@who.int ; mobile no. (b) (6)

The agenda and background documents will be shared ahead of the call.

Best,

Mike

Dear participant

To join the upcoming teleconference, please call:

From inside WHO

(b) (4)

From others countries please call:

Country	Number	Access Code
Argentina	+54 115 984 12 00	(b) (4)
Australia	+61 280 147 967	
Austria	+43 720 880 876	
Belgium	+32 280 835 50	
Brazil	+55 213 958 07 18	
Bulgaria	+35 924 917 399	
Canada	+1 613 686 43 59	
Chile	+56 225 95 28 26	
China	+86 105 789 7457	
Croatia	+38 51 777 63 03	
Cyprus	+35 72 503 02 78	
Czech Republic	+42 024 601 95 32	
Denmark	+45 699 182 15	
El Salvador	+50 32 113 37 10	
Estonia	+37 26 68 12 68	
Finland	+35 894 270 50 03	
France	+33 1 77 69 68 25	
Germany	+49 698 991 47 25	
Georgia	+99 57 067 773 41	
Greece	+30 211 198 00 81	
Hong Kong	+85 258 084 851	
Hungary	+36 180 881 90	
Ireland	+35 314 845 940	
India	+91 11 712 79 153	
Israel	+97 237 219 661	
Italy	+39 02 479 211 40	
Japan	+81 345 209 476	
Kazakhstan	+771 727 274 71	
Lathvia	+37 16 765 25 76	
Lithuania	+37 052 05 89 83	
Luxembourg	+352 208 801 72	
Malaysia	+603 921 220 20	
Malta	+35 62 778 01 98	
Mexico	+52 554 624 02 27	
Netherlands	+31 108 920 271	
New Zealand	+64 99 25 03 39	
Norway	+47 210 189 41	
Panama	+507 836 51 38	
Peru	+51 17 08 54 63	
Philippines	+632 231 22 15	
Poland	+48 221 168 469	
Portugal	+351 308 800 872	
Puerto Rico	+17 879 05 73 62	
Russia	+749 540 220 27	
Romania	+40 318 107 181	
Singapore	+65 315 813 05	
Slovakia	+42 123 300 69 18	
Slovenia	+38 61 600 49 18	
South Africa	+27 10 590 11 04	
South Korea	+82 707 488 31 02	
Sweden	+46 840 309 949	
Switzerland (English)	+41 58 202 07 22	
Switzerland (Italiano)	+41 58 262 07 44	
Switzerland (Deutsch)	+41 58 262 07 11	

Switzerland (Français)	+41 58 262 07 33
Spain	+34 931 816 661
Tadzhikistan	+99 242 782 22 70
Turkey	+90 21 290 025 60
United Kingdom	+44 203 370 57 19
United States	+1 646 381 08 89

(b) (4)

A large rectangular area of the document is redacted with a solid grey fill. The text "(b) (4)" is printed in the top-left corner of this redacted area.

From: Fauci, Anthony (NIH/NIAID) [E]
Sent: Tue, 24 Mar 2020 15:32:02 +0000
To: Conrad, Patricia (NIH/NIAID) [E]
Subject: FW: interview request

Tell them no.

Anthony S. Fauci, MD
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-----Original Message-----

From: Raphael De Montferrand <rdemontferrand@rttv.fr>
Sent: Tuesday, March 24, 2020 11:27 AM
To: Fauci, Anthony (NIH/NIAID) [E] (b) (6)
Subject: interview request

dr Faucy,

Hello, my channel is doing a section of its news tonight (at 3:45pm your time) on the coronavirus situation in New York. I wondered if we could interview you over skype. Do you think that might be possible at 3:45pm today your time?

We have a simultaneous translator as we operate in french from our studio in Paris.

Looking forward to hear from you,

Raphaël de Montferrand
RT France
0033608662642

From: Fauci, Anthony (NIH/NIAID) [E]
Sent: Tue, 24 Mar 2020 14:30:50 +0000
To: [REDACTED] (b) (6)
Subject: FW: Boston Globe: In order to save Dr. Fauci, we must destroy him

Yikes! You have to read this. Things are getting unbelievably crazy.

Anthony S. Fauci, MD
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FAX: (301) 496-4409
E-mail: [REDACTED] (b) (6)

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From: Folkers, Greg (NIH/NIAID) [E] [REDACTED] (b) (6)
Sent: Tuesday, March 24, 2020 10:16 AM
To: NIAID OCGR Leg <NIAIDOCGRLeg@mail.nih.gov>; NIAID OD AM <NIAIDODAM@niaid.nih.gov>; NIAID COGCORE <COGCORE@mail.nih.gov>
Subject: Boston Globe: In order to save Dr. Fauci, we must destroy him

In order to save Dr. Fauci, we must destroy him

Dr. Anthony Fauci, director of the National Institute of Allergy and Infectious Diseases, is a study of calm and competence in the middle of a pandemic. Which makes him an endangered species, working as he does for a boss who is notoriously insecure and made his name shouting "You're fired!" on a reality TV show.

By [Kevin Cullen](#) Globe Columnist, Updated March 23, 2020, 5:25 p.m.
[209](#)



Dr. Anthony Fauci's

calm, reassuring competence in response to the coronavirus pandemic is placing him at serious risk of hearing the words that made his boss famous: You're fired. Jabin Botsford/The Washington Post

Dr. Anthony Fauci is a bum.

A quack, a snake oil salesman.

He got his degrees online, not from Holy Cross and Cornell.

He watches Wheel of Fortune but not Jeopardy.

He's a Yankees fan.

Such character assassination is unsavory but necessary because Fauci's calm, reassuring competence in response to the coronavirus pandemic is placing him at serious risk of hearing the words that made his boss famous: You're fired.

President Trump is watching and listening to the same thing we are, i.e., Fauci going to the podium to rebut with facts the latest outbreak of paranoid anxiety or the president's regularly reckless statements.

Fauci is an oasis of rigor and reason in a barren desert of confusion and fear.

Which, given who he works for, makes him an endangered species.

During the Vietnam War, some US Army officer supposedly suggested that in order to save a village from the Vietcong they had to destroy it.

And so, to save Dr. Fauci, we must destroy him — at least in Trump's eyes.

Now that might sound crazy, but we're dealing with a crazy president in crazy circumstances.

It's not as if there's no relevant precedent here.

Two words: Bill Bratton.

Two other words: Rudy Giuliani. Who happens to be Trump's BFF.

Before Giuliani grew old, deranged, and more qualified to be a spokesman for Miracle Ear than the president's lawyer, he was the reform-minded mayor of New York City.

Rudy rode into Dodge, which is what Times Square resembled at the time, and vowed to clean it up. His hand-picked sheriff was Dorchester's own Bill Bratton.

As police commissioner, Bratton did much to stem violent crime in the nation's biggest city, but even more remarkably got his cops to reduce the incidence of more minor, so-called quality of life crimes that

had made New York less livable, from the tony sections of Manhattan to the Tony Fauci sections of Brooklyn.

Bratton did his job too well. He ended up on the cover of Time magazine, hailed as the guy who pulled the worm out of the Big Apple. He became more popular than the mayor.

This drove Giuliani nuts. Rudy had to be the smartest guy in the room, had to get all the credit. Sound familiar?

So Bratton had to go.

That wasn't Bratton's first rodeo. Long before he landed in New York, he became the face of progressive, modern policing in his hometown, the youngest-ever Boston Police superintendent. Police Commissioner Joe Jordan resented his overly-ambitious No. 2 so he busted Bratton.

The point is, insecure bosses don't like being shown up by smarter, more competent subordinates. Small men make big mistakes.

It may be too late to save Fauci. He just got the star treatment from Maureen Dowd in The New York Times.

There used to be a thing called the Sports Illustrated curse, that after an athlete appeared on its cover his or her career tanked.

Similarly, being in the Trump administration and getting praised by The New York Times is the kiss of death.

Now, normally, you could print something in the Times and chances were the president wouldn't read it. He routinely dismisses the Gray Old Lady as fake news, except when his and his family's lousy books are mass-bought onto the newspaper's bestsellers list. He is not fond of polysyllabic words and prefers to get his news from "Fox & Friends" or whatever white nationalist website his aide Stephen Miller might recommend.

But Trump reads Mo Dowd because they have known each other forever and she writes about him at a nuanced, personal level that drives him especially cuckoo.

We're way past the theoretical here.

Tony Fauci is in real danger, and by extension so are the rest of us who expect — nay, pray for — one person in the White House to be trustworthy and competent in a time of unprecedented crisis.

So, again, repeat after me, Dr. Anthony Fauci is a bum.

Long live the bum.

Kevin Cullen is a Globe columnist. He can be reached at kevin.cullen@globe.com.

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From: Fauci, Anthony (NIH/NIAID) [E]
Sent: Tue, 24 Mar 2020 14:13:33 +0000
To: [REDACTED] (b) (6)
Subject: RE: Update #2: Traffic Advisory: Street Closures

Thanks

Anthony S. Fauci, MD
Director
National Institute of Allergy and Infectious Diseases
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National Institutes of Health
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Phone: [REDACTED] (b) (6)
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E-mail: [REDACTED] (b) (6)

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From: [REDACTED] (b) (6)
Sent: Tuesday, March 24, 2020 10:01 AM
To: Fauci, Anthony (NIH/NIAID) [E] [REDACTED] (b) (6)
Subject: FW: Update #2: Traffic Advisory: Street Closures

A lot of street closures. I don't think it will interfere with your trip downtown, but just in case

From: AlertDC <noreply@everbridge.net>
Sent: Tuesday, March 24, 2020 7:33 AM
To: [REDACTED] (b) (6)>
Subject: Update #2: Traffic Advisory: Street Closures

This is an important message from the District of Columbia AlertDC system.

On Tuesday, March 24, 2020, in coordination with the National Park Service, the Metropolitan Police Department will make several street closures beginning at 7:00 a.m. through approximately 8:00 p.m at the following locations:

- The Memorial Bridge
- Lincoln Memorial Circle
- Potomac River Freeway (all exits to Ohio Drive and Independence Avenue)

- Rock Creek Parkway/Potomac Parkway Drive between Virginia Avenue and Independence Avenue, SW (to include Ohio Drive, SW)
- Independence Avenue between Ohio Drive and 14th Street, SW
- 23rd Street between Constitution Avenue and Lincoln Memorial Circle
- Henry Bacon Drive between Constitution Avenue and Lincoln Memorial Circle
- 17th Street between Constitution Avenue, NW and Independence Avenue, SW
- 15th Street between Constitution Avenue, NW and Independence Avenue, SW
- Maine Avenue between Independence and 12th Street, SW
- All vehicular exits to East Potomac Park and West Potomac Park

All street closures and listed times are subject to change based upon prevailing or unexpected conditions.

The public should expect parking restrictions along the street and should be guided by the posted emergency no parking signage. All vehicles that are parked in violation of the emergency no parking signs will be ticketed and towed.

Individuals and groups will encounter delays in the vicinity of this closure. To help flatten the curve, we strongly discourage any Tidal Basin visits because social distancing has not been possible due to visitor volume.

For more information about the District's coronavirus response, visit coronavirus.dc.gov

[Click Here](#) to update your profile.

To stop receiving future email notifications from this organization [unsubscribe here](#).

From: Fauci, Anthony (NIH/NIAID) [E]
Sent: Tue, 24 Mar 2020 14:12:54 +0000
To: Miller, Katie R. EOP/OVP
Cc: Short, Marc T. EOP/OVP; Conrad, Patricia (NIH/NIAID) [E]; Billet, Courtney (NIH/NIAID) [E]; O'Malley, Devin M. EOP/OVP
Subject: RE: Please advise

I called the reporter and she was very receptive to my corrections of the record and presentation of the facts.

Anthony S. Fauci, MD
Director
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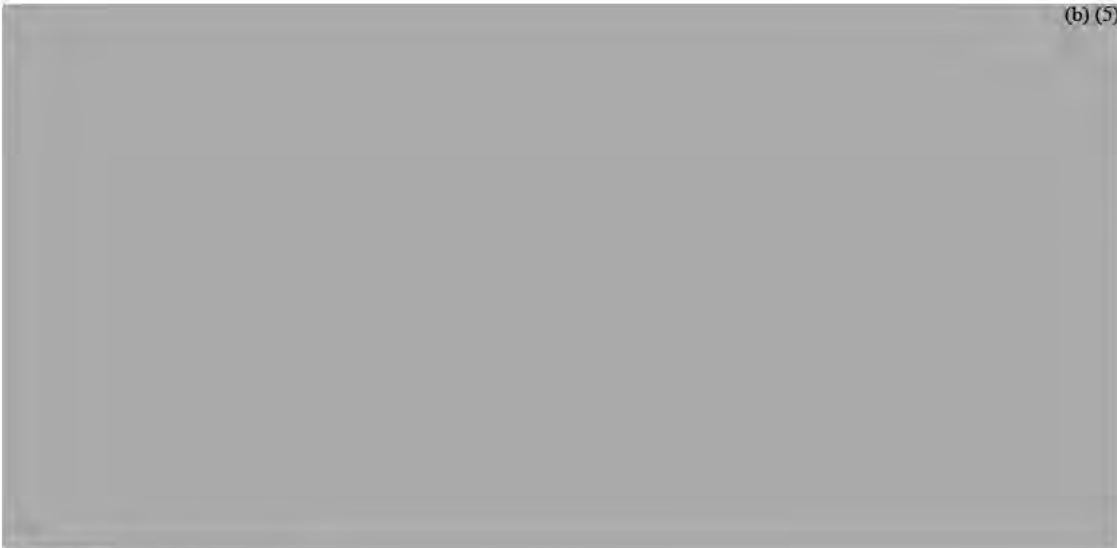
From: Miller, Katie R. EOP/OVP (b) (6) >
Sent: Tuesday, March 24, 2020 9:37 AM
To: Fauci, Anthony (NIH/NIAID) [E] (b) (6) >
Cc: Short, Marc T. EOP/OVP (b) (6) >; Conrad, Patricia (NIH/NIAID) [E] (b) (6) >; Billet, Courtney (NIH/NIAID) [E] (b) (6) >; O'Malley, Devin M. EOP/OVP <(b) (6)>
Subject: Re: Please advise

(b) (5)

Sent from my iPhone

On Mar 24, 2020, at 9:27 AM, Fauci, Anthony (NIH/NIAID) [E] (b) (6) > wrote:

Marc/Katie:



Tony

Anthony S. Fauci, MD
Director
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From: Abutaleb, Yasmeeen <Yasmeeen.Abutaleb@washpost.com>
Sent: Tuesday, March 24, 2020 9:05 AM
To: Conrad, Patricia (NIH/NIAID) [E] (b) (6)
Cc: Parker, Ashley <Ashley.Parker@washpost.com>
Subject: Washington Post fact check on Fauci/scientists story

Hi Patty,

Thanks very much for your help yesterday and hope you're doing well. We're working on a story today about Trump's relationship with the scientific and medical experts in the coronavirus response, including Dr. Fauci. We're reporting this out today but wanted to send you what we've been hearing as we get it so there's ample time to fact check everything today. Here are some points we'd love to discuss with the best person in your office or, better yet, Dr. Fauci himself.

- Fauci was apoplectic about Trump's tweet yesterday saying the cure couldn't be worse than the virus and indicating that he wants to reopen businesses soon.
- Fauci has been forceful privately that unproven drugs should not be advertised to Americans as a panacea (and he of course has publicly spoken about these drugs).
- We are also reporting in a separate story that Larry Ellison is building a website for the federal government that will collect data on the efficacy of remdesivir, chloroquine and hydroxychloroquine. Our understanding is Fauci is vehemently opposed to this idea and has pushed back on it, citing patient privacy concerns with the website and collecting data in this way outside of an approved FDA trial.

Again, we'd love to speak with Dr. Fauci and any others in your office who may have insight into these particular issues and other aspects of the coronavirus response. Please feel free to give me a call on my cell at any time at (b) (6)

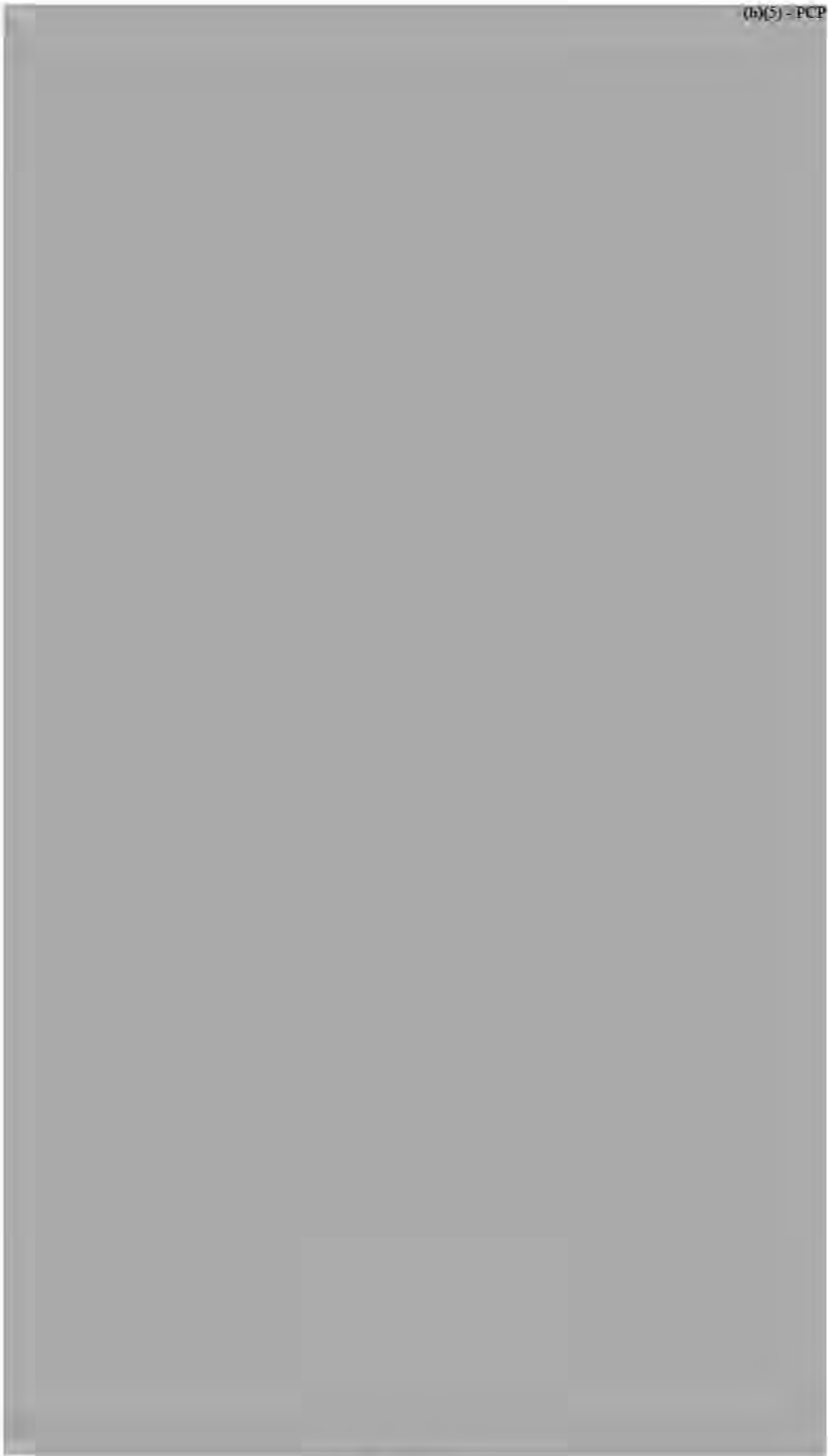
Thanks very much,

Yasmeen Abutaleb
The Washington Post
Health policy reporter
o: 202-334-8387 c: (b) (6)
@yabutaleb7

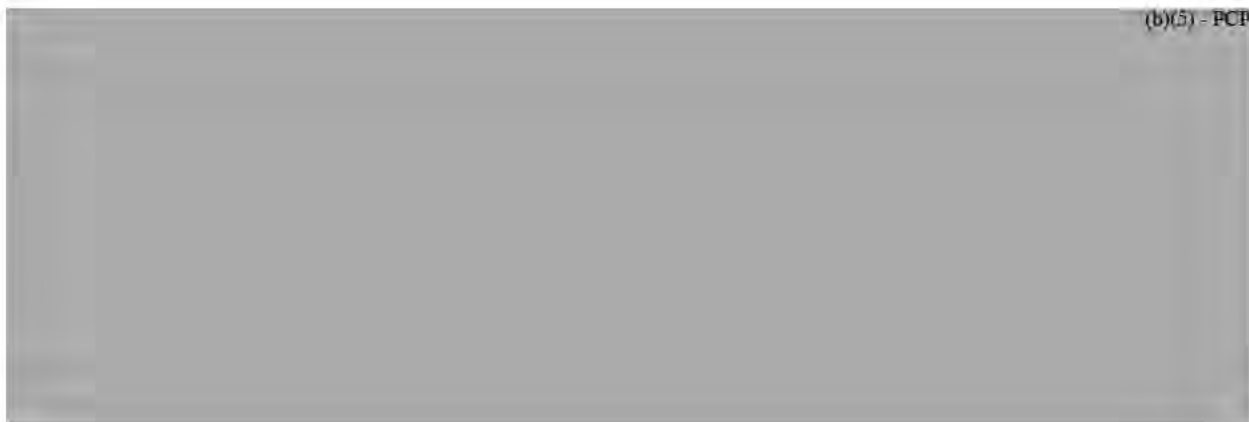
From: (b) (6)
Sent: Tue, 24 Mar 2020 07:47:49 -0400
To: Pottinger, Matthew F. EOP/WHO
Subject: Re: regarding masks and Covid-19

Very good point.

(b)(5) - PCP







From: (b) (6)
Sent: Mon, 23 Mar 2020 15:45:21 -0400
To: Conrad, Patricia (NIH/NIAID) [E]
Subject: Fwd: Media Request: NPR's 1A Show

Begin forwarded message:

From: Amanda Williams <amandaw@wamu.org>
Date: March 23, 2020 at 3:41:06 PM EDT
To: "Fauci, Anthony (NIH/NIAID) [E]" (b) (6)>
Cc: "NIAID NEWS (NIH/NIAID)" <NIAIDNEWS@niaid.nih.gov>
Subject: Media Request: NPR's 1A Show

Hello Dr. Fauci,

I'm a producer with National Public Radio's 1A show and we'd like to invite you to join our program to talk about coronavirus in the near future. We've built our show on answering our 4+ million listeners' questions and we know Americans have a lot of questions for you right now. We don't take live calls, but we do curate input from voicemails and social media.

We would love to have you join us. Please let me know if you are available and interested anytime soon. We are very flexible.

A bit more about 1A: We launched in January 2017 and we're ranked among the top 10 public radio programs on a list that includes Morning Edition, All Things Considered and Marketplace. We reach 4+ million listeners every week and air on more than 365 stations across the country. Our major markets include Chicago, LA, NYC, DC, Atlanta, Boston, Philadelphia, San Francisco, Miami, Houston, Minneapolis and Seattle.

Best,
Amanda

Amanda Williams
Across America Producer
1A, from WAMU and NPR

(b) (6) (c) | @amandwms | the1a.org

From: Fauci, Anthony (NIH/NIAID) [E]
Sent: Mon, 23 Mar 2020 19:32:28 +0000
To: (b) (6)
Cc: (b) (6)
Subject: Re: USA Today/David M. Rubenstein-- Coronavirus hero: Anthony Fauci is a great public servant in a time of great public need
Attachments: image002.jpg

Love you all

On Mar 23, 2020, at 3:07 PM, (b) (6) wrote:

So True!

In a message dated 3/23/2020 2:06:15 PM Eastern Standard Time, (b) (6) writes:

Lots of a very kind and thoughtful and well-earned words of respect coming your way (b) (6)

On Mon, Mar 23, 2020 at 12:35 PM (b) (6) wrote:

That's a very nice piece about you, (b) (6)

I hope you got some rest this weekend. Sending lots of love.

On Sun, Mar 22, 2020 at 6:34 PM Fauci, Anthony (NIH/NIAID) [E] (b) (6) wrote:

Wow. David Rubenstein (b) (6) used to work for him) was really nice to me.

From: Folkers, Greg (NIH/NIAID) [E] <(b) (6)>
Sent: Sunday, March 22, 2020 11:36 AM
Subject: USA Today/David M. Rubenstein-- Coronavirus hero: Anthony Fauci is a great public servant in a time of great public need

Coronavirus hero: Anthony Fauci is a great public servant in a time of great public need

Fauci is the world's leading authority on infectious diseases and the best person in the country to help us deal with the COVID-19 crisis.

David M. Rubenstein

Opinion contributor

Some viewers of the daily White House coronavirus briefings may wonder why everyone increasingly defers to a diminutive, Brooklyn-accented 79-year-old doctor, Tony Fauci.

They do because, as I have learned over many years of talking with and more recently interviewing this man, he is without doubt the world's leading authority on infectious diseases. In any area of human activity or knowledge, there always seems to be one person who is the global gold standard. In the world of infectious diseases that person is Tony Fauci.

So the American people — indeed, people around the globe — should be grateful that Tony has dug into this crisis with the same work-around-the-clock, just-the-facts ma'am style that he has used while serving under and working with six U.S. presidents. He is as apolitical as anyone can be. I have no idea if he is registered with any political party; I suspect though that he is rabidly Independent. His only focus is getting the facts out, providing the best health care treatment and information possible, and saving lives.

A top expert from AIDS to Ebola

Tony Fauci joined the National Institutes of Health in 1968, after completing his medical training at Weill Cornell Medical Center, and he has led the National Institute of Allergy and Infectious Disease since 1984 — 36 years. Hard to believe anyone can run anything that long and still be at the top of his game. But Tony is. During this period, he has dealt with every serious infectious disease challenge — malaria,

Among Tony's best known accomplishments, beyond simply running the institute and training dozens of the world's top infectious disease professionals, has been helping to discover how HIV leads to AIDS and, later, leading the effort to create (at President George W. Bush's direction) the President's Emergency Plan for AIDS Relief (PEPFAR), which has transformed the treatment of HIV/AIDS in Africa, and other parts of the developing world. Millions of lives have been saved by this program alone. More recently, he has been an architect and powerful advocate of President Donald Trump's plan for ending the AIDS epidemic in the U.S. through HIV antiretroviral therapy targeted to disease hotspots.

In his spare time, Tony has been involved with writing or editing more than 1,100 scholarly articles and several textbooks, and, in the process, has become one of the most cited authorities of the entire medical profession.

For these breakthrough activities and his dedicated service (at a government salary) for more than a half century (he worked at NIH for 16 years before assuming his current role), Tony has received, and earned, the Presidential Medal of Freedom and a Lasker Award (called the American Nobel by many).

With this long service and universal acclaim, one might think Tony would let it get to his head, at least a little bit. Not the case, though.

Selfless commitment to public service

He is readily accessible to those who need treatment — he still runs a lab at NIH — or need information. Tony still lives in the same house he bought when he first moved to Washington, and it is there that he and his wife Christine have raised their three talented daughters (though none of them chose to attend medical school).

Until the latest crisis, Tony has often commuted to NIH by Metro, typically after running three miles for his daily exercise. And when he has been invited to make speeches in the Washington area or on Capitol Hill, he invariably turns down a car and driver for the Metro. (This practice has had to change of late for the obvious reasons).

There are, of course, many other dedicated federal servants who also view their commitment to the country and its people over financial rewards. But surely no federal civil servant, in any area, can exceed Tony Fauci's long-term and selfless commitment to this country and the health of its people.

<image002.jpg>

I tried years ago, when Tony was approaching a normal retirement age, to see if he might want after a normal lifetime of federal service, to take some of his considerable skills and knowledge to the private sector. He quickly said no — money did not motivate him, serving the country did. And he stayed at NIH — to the country's good fortune.

If there is any one medical professional who can help the country deal with the COVID-19 crisis, it is Tony Fauci, an example of the best this country has to offer.

He is not a miracle worker. No one is.

But Tony Fauci has the decades of experience needed to understand infectious disease problems and prescribe a treatment that should, in time, provide the requisite comfort, even if, in the short term, the medicine is painful and inconvenient.

David M. Rubenstein is the co-executive chairman of The Carlyle Group.

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(b) (6)

<image002.jpg>





NIH-000275

From: (b) (6)
Sent: Mon, 23 Mar 2020 15:16:17 -0400
To: Barasch, Kimberly (NIH/NIAID) [C]
Cc: Conrad, Patricia (NIH/NIAID) [E]
Subject: Fwd: Meeting on the science of COVID-19, Wed. 3/25, 2 - 5 pm

Please print out for me and have ready in case I do this on Wednesday

Begin forwarded message:

From: "Tromberg, Bruce (NIH/NIBIB) [E]" (b) (6) >
Date: March 23, 2020 at 1:22:18 AM EDT
To: "Collins, Francis (NIH/OD) [E]" (b) (6) >
Cc: "Tabak, Lawrence (NIH/OD) [E]" (b) (6) >, "Fauci, Anthony (NIH/NIAID) [E]" (b) (6) >
Subject: Re: Meeting on the science of COVID-19, Wed. 3/25, 2 - 5 pm

Hi Francis,

Thanks, I'm looking forward to the meeting. Probably not directly relevant to this upcoming discussion, (b) (5)





Best,
Bruce

From: "Collins, Francis (NIH/OD) [E]" (b) (6)
Date: Sunday, March 22, 2020 at 9:38 PM
To: "ICDDIR-L@LIST.NIH.GOV" <ICDDIR-L@LIST.NIH.GOV>
Cc: "Tabak, Lawrence (NIH/OD) [E]" (b) (6) "Wolinetz, Carrie (NIH/OD) [E]" (b) (6), "Anderson, James (NIH/OD) [E]" (b) (6), "Parker, Ashley (NIH/OD) [E]" (b) (6), "McManus, Ayanna (NIH/OD) [E]" (b) (6), "Wood, Gretchen (NIH/OD) [E]" (b) (6)
Subject: Meeting on the science of COVID-19, Wed. 3/25, 2 - 5 pm

Colleagues,

I'm glad to hear that most of you are able to join a three-hour virtual meeting on Wednesday March 25 to discuss scientific opportunities in the effort to conquer the COVID-19 pandemic. While NIAID rightly has the lead in this effort for NIH, and is deeply invested in projects in both their intramural and extramural programs, it's clear that a number of other ICs have creative ideas and a strong motivation to try to help with this global crisis. So this certainly seems like a time where we should gather (virtually of course)


to brainstorm together, led by NIAID, and seek to identify any additional areas of contribution that could be subject to acceleration and/or collaboration.

Hilary Marston recently convened a Deputies meeting on this subject, and ICs were then asked to submit examples last Friday of projects they are pursuing in the COVID-19 space. Those were forwarded from Bob Eisinger to me. I have used those submissions, including a detailed list of NIAID projects, to put together a tentative agenda for Wednesday's meeting. That is attached.



There are admittedly a lot of themes and topics here, so this will require some real discipline in the one-slide presentations. I will try to serve as time-keeper – or maybe I'll ask Larry to do that. ☐☐

All IC Directors are invited to have one or two subject matter experts join them for this virtual discussion.

Ashley Parker  (b) (6) will be helping me with the logistics and will have further instructions about how the log in will work.

Here's the specific follow up request that needs your immediate attention:

1. If your IC is pursuing a highly relevant project that's not listed here, and that you want the group to hear about, please send me that information ASAP.
2. If your IC is on the draft agenda to make a presentation, please submit your one slide (except for NIAID, who gets more) to me and Ashley by COB Tuesday 3/24. That way we can put the whole set together as a single ppt file.

Many thanks! This should provide a welcome respite from the many other tasks we are all facing right now.

Francis

From: Fauci, Anthony (NIH/NIAID) [E]
Sent: Mon, 23 Mar 2020 19:06:06 +0000
Bcc: Aberg, Judith;Adaora Adimora;Grund, Birgit;Glidden, David;Daar, Eric;Erica Hardy;Gandhi, Rajesh Tim,M.D.;Jason Baker;Jeff Lennox;Johnson, Steven C - ID;Kim, Arthur Y.,M.D.;Marla Keller;Tebas, Pablo (NIH);Susan Davis;Susan Swindells;Susanna Naggie;Tien, Phyllis;Amy Dzierba;Mitchell Levy;Laura Evans;Craig Coopersmith;Greg Martin;Uyeki, Timothy M. (CDC/DDID/NCIRD/ID);Walker, Robert (OS/ASPR/BARDA);Sheikh, Virginia (FDA/CDER);Anne Collier;Francis, Joe (Contact NLM/OD-External), (b) (6)
Subject: Invitation to join the HHS Panel on Guidelines for The Management of COVID-19

Dear Colleague,

At the request of the Office of the Secretary, HHS and in conjunction with the White House Task Force we are creating a COVID-19 management guidelines panel to provide frequently updated information to the public regarding the treatment of patients with COVID-19.

This guidance will be an HHS document, will be updated frequently and will be modeled to some degree after the ART guidelines. The Panel will include academicians and clinicians currently caring for persons with COVID-19 and representatives from multiple US government agencies (CDC, BARDA, FDA, VA, DoD) and professional societies. Cliff Lane, M.D. Henry Masur, M.D. and Trip Gulick, M.D. will co-chair, and Alice Pau, Pharm.D. will be the exec. sec. for this new panel. Those of you who are appointed to represent your federal agencies will be ex-officio. Other federal employees will be voting members.

I would like to invite you to be a member of this new Panel based on your expertise. We anticipate that work will begin this week and we hope to be able to put out the first guidance in 1-2 weeks. We appreciate your willingness to join this very important effort and your work in caring for patients during this pandemic.

The first meeting (by teleconference) will be Tuesday, March 24 at 11:00AM EDT. More details will be provided soon.

Thank-you for considering this and for all you are doing during this most challenging time.

Sincerely,

Anthony S. Fauci, MD
Anthony S. Fauci, MD
Director
National Institute of Allergy and Infectious Diseases
Building 31, Room 7A-03
31 Center Drive, MSC 2520
National Institutes of Health
Bethesda, MD 20892-2520

Phone: (b) (6)

FAX: (301) 496-4409

E-mail: (b) (6)

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From: Fauci, Anthony (NIH/NIAID) [E]
Sent: Mon, 23 Mar 2020 18:38:21 +0000
To: (b) (6)
Cc: (b) (6)
Subject: RE: FW: USA Today/David M. Rubenstein-- Coronavirus hero: Anthony Fauci is a great public servant in a time of great public need

Love you all.

Anthony S. Fauci, MD
Director
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From: (b) (6) >
Sent: Monday, March 23, 2020 12:35 PM
To: Fauci, Anthony (NIH/NIAID) [E] (b) (6) >
Cc: (b) (6)
Subject: Re: FW: USA Today/David M. Rubenstein-- Coronavirus hero: Anthony Fauci is a great public servant in a time of great public need

That's a very nice piece about you, (b) (6)

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--

Ali Fauci

From: Fauci, Anthony (NIH/NIAID) [E]
Sent: Mon, 23 Mar 2020 18:14:25 +0000
To: Barry Albertson
Subject: RE: Pooled Smaples

Thanks, Barry.

Anthony S. Fauci, MD
Director
National Institute of Allergy and Infectious Diseases
Building 31, Room 7A-03
31 Center Drive, MSC 2520
National Institutes of Health
Bethesda, MD 20892-2520
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E-mail: (b) (6)

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From: Barry Albertson <barry@fannocreek.com>
Sent: Monday, March 23, 2020 1:03 PM
To: Fauci, Anthony (NIH/NIAID) [E] (b) (6)>
Subject: FW: Pooled Smaples
Importance: High

Hi Tony,

I'm forwarding an email I just sent to Paul Cieslak, MD.....one of the lead docs at the Oregon Health Authority (b) (6); he gives my clinic's Internal Medicine docs an 'ID Update' for my CME Grand Rounds each year) ...with this email note from Dr. David Brandon...hope you remember David....he was with Lynn's & Mort Lipsett's group at The Clinical Center.

...I'd bet a coke you know all about pooled samplingbut wanted to pass it along.

You have no idea how many people tell me that your COVID-19 messages on TV, etc. are top flight, enormously helpful and encouraging for them with the best information, in a sea now of poor information.

Andrew Cuomo is also doing a great job informing all of NY (and the rest of us) about what's going on, and his expectations for the public.

Whatever they're paying you ...it's not enough.

You keep your powder dry, and extra flints in your pocket!

Barry

From: Barry Albertson
Sent: Monday, March 23, 2020 9:49 AM
To: 'Cieslak Paul R'
Subject: Pooled Smamples
Importance: High

Good morning, Paul.

Hope you guys at OHA are holding up OK.

I'm fine, family is fine... (b) (6) is doing lots of telemedicine and seeing actual PEDS patients at Westside Hosp. now a few days a week.

My clinic is still open but pretty quiet... we need to stay open at some level no matter what.

One of my colleagues from the NIH (Dr. David Brandon ...he actually published with Tony Fauci back in the late '70s I believe!)..sent me this email on Saturday morning

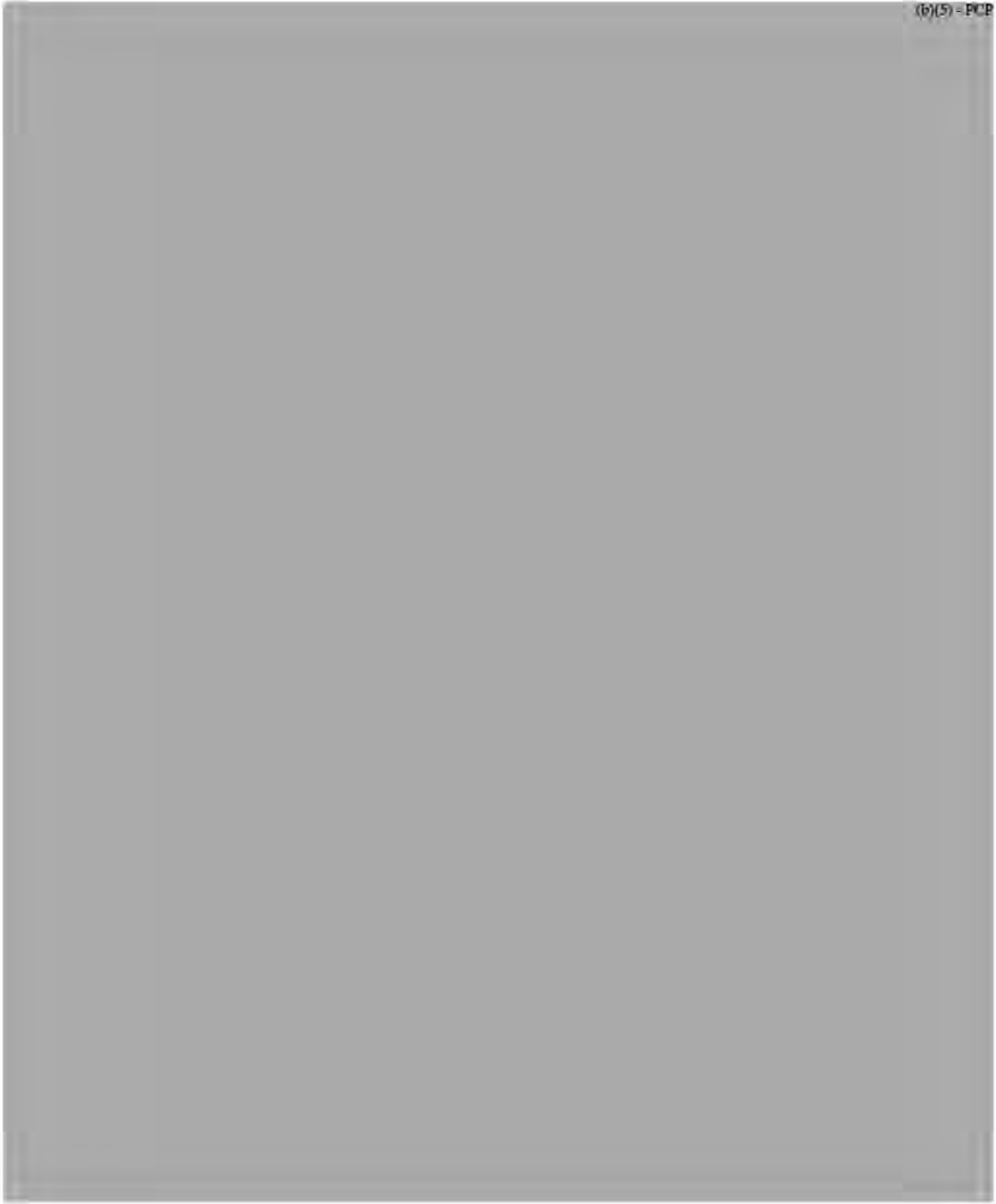
I suspect you all know about pooled sampling,.....David did it at the NIH for a study that I have long forgotten about. ...thought I'd pass it along to you

" I just looked up to see if pooled sampling has been used to detect viruses in the past, and found that it has been used in a number of cases including during the HIV scare. I am including a link <https://www.israel21c.org/israelis-introduce-method-for-accelerated-covid-19-testing/> to an article in the lay press reporting on an RT-PCR based test that uses swabs from 30-60 individuals to determine if the pooled sample has Covid-19. The study was successful and they are developing it to test workers in the front line work places such as hospitals. There is a body of literature using this method for other mass screenings."

Then I heard that CEPHEID will be getting their Genexpert instrument validated to measure COVID-19. Turns out we have one in my Lab, use it for Chlamydia & Gonorrhea (we have lots of patients here needing this testing). But as you so well know, having the instrumentation without the collection swabs/M4 media, etc. is a bit like biking up a blind alley. I would hope we'll hear more about this.

Give me a shout if I can do anything to help you allbest tack for me, I believe, is to stay out of your way!

Barry



From: Fauci, Anthony (NIH/NIAID) [E]
Sent: Mon, 23 Mar 2020 18:09:12 +0000
To: O'Grady, Naomi (NIH/CC/CCMD) [E]
Subject: RE: vent rationing

Naomi:

I am not aware of any efforts on rationing ventilators. They speak of making sure the high priority areas such as NYC get what they need, but there is no talk at this time of "rationing"

Thanks,
Tony

Anthony S. Fauci, MD
Director
National Institute of Allergy and Infectious Diseases
Building 31, Room 7A-03
31 Center Drive, MSC 2520
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From: O'Grady, Naomi (NIH/CC/CCMD) [E] (b) (6)>
Sent: Monday, March 23, 2020 1:53 PM
To: Fauci, Anthony (NIH/NIAID) [E] (b) (6)>
Subject: vent rationing

Hi Tony-

I know you are very busy but I wanted to see if you know of any effort on the part of the federal government to issue guidance on the rationing of ventilators when the time comes? Many of my colleagues in critical care across the country have been asking for some such guidance on a federal level. Both for the guidance itself and to protect themselves from legal liability. Are you aware of any such efforts? Thanks for any insights on this. And thanks for **all** you are doing on the coronavirus effort!
Best regards,
Naomi

Naomi P. O'Grady, MD
Chief, Internal Medicine Services
NIH Clinical Center

From: Fauci, Anthony (NIH/NIAID) [E]
Sent: Mon, 23 Mar 2020 16:48:31 +0000
To: Dan Hurley
Cc: Conrad, Patricia (NIH/NIAID) [E]
Subject: RE: 2 questions from NY Times Mag reporter who interviewed you about EV-D68

Dan:

Thanks for the note. The work on an EV-D68 vaccine will continue. The Coronavirus vaccine research is the highest priority. Both come out of Barney Graham's group in our VRC. Best to call Barney about the degree of possible interference. Books are not on my mind right now.

Thanks,
Tony

Anthony S. Fauci, MD
Director
National Institute of Allergy and Infectious Diseases
Building 31, Room 7A-03
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From: Dan Hurley (b) (6)
Sent: Monday, March 23, 2020 11:46 AM
To: Fauci, Anthony (NIH/NIAID) [E] (b) (6)>
Subject: Re: 2 questions from NY Times Mag reporter who interviewed you about EV-D68

Hi Dr. Fauci and Patty: In addition to the two items mentioned in my original email, the NY Times Magazine is also interested in publishing an interview with Dr. Fauci. Thank you, Dan Hurley

On Thu, Mar 19, 2020 at 6:04 PM Dan Hurley <(b) (6)> wrote:

Hi Dr. Fauci: I interviewed you by telephone a few months ago for an article in the New York Times Magazine about enterovirus D68, the putative causal agent of acute flaccid myelitis. At the time you said that NIAID was working hard on developing a vaccine for EV-D68. I have two questions:

1. Is work on developing a vaccine against the novel coronavirus interrupting or slowing work on EV-D68? Hard to believe it wouldn't have an effect.

2. When things calm down with COVID-19, would you consider allowing me to write a biography about you, or helping you write a memoir? This pandemic has kind of turned you into the face of medical science in the United States. I'm the author of four prior science books, and have profiled countless scientists in the Times, The Atlantic, and elsewhere. I know this is not the time for such things. I just want to put the idea out there. I hope and pray you do not find it offensive for me suggest such a thing at this time of danger and stress.

Let me know about that EV-D68 vaccine if you can. I'm also reaching out to Barney Graham. Thank you, Dan Hurley

From: Fauci, Anthony (NIH/NIAID) [E]
Sent: Mon, 23 Mar 2020 14:51:53 +0000
To: [REDACTED] (b) (6)
Subject: FW: Dinarello Proposal
Attachments: Dinarello Proposal for COVID-19.doc

Cliff:

[REDACTED] (b) (5)

Thanks,
Tony

Anthony S. Fauci, MD
Director
National Institute of Allergy and Infectious Diseases
Building 31, Room 7A-03
31 Center Drive, MSC 2520
National Institutes of Health
Bethesda, MD 20892-2520
Phone: [REDACTED] (b) (6)
FAX: (301) 496-4409
E-mail: [REDACTED] (b) (6)

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From: charles dinarello [REDACTED] (b) (6) >
Sent: Sunday, March 22, 2020 9:31 PM
To: Fauci, Anthony (NIH/NIAID) [E] [REDACTED] (b) (6)
Subject: Dinarello Proposal

[REDACTED] (b) (6)

I watch CNN almost constantly to listen to your impressive wisdom. The world listens to you. Shelly would be so proud of you in this world crisis as he was in the HIV-1 crisis. We will not see each other at the National Academy of Sciences meeting end of April, but hopefully next year. I very much enjoyed hearing you place the anecdotal use of chloroquine in its correct context. "Chloroquine is an awfully blunt tool and an indication of our desperation", Peter Libby wrote me recently. Tony, attached is a proposal [REDACTED] (b) (4)

[REDACTED] I need your guidance. I know you are terribly busy so I am copying Cliff. If there is anyone else who can help me, just forward the attachment.

[REDACTED] (b) (6)

From: Fauci, Anthony (NIH/NIAID) [E]
Sent: Mon, 23 Mar 2020 14:48:07 +0000
To: (b) (6)
Cc: Conrad, Patricia (NIH/NIAID) [E]
Subject: FW: 23-3-2020 FAO Dr Birx and Dr Fauci - Covid-19 Task Force RE:- Favipiravir = Avigan

Please have someone handle.

Anthony S. Fauci, MD
Director
National Institute of Allergy and Infectious Diseases
Building 31, Room 7A-03
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From: (b) (6)
Sent: Monday, March 23, 2020 8:32 AM
To: (b) (6) Fauci, Anthony (NIH/NIAID) [E] (b) (6)>
Cc: NST Rogers (b) (6)
Subject: 23-3-2020 FAO Dr Birx and Dr Fauci - Covid-19 Task Force RE:- Favipiravir = Avigan
Importance: High

23-3-2020

Dear Dr Birx and Dr Fauci,

As promised, sorry about the delay.

Please see below two articles relating to Favipiravir which has the brand name Avigan. This appears to have some beneficial effects with regard to the treatment of Covid-19.

I have also included the Wikipedia for Favpiravir.

Good Luck with regard to managing the epidemic/pandemic.

Yours Sincerely

Nicholas Rogers

Favipiravir

Drug

Description

Favipiravir, also known as T-705, Avigan, or favilavir is an antiviral drug being developed by Toyama Chemical of Japan with activity against many RNA viruses. Like certain other experimental antiviral drugs, it is a pyrazinecarboxamide derivative. [Wikipedia](#)

Formula: C₅H₄FN₃O₂

ChemSpider ID: 431002

ChemSpider ID: 431002

PubChem CID: 492405

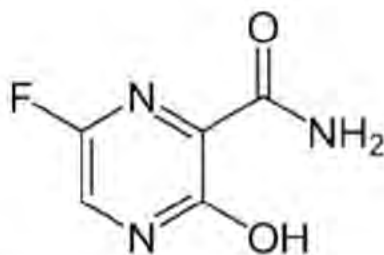
Favipiravir

From Wikipedia, the free encyclopedia

[Jump to navigation](#)[Jump to search](#)

Experimental antiviral drug with activity against many RNA viruses.

Favipiravir



Names

IUPAC name

6-Fluoro-3-hydroxypyrazine-2-carboxamide

Other names

T-705; Avigan; favilavir

Identifiers

CAS Number	• 259793-96-9
3D model (JSmol)	• Interactive image
ChEMBL	• ChEMBL221722
ChemSpider	• 431002
PubChem CID	• 492405
UNII	• EW5GL2X7E0 ✓ ^Y
CompTox Dashboard (EPA)	• DTXSID60948878 ✎

InChI[show]

InChI=1S/C5H4FN3O2/c6-2-1-8-5(11)3(9-2)4(7)10/h1H,(H2,7,10)(H,8,11)

Key: ZCGNOVWYSGBHAU-UHFFFAOYSA-N

InChI=1/C5H4FN3O2/c6-2-1-8-5(11)3(9-2)4(7)10/h1H,(H2,7,10)(H,8,11)

Key: ZCGNOVWYSGBHAU-UHFFFAOYAM

SMILES[show]

Oc1ncc(F)nc1C(=O)N

Properties

Chemical formula	C ₅ H ₄ FN ₃ O ₂
Molar mass	157.104 g·mol ⁻¹

Pharmacology

ATC code	J05AX27 (WHO)
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Except where otherwise noted, data are given for materials in their standard state (at 25 °C [77 °F], 100 kPa).

Infobox references

Favipiravir, also known as **T-705**, **Avigan**, or **favilavir** is an antiviral drug being developed by Toyama Chemical (Fujifilm group) of Japan with activity against many RNA viruses. Like certain other experimental antiviral drugs (T-1105 and T-1106), it is a pyrazinecarboxamide derivative. In experiments conducted in animals Favipiravir has shown activity against influenza viruses, West Nile virus, yellow fever virus, foot-and-mouth disease virus as well as other flaviviruses, arenaviruses, bunyaviruses and alphaviruses.^[1] Activity against enteroviruses^[2] and Rift Valley fever virus has also been demonstrated.^[3] Favipiravir has showed limited efficacy against Zika virus in animal studies, but was less effective than other antivirals such as MK-608.^[4] The agent has also shown some efficacy against rabies,^[5] and has been used experimentally in some humans infected with the virus.^[6]

In February 2020, Favipiravir was being studied in China for experimental treatment of the emergent COVID-19 (novel coronavirus disease).^{[7][8]} On March 17, Chinese officials suggested the drug had been effective in treating COVID in Wuhan and Shenzhen.^{[9][10]}

As of 23 March 2020, it seems that Japan and China have issued an export ban on the substance. Japan and China are the only countries in which favirapir is produced and approved as a medical

compound. Some Chinese pharmaceutical companies assure that export rights are still granted via international diplomatic means by the Chinese Ministry of Industry and Information Technology (MIIT).

[]

Contents

- 1Mechanism of action
- 2Approval status
- 3Ebola virus trials
- 4Coronavirus disease 2019 (COVID-19)
- 5See also
- 6References

Mechanism of action[edit]

The mechanism of its actions is thought to be related to the selective inhibition of viral RNA-dependent RNA polymerase.^[11] Other research suggests that favipiravir induces lethal RNA transversion mutations, producing a nonviable viral phenotype.^[12] Favipiravir is a prodrug that is metabolized to its active form, favipiravir-ribofuranosyl-5'-triphosphate (favipiravir-RTP), available in both oral and intravenous formulations.^{[13][14]} Human hypoxanthine guanine phosphoribosyltransferase (HGPRT) is believed to play a key role in this activation process.^[15] Favipiravir does not inhibit RNA or DNA synthesis in mammalian cells and is not toxic to them.^[1] In 2014, favipiravir was approved in Japan for stockpiling against influenza pandemics.^[16] However, favipiravir has not been shown to be effective in primary human airway cells, casting doubt on its efficacy in influenza treatment.^[17]

Approval status[edit]

In 2014, Japan approved Favipiravir for treating viral strains unresponsive to current antivirals.^[18] Toyama Chemical initially hoped that Avigan would become a new influenza drug that could replace Tamiflu. However, animal experiments show the potential for teratogenic effects on fetuses, and the approval of production by The Ministry of Health, Labor and Welfare was greatly delayed and the production condition is limited only in an emergency in Japan.^[19]

In March 2015, the US Food and Drug Administration completed a Phase III clinical trial studying the safety and efficacy of Favipiravir in the treatment of influenza.^[20]

On March 15, 2020 the drug was approved in China with the name Favilavir for the treatment of influenza.^[21] The drug was also approved for use in clinical trials for treating coronavirus disease 2019 pneumonia.^[21]

On 22 March, 2020 Italy has approved the drug for experimental use against COVID-19 and has begun conducting trials in 3 regions most affected by the disease.^[22] The Italian Pharmaceutical Agency, however, has reminded the public that the existing evidence in support of this drug is scant and preliminary.^[23]

Ebola virus trials[edit]

Some research has been done suggesting that in mouse models Favipiravir may have efficacy against Ebola. Its efficacy against Ebola in humans is unproven.^{[24][25][26]} During the 2014 West Africa Ebola virus outbreak, it was reported that a French nurse who contracted Ebola while volunteering for MSF in Liberia recovered after receiving a course of favipiravir.^[27] A clinical trial investigating the use of favipiravir against Ebola virus disease was started in Guéckédou, Guinea, during December 2014.^[28] Preliminary results showed a decrease in mortality rate in patients with low-to-moderate levels of Ebola virus in the blood, but no effect on patients with high levels of the virus, a group at a higher risk of death.^[29] The trial design has been criticised by Scott Hammer and others for using only historical controls.^[30] The results of this clinical trial were presented in February 2016 at the annual Conference on Retroviruses and Opportunistic Infections (CROI) by Daouda Sissoko^[31] and published on March 1, 2016 in PLOS Medicine.^[32]

Coronavirus disease 2019 (COVID-19)[edit]

On 17 March 2020, Chinese officials suggested that Favipiravir seemed to be effective in treating COVID-19 in Wuhan and Shenzhen.^{[33][34][35]}

A study on 80 patients comparing it to lopinavir/ritonavir found that it significantly reduced viral clearance time to 4 days, compared to 11 for the control group, and that 91.43% of patients had improved CT scans with few side effects.^{[36][37]}

As of 23 March 2020, it seems that Japan and China have issued an export ban on the substance. Japan and China are the only countries in which favirapir is produced and approved as a medical compound. Some Chinese pharmaceutical companies assure that export rights are still granted via international diplomatic means by the Chinese Ministry of Industry and Information Technology (MIIT).^[citation needed]

See also[edit]

- BCX4430
- Brincidofovir
- FGI-106
- JK-05
- REGN-EB3
- TKM-Ebola
- Triazavirin
- ZMapp

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RNA virus antivirals (primarily J05, also S01AD and D06BB)

Hepatitis C NS3/4A • Asunaprevir

protease inhibitors (–previr)	<ul style="list-style-type: none"> • Boceprevir[‡] • Ciluprevir[§] • Danoprevir[†] • Faldaprevir[‡] • Glecaprevir • Grazoprevir • Narlaprevir • Paritaprevir • Simeprevir • Sovaprevir[†] • Telaprevir[‡] • Vaniprevir • Vedroprevir[§] • Voxilaprevir
NS5A inhibitors (–asvir)	<ul style="list-style-type: none"> • Daclatasvir[#] • Elbasvir • Ledipasvir • Odalasvir[†] • Ombitasvir • Pibrentasvir • Ravidasvir[†] • Ruzasvir[†] • Samatasvir[†] • Velpatasvir • Beclabuvir[†] • Dasabuvir[#] • Deleobuvir[§]
NS5BRNA polymerase inhibitors (–buvir)	<ul style="list-style-type: none"> • Filibuvir[§] • GS-6620[§] • Setrobuvir[§] • Sofosbuvir[#] • Radalbuvir[†] • Uprifosbuvir[†] • Elbasvir/grazoprevir • Glecaprevir/pibrentasvir • Ledipasvir/sofosbuvir[#] • Ombitasvir/paritaprevir/ritonavir[#] • Sofosbuvir/daclatasvir • Sofosbuvir/velpatasvir[#] • Sofosbuvir/velpatasvir/voxilaprevir
Combination drugs	
Picornavirus Anti-influenza	<ul style="list-style-type: none"> • <i>viral entry</i>: Pleconaril[†] • Baloxavir marboxil

agents

- Pimodivir[†]
- Umifenovir

- *adamantane derivatives/M2 inhibitors* (Adapromine
- Amantadine
- Rimantadine)

- *neuraminidase inhibitors/release phase* (Oseltamivir[#]
- Zanamivir
- Peramivir, Laninamivir[†])

Interferon

- Interferon alfa 2b
- Peginterferon alfa-2a[#]
- Peginterferon alfa-2b[#]
- EICAR[§]
- Favipiravir
- Galidesivir[†]
- Remdesivir[†]
- Mericitabine[†]
- MK-608[§]
- NITD008[§]
- Moroxydine
- Presatovir[†]
- Ribavirin[#]
- Taribavirin[†]
- Triazavirin

Multiple/genera

I

Multiple/unknown

n

- #WHO-EM
- †Withdrawn from market
- Clinical trials:
 - †Phase III
 - §Never to phase III

show

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Filoviridae

- *Bundibugyo ebolavirus*
- BDBV
- *Reston ebolavirus*
- RESTV

Ebolavirus



Species

- *Sudan ebolavirus*
 - SUDV
- *Tai Forest ebolavirus*
 - TAFV
- *Zaire ebolavirus*
 - EBOV
- 1976 Sudan outbreak
- 1976 Zaire outbreak
- 2013–2016 West African Ebola virus epidemic
 - Timeline
 - Reported cases and deaths
 - Responses
 - United Nations Ebola Response Fund
 - Operation United Assistance
 - in Guinea
 - in Liberia
 - in Mali
 - in Nigeria
 - in Sierra Leone
 - in Spain
 - in the US
 - in the UK
 - Ouse to Ouse Tock
 - Womey massacre

Outbreaks

Drug candidates

- 2014 DR Congo outbreak
- 2017 DR Congo outbreak
- 2018 Équateur, DR Congo outbreak
- Kivu Ebola epidemic
- BCX4430
- Brincidofovir
- DZNep
- Favipiravir
- FGI-103
- FGI-104
- FGI-106
- JK-05
- Lamivudine
- mAb114
- TKM-Ebola^(failed)
- Triazavirin
- ZMapp

		<ul style="list-style-type: none"> • Vaccines <ul style="list-style-type: none"> ○ cAd3-ZEBOV ○ rVSV-ZEBOV • William Close • Jean-Jacques Muyembe-Tamfum • Peter Piot • Selected patients <ul style="list-style-type: none"> ○ Ameyo Adadevoh ○ Kent Brantly ○ Pauline Cafferkey ○ Thomas Eric Duncan ○ Salome Karwah ○ Sheik Umar Khan ○ Matthew Lukwiya ○ Mayinga N'Seka ○ Patrick Sawyer
	Notable people	
	Popular culture	<ul style="list-style-type: none"> • <i>The Hot Zone</i>(1995 book by Richard Preston) • <i>Outbreak</i>(1995 film) • <i>Ebola Syndrome</i>(1996 film) • <i>Executive Orders</i>(1996 novel) • <i>93 Days</i>(2016 film)
	Miscellaneous	<ul style="list-style-type: none"> • Ebola virus disease • Ebola virus disease treatment research • Ebola River • <i>Marburg marburgvirus</i>
	Species	<ul style="list-style-type: none"> ○ MARV ○ RAVV
	Outbreaks	<ul style="list-style-type: none"> • 1967 Marburg virus outbreak in West Germany • 2017 Uganda Marburg virus outbreak
<i>Marburgvirus</i>	Drug candidates	<ul style="list-style-type: none"> • BCX4430 • FGI-103 • FGI-106
	Popular culture	<ul style="list-style-type: none"> • <i>The Hot Zone</i>(1995 book)
	Miscellaneous	<ul style="list-style-type: none"> • Marburg virus disease • Marburg
<i>Cuevavirus</i>	Species	<ul style="list-style-type: none"> • <i>Lloviu cuevavirus</i> (LLOV)
<i>Dianlovirus</i>	Species	<ul style="list-style-type: none"> • Mengla virus (MLAV)
	<ul style="list-style-type: none"> •  Commons •  Wikispecies 	

Retrieved from "<https://en.wikipedia.org/w/index.php?title=Favipiravir&oldid=946951189>"

Categories:

- Anti-RNA virus drugs

- Pyrazines
 - Carboxamides
 - Organofluorides
 - Ebola
 - Hydroxyarenes
 - Experimental drugs
-

<https://www.theguardian.com/world/2020/mar/18/japanese-flu-drug-clearly-effective-in-treating-coronavirus-says-china>

Guardian Newspaper article dated 18 March 2020 regarding Favipiravir = Avigan (which is the Brand Name) with URL <https://www.theguardian.com/world/2020/mar/18/japanese-flu-drug-clearly-effective-in-treating-coronavirus-says-china>

Japanese flu drug 'clearly effective' in treating coronavirus, says China

Patients given the medicine in Shenzhen turned negative in a median of four days Photograph: John Minchillo/AP

Medical authorities in China have said a drug used in Japan to treat new strains of influenza appeared to be effective in coronavirus patients, Japanese media said on Wednesday.

Zhang Xinmin, an official at China's science and technology ministry, said favipiravir, developed by a subsidiary of Fujifilm, had produced encouraging outcomes in clinical trials in Wuhan and Shenzhen involving 340 patients.

"It has a high degree of safety and is clearly effective in treatment," Zhang told reporters on Tuesday.

Patients who were given the medicine in Shenzhen turned negative for the virus after a median of four days after becoming positive, compared with a median of 11 days for those who were not treated with the drug, public broadcaster NHK said.

In addition, X-rays confirmed improvements in lung condition in about 91% of the patients who were treated with favipiravir, compared to 62% of those without the drug.

Coronavirus: the week explained - our expert correspondents put a week's worth developments in context in one email newsletter

Fujifilm Toyama Chemical, which developed the drug – also known as Avigan – in 2014, has declined to comment on the claims.

Shares in the firm surged on Wednesday following Zhang's comments, closing the morning up 14.7% at 5,207 yen, having briefly hit their daily limit high of 5,238 yen.

Doctors in Japan are using the same drug in clinical studies on coronavirus patients with mild to moderate symptoms, hoping it will prevent the virus from multiplying in patients.

But a Japanese health ministry source suggested the drug was not as effective in people with more severe symptoms. “We’ve given Avigan to 70 to 80 people, but it doesn’t seem to work that well when the virus has already multiplied,” the source told the Mainichi Shimbun.

The same limitations had been identified in studies involving coronavirus patients using a combination of the HIV antiretrovirals lopinavir and ritonavir, the source added.

In 2016, the Japanese government supplied favipiravir as an emergency aid to counter the Ebola virus outbreak in Guinea.

Favipiravir would need government approval for full-scale use on Covid-19 patients, since it was originally intended to treat flu.

A health official told the Mainichi the drug could be approved as early as May. “But if the results of clinical research are delayed, approval could also be delayed.”

<https://asia.nikkei.com/Business/Pharmaceuticals/China-says-Japan-developed-drug-Avigan-works-against-coronavirus2>

Nikkei Asian Review article dated 18th March 2020 regarding Favipiravir = Avigan (which is the Brand Name) with URL <https://asia.nikkei.com/Business/Pharmaceuticals/China-says-Japan-developed-drug-Avigan-works-against-coronavirus2>

China says Japan-developed flu drug works against coronavirus - . Fujifilm Toyoma Chemical developed favipiravir, sold under the brand Avigan.

Coronavirus

China says Japan-developed flu drug works against coronavirus

Fujifilm group member's Avigan to be recommended for treatment

SHIN WATANABE, Nikkei staff writer March 18, 2020 07:50 JST



The Chinese government has been conducting clinical research on a treatment for COVID-19.

© AP



DALIAN, China -- An influenza medicine developed by a Fujifilm Holdings group member is effective against the novel coronavirus, the Chinese government said Tuesday.

The government plans to officially recommend the drug's use for treatment. Fujifilm Toyoma Chemical developed favipiravir, sold under the brand Avigan.

"It has a high degree of safety and is clearly effective in treatment," said Zhang Xinmin, director of the science ministry's China National Center for Biotechnology Development, in a news conference. Fujifilm Toyoma Chemical developed the drug in 2014, and it has been provided to patients in Japan as treatment for the novel coronavirus since February.

Zhejiang Hisun Pharmaceutical signed a patent-licensing agreement for favipiravir with Fujifilm in 2016. The drugmaker received clearance to produce the drug from Chinese authorities in February and can ramp up output of a generic version.

The clinical trial was conducted at hospitals in Wuhan and Shenzhen, with 200 patients participating. Test results for those receiving the drug turned negative in a shorter period, and their pneumonia symptoms improved at a higher rate.

From: Fauci, Anthony (NIH/NIAID) [E]
Sent: Mon, 23 Mar 2020 14:47:18 +0000
To: Beigel, John (NIH) [E]
Cc: [REDACTED] (b) (6)
Subject: FW: IFN treatment for COVID-19
Attachments: Manuscript and Supplement.pdf

John:

Please handle this.

Thanks,

Tony

Anthony S. Fauci, MD
Director
National Institute of Allergy and Infectious Diseases
Building 31, Room 7A-03
31 Center Drive, MSC 2520
National Institutes of Health
Bethesda, MD 20892-2520
Phone: [REDACTED] (b) (6)
FAX: (301) 496-4409
E-mail: [REDACTED] (b) (6)

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From: Young, Howard (NIH/NCI) [E] [REDACTED] (b) (6)>
Sent: Monday, March 23, 2020 9:57 AM
To: Fauci, Anthony (NIH/NIAID) [E] [REDACTED] (b) (6); Beigel, John (NIH) [E]
[REDACTED] (b) (6)>
Cc: Eleanor Fish [REDACTED] (b) (6)>
Subject: IFN treatment for COVID-19

Dear Drs. Fauci and Beigel

Dr. Fish has asked me to share with you this manuscript that has been submitted [REDACTED] (b) (4)

[REDACTED]

Regards,
Howard

From: Eleanor Fish [REDACTED] (b) (6) >
Sent: Saturday, March 21, 2020 5:25 PM
To: Young, Howard (NIH/NCI) [E] [REDACTED] (b) (6)
Subject: IFN treatment for COVID-19

Dear Howard,
I wanted to share with you our findings from a clinical study [REDACTED] (b) (4)

[REDACTED]

Please keep this confidential.
The manuscript has been submitted for consideration for publication.

*Eleanor N. Fish, PhD, FAAS
UHN Emerita
Professor & Associate Chair
International Initiatives & Collaborations
Dept. Immunology, University of Toronto*

From: Fauci, Anthony (NIH/NIAID) [E]
Sent: Mon, 23 Mar 2020 13:40:42 +0000
To: Cassetti, Cristina (NIH/NIAID) [E]
Subject: FW:

Please handle.

Anthony S. Fauci, MD
Director
National Institute of Allergy and Infectious Diseases
Building 31, Room 7A-03
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From: Schur, Peter H., M.D. <(b) (6)>
Sent: Monday, March 23, 2020 9:33 AM
To: Fauci, Anthony (NIH/NIAID) [E] (b) (6)
Subject:

Dear Dr Fauci

I am looking for help and informagtion.

I am still working fulltime at Brigham and Women's Hospital (BWH) as a Rheumatologist--although with the pandemic I am currently working from home

I am also the Medical Director of the BWH Clinical Immunology Lab.

We are looking for a company that can provide us with kits to assess IgG and IgM antibodies to COVID-19. Can you, or one of your staff help us find those companies

When I was at WRAIR many years ago (b) (6) they had a walk in -70C freezer with

(b) (4)

Thank you for your help. Applaud what you are doing on TV. Applaud what you are doing for this pandemic

Trust you are well

Peter H Schur MD
Senior Physician Brigham and Women's Hospital
Professor of Medicine Harvard Medical School
Boston MA
Tel: 617-732-5350

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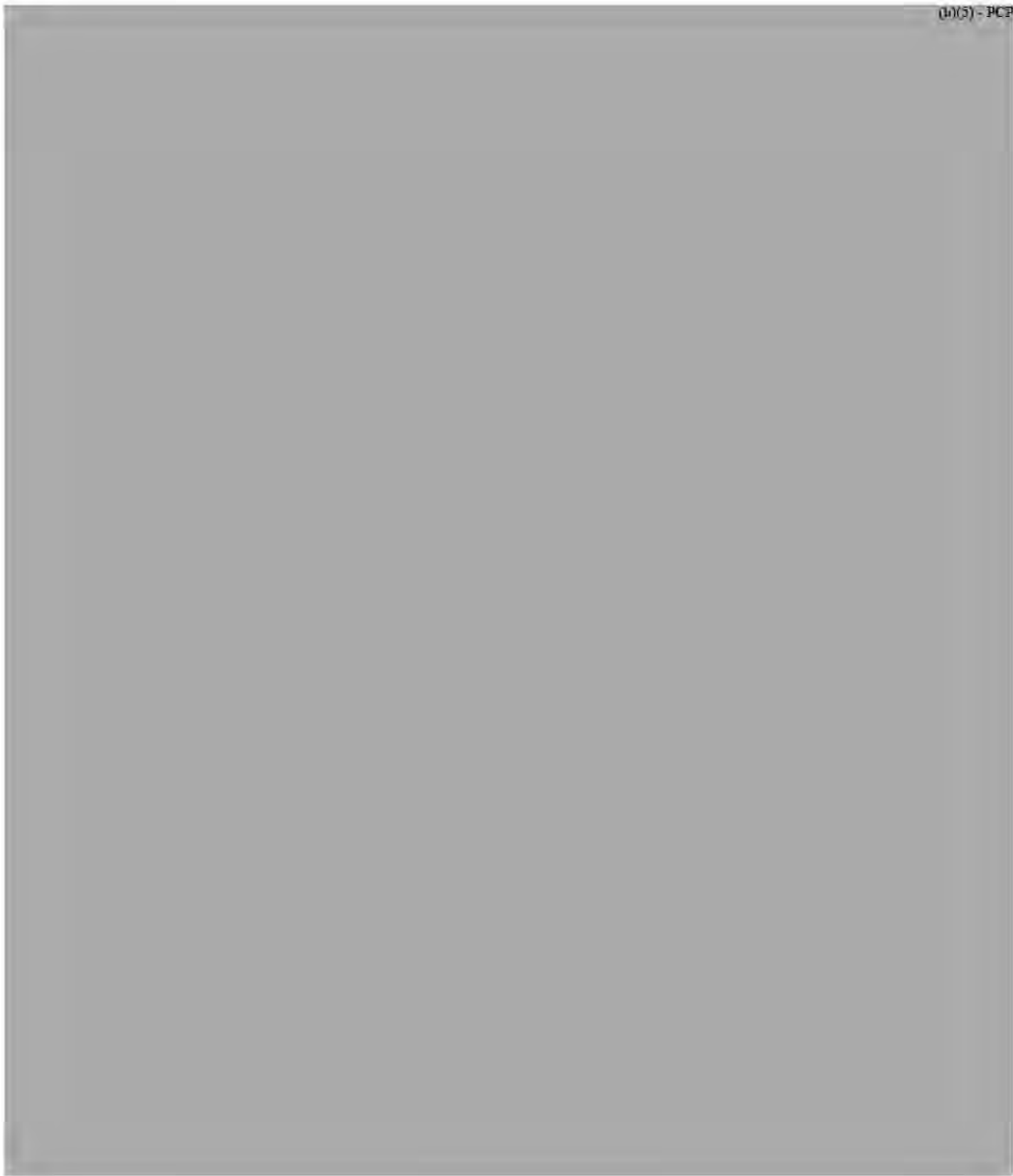
From: Fauci, Anthony (NIH/NIAID) [E]
Sent: Mon, 23 Mar 2020 13:02:15 +0000
To: Stephen Hahn
Subject: FW: Quick Review: Press Conference Open - March 23
Attachments: Press Conference Open - March 23 - with Fauci edits.docx

Here it is

Anthony S. Fauci, MD
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(b)(5) - PCP



From: Fauci, Anthony (NIH/NIAID) [E]
Sent: Thu, 2 Apr 2020 22:05:53 +0000
To: (b) (6)
Subject: RE: Greetings from your former employee (UNCLASSIFIED)

(b) (6)

Many thanks for your kind note. I hope that all is well with you.
Best regards,
Tony

-----Original Message-----

From: (b) (6) (b) (6)
Sent: Thursday, April 2, 2020 4:59 PM
To: Fauci, Anthony (NIH/NIAID) [E] (b) (6)
Subject: Greetings from your former employee (UNCLASSIFIED)

CLASSIFICATION: UNCLASSIFIED

Dear Dr. Fauci,

I was in touch with (b) (6) back in January and he said you all were underwater there with coronavirus. I can only imagine how much busier you are now, with COVID-19 taking hold across America.

We (myself, husband, and family) have followed the news since the start. In watching, I was reminded of the old sign we had posted on the printer between (b) (6) and my desk for quite some time that read, "Keep Calm and Trust Fauci". I can't recall whether we put that up during the Ebola outbreak or Zika, but never has it been more true. We never cease to be amazed at how well you carry yourself, respond to politically loaded questions, and get the truth out in such a way that any viewer can understand.

You also never seem to frustrate from answering the same questions which I am sure must get old. There has been one question I have yet to hear asked however, Who is cutting your hair? I know you used to have a regular gal but with social distancing, we are speculating that perhaps there is a White House barber you use. Of course we know how busy you are so don't expect a reply, just wanted to throw you a question you may not have had yet. I am also wondering how your office tree is doing. How many bungee cords are supporting it these days?

We have found plenty of reasons to smile with the whole family getting in on what we're dubbing the ASF #1 Fan Club. From memes, to cartoons, to t-shirts, we are all here supporting you and wishing for your continued health and success. I am attaching some of our shenanigans in hopes you get a kick out of it and to provide some comic relief.

You've been thanked over and over but I must say it too. Thank you, Dr. Fauci, for all that you do. And thank you to the staff behind the scenes that makes it happen. (b) (6) is no doubt just as busy as you as always (b) (6), are you reading this email? Hi!). When we see you at all hours from the NIH studio and your office, I think of the media staff support you receive, and especially assistance from (b) (6) for helping the ship run smoothly while you are constantly engaged, (b) (6) and your family, the list goes on. Thank you and thanks to your team.

Best wishes,

(b) (6)

(b) (6)

Directorate of Human Resources
USAG Fort Detrick

CLASSIFICATION: UNCLASSIFIED

From: Eisinger, Robert (NIH/NIAID) [E] on behalf of Fauci, Anthony (NIH/NIAID) [E]
Sent: Fri, 27 Mar 2020 11:23:56 +0000
To: Fauci, Anthony (NIH/NIAID) [E]
Subject: FW: Reaching out about partnerships and COVID-19. // confidential

The email below is from Maria Freire.

Robert W. Eisinger, Ph.D.
Special Assistant for Scientific Projects
Immediate Office of the Director
National Institute of Allergy and Infectious Diseases
National Institutes of Health
31 Center Drive, Room 7A-03
Bethesda MD 20892
Telephone: (b) (6)
Email: (b) (6)

From: Freire, Maria (FNIH) [T] (b) (6)
Sent: Friday, March 27, 2020 6:03 AM
To: Collins, Francis (NIH/OD) [E] (b) (6); Wholley, David (FNIH) [T] (b) (6) >
Cc: Fauci, Anthony (NIH/NIAID) [E] (b) (6) >; Lane, Cliff (NIH/NIAID) [E] (b) (6) >
Subject: Re: Reaching out about partnerships and COVID-19. // confidential

Yes, quite a note. It is good to see such willingness to pitch in and the things J&J is doing. Let us know what he says. We stand ready to help. Best, M.

From: "Collins, Francis (NIH/OD) [E]" (b) (6) >
Date: Friday, March 27, 2020 at 4:37:15 AM
To: "Wholley, David (FNIH) [T]" <(b) (6) >
Cc: "Fauci, Anthony (NIH/NIAID) [E]" <(b) (6) >, "Lane, Cliff (NIH/NIAID) [E]" (b) (6) >, "Freire, Maria (FNIH) [T]" (b) (6)
Subject: FW: Reaching out about partnerships and COVID-19. // confidential

Hi David,

Quite a message from Paul below. He seems open to the idea of a virtual meeting, to see what collaborative efforts might be most important. I'll try to speak with him today or tomorrow.

Francis

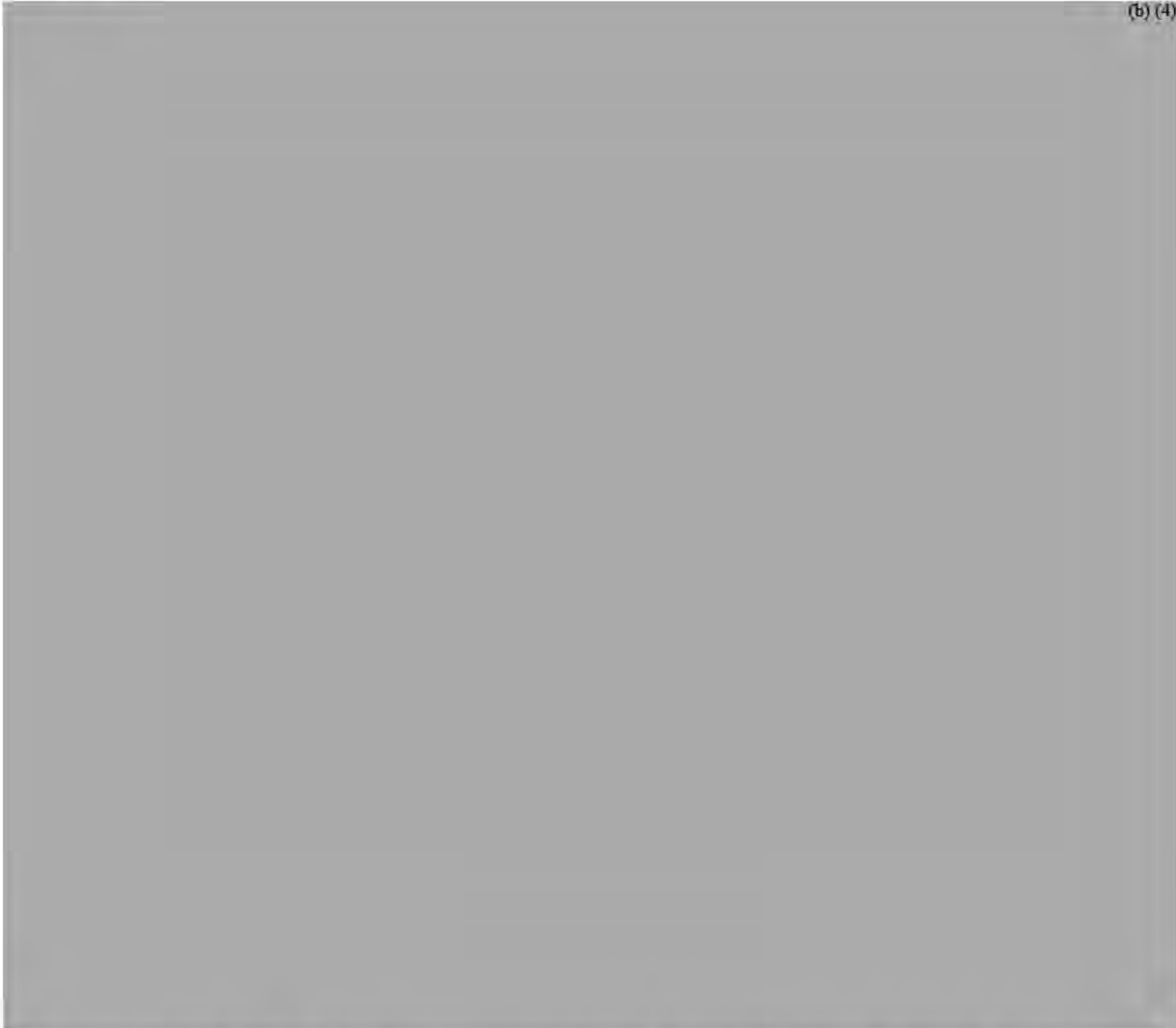
From: Stoffels, Paul [JJCUS] (b) (6) >
Sent: Friday, March 27, 2020 3:54 AM

To: Collins, Francis (NIH/OD) [E] (b) (6)

Cc: Castillejos, Carlos [JJCUS] (b) (6)

Subject: Re: Reaching out about partnerships and COVID-19. // confidential

Francis,



Lots to talk about. Happy to find a productive way to contribute in the discussion you are planning to have.

we can talk this afternoon US time or over the weekend.
I'm working (b) (6) at the moment.

Carlos can provide more information on the (b) (6) if you want.

Best regards,

Paul

Sent from my iPad

On Mar 27, 2020, at 1:37 AM, Collins, Francis (NIH/OD) [E] (b) (6) > wrote:

WARNING: This email originated from outside the company. Do not click on links unless you recognize the sender and have confidence the content is safe. If you have concerns about this email, send it as an attachment to 'SuspiciousEmail@ITS.JNJ.COM'.

Hi again Paul,

One more question – is the pharma collaboration mentioned in the BioCentury story below the same thing as the Gates COVID Therapeutic Accelerator Program? Or is this something different? I'm just trying to understand the landscape.

Best, Francis

Pharmas on one page with action plan to solve COVID-19 together
BIOCENTURY IS PROVIDING THIS STORY FOR FREE GIVEN THE URGENT NEED FOR INFORMATION ABOUT THE COVID-19 CRISIS.
BY C. SIMONE FISHBURN, EDITOR IN CHIEF | MAR 25, 2020 | 9:17 PM EDT
A grand-scale behind-the-scenes effort by the pharmaceutical companies is under way to expedite the creation of therapies and vaccines to treat COVID-19.

According to the participants who spoke with BioCentury under conditions of anonymity, R&D heads from at least 10 companies have been gathering several times a week, setting in motion an action plan to use their top talent in different disciplines to produce an industry-wide response, the likes of which haven't been seen since the private sector's coordinated contribution during World War II.

Regulatory heads and manufacturing heads have been holding meetings as well, coordinating to minimize duplication of effort, streamline work and advance efficient testing of compounds and vaccines.

The R&D group is creating working principles to accelerate new COVID-19 therapies and vaccines agnostic to their market potential, eliminating bureaucratic and technical or scientific barriers, and focusing on filling gaps not adequately filled by other initiatives and which the consortium is uniquely suited to address.

The pharma group's leaders also intend to offer resources to biotechs and academic groups pursuing countermeasures who may not want to join the effort but could benefit from expert guidance.

Flying the plane as they build it, the collaborators intend to create a clearing house of ideas for testing of molecules and vaccines, with working groups to vet the ideas and expedite testing on the most promising via clinical or preclinical testing.

According to the participants who spoke to BioCentury, the structure will probably evolve over time. Currently, the model involves five working groups, for clinical phase repurposing, novel small molecule antivirals, novel antibodies, preventive vaccines and preclinical repurposing. Each will be headed by a pharma R&D executive and will be responsible for prioritizing potential compounds and specifying actions.

Two platform groups will integrate across modalities: a clinical trial acceleration group and a data sharing group.

"This is not a time to think about proprietary information or IP or margins. We need to break down the barriers and solve the problem," said one participant involved in the consortium.

From: Collins, Francis (NIH/OD) [E]
Sent: Thursday, March 26, 2020 4:25 PM
To: Stoffels, Paul [JJCUS] (b) (6) >
Subject: RE: Reaching out about partnerships and COVID-19

Hi Paul,

I have done some work on the idea of an "AMP like" COVID project. As I mentioned, Mikael Dolsten has been quite enthusiastic. For FDA, Peter Marks, Janet Woodcock, and Steve Hahn were all extremely positive about this opportunity for a shared consideration about priorities. Tony Fauci and his team are totally in favor, and the FNIH (David Wholley and Maria Freire) stands ready to serve as convener. I thought the first step would be a 90 to 120-minute virtual meeting – hopefully next week. Attached is a draft precis of what this might look like; I have left out the roster because that is very much a work in progress.

Meanwhile I saw reports that there are related partnership discussions going on amongst pharmas: <https://www.globenewswire.com/news-release/2020/03/26/2006713/0/en/Novartis-and-life-sciences-companies-commit-expertise-and-assets-to-the-fight-against-COVID-19-pandemic-alongside-Bill-Melinda-Gates-Foundation.html>

I am wondering how this might all fit together.

Do you have a few minutes to speak with me about this? I'm at (b) (6), and I'd greatly value your advice. Just let me know when you might be able to call, so that I'm not in the midst of a Zoom meeting.

Best, Francis

From: Stoffels, Paul [JJCUS] (b) (6) >
Sent: Tuesday, March 24, 2020 12:58 PM
To: Collins, Francis (NIH/OD) [E] (b) (6)
Subject: Re: Reaching out about partnerships and COVID-19

Absolutely worthwhile. I will write an email in the next hours.
(b) (4).

Paul

Verstuurd vanaf mijn iPhone

Op 24 mrt. 2020 om 17:55 heeft Collins, Francis (NIH/OD) [E] (b) (6) > het volgende geschreven:

Hey again Paul,

Really hoping to hear your thoughts on this proposal. FDA is highly enthusiastic. Dolsten is in. Other pharma R&D Chiefs that would be most helpful? Jay Bradner? John Reed? Roger Perlmutter?

Thanks, Francis

From: Collins, Francis (NIH/OD) [E]
Sent: Monday, March 23, 2020 5:17 PM
To: Stoffels, Paul (b) (6) >
Subject: Reaching out about partnerships and COVID-19

Dear Paul,

I've been thinking that this is a time where we ought to have the best and brightest minds from industry, NIH, academia, and FDA around the same table to identify ways that we can move the coronavirus agenda forward to life-saving products as quickly as possible. Several pharmas and biotechs have been reaching out to NIH to identify viral assays and animal models that can

be run in a BSL-3 facility. Other similar contacts I've had with pharma and biotech tell me that there is a high degree of interest and willingness to combine forces at this time of crisis.

This isn't exactly a precise recipe for AMP-COVID, but it has some of the same flavor. Would it be useful for FNIH to convene a virtual meeting with a few heads of R&D (hopefully you; Mikael Dolsten has already expressed enthusiasm; and I'd be interested in your suggestions of others), FDA (Marks and Woodcock), leaders from NIAID and a few other NIH Institutes with equity in this space. We might be able to make a short list of catalytic actions that neither sector can do optimally right now, but together we can do rapidly.

The focus would be on therapeutics and vaccines. But I can imagine a separate session on diagnostics.

Does this sound worthwhile to you?

Thanks, I always value your advice and partnership.

Francis

From: Fauci, Anthony (NIH/NIAD) [E]
Sent: Thu, 2 Apr 2020 10:58:08 +0000
To: Mascola, John (NIH/VRC) [E]
Subject: FW: Secretary's Medical Countermeasure Advisory Panel

As per our discussion.

From: Kadlec, Robert (OS/ASPR/IO) (b) (6) >
Sent: Thursday, April 2, 2020 6:46 AM
To: Bright, Rick (OS/ASPR/BARDA) (b) (6); Disbrow, Gary (OS/ASPR/BARDA) <(b) (6)>; Lambert, Linda (OS/ASPR/BARDA) (b) (6)
Cc: Shuy, Bryan (OS/ASPR/IO) (b) (6) >; Harrison, Brian (HHS/IOS) (b) (6); Hassell, David (Chris) (OS/ASPR/IO) (b) (6) >
Subject: Secretary's Medical Countermeasure Advisory Panel
Importance: High

Rick, Gary and Linda:

The Secretary has directed me to establish a HHS Senior Advisory Panel of key HHS Operating Divisions(NIH, CDC & FDA) to include head of agencies or their designees to oversee and provide recommendations to the Secretary concerning the development and procurement medical countermeasures (MCM), (vaccines, therapeutics, diagnostics and devices). In meeting this directive, I have asked Dr. Chris Hassell to organize and serve as the intermediary to schedule and coordinate. It is the intent to hold the first virtual meeting of this panel Sunday, 4 April time TBD. The frequency of further meetings will be determined at the inaugural meeting.

The Agenda should include :

- Overall COVID-19 Strategy & Plan (5 min)
- Activities to Date (e.g. industry outreach, RFP BAA etc.) (5 min)
- High level overview of current MCM portfolio (5 min)
- Detailed briefing of current vaccine technical development efforts, timeline and costs (30 min)
- Discussion by participants (30 min)

I ask that the materials for this meeting be submitted by noon April 3 to the APSR IO to be reviewed and be distributed to the Panel membership by noon Saturday April 4. Thank you

Bob

From: Fauci, Anthony (NIH/NIAID) [E]
Sent: Tue, 31 Mar 2020 01:57:13 +0000
To: Kavesh, William
Subject: RE: Medical staff need COVID-19 NIH survival data on N-95 respirators to help alleviate shortage

Dr. Kavesh:

Thanks for your note. This issue is now being actively discussed at the Task Force meetings. No guarantee, but I believe that there will be movement in that direction.

Best regards,

Tony

From: Kavesh, William <[REDACTED] (b) (6)>
Sent: Monday, March 30, 2020 5:10 PM
To: Fauci, Anthony (NIH/NIAID) [E] <[REDACTED] (b) (6)>
Subject: Medical staff need COVID-19 NIH survival data on N-95 respirators to help alleviate shortage

Dear Dr. Fauci,

The biggest concern of my hospital colleagues is the shortage of protective masks. If any research is being done that might drive safe reuse of N-95 respirators, no one I know has seen it. These should be simple studies to do.

If the virus is shown to die within a few days and moisture dries up, then the number of masks needing disposal could drop drastically.

In that situation, each provider at risk could be given five N-95 masks, one for each day of the week. The provider would wear the N-95 mask for one working day, say Monday, and then place it into a paper bag in a secure location. The provider would not use that mask again until the following Monday, ie seven days later.

The only question, then, would be: how many times can this be repeated? Will the mask lose any protective qualities over time?

Please assign someone to do these studies soon.

I'm also very pleased that our national leaders now seem to be listening to you more closely.

Thank you for your efforts.

William Kavesh MD, MPH
CMC Philadelphia VA Medical Center

From: Fauci, Anthony (NIH/NIAID) [E]
Sent: Tue, 24 Mar 2020 15:26:47 +0000
To: Gottlieb, Lawrence A.
Subject: RE: Support

Many thanks!

Anthony S. Fauci, MD
Director
National Institute of Allergy and Infectious Diseases
Building 31, Room 7A-03
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Bethesda, MD 20892-2520
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E-mail: (b) (6)

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From: Gottlieb, Lawrence A. (b) (6)
Sent: Tuesday, March 24, 2020 11:19 AM
To: Fauci, Anthony (NIH/NIAID) [E] (b) (6)>
Subject: Support

Dr. Fauci,

Just want to express my support for your indefatigable efforts to thwart the spread of the Coronavirus. Many, many years ago, I was a lab assistant for Dr. Edward L. Kuff and Dr. Karen Lueders, at NCI in building 37!!! Bravo for all you are doing.

Lawrence Gottlieb, PMP, MBA, COR, FAC/PPM III
Senior IT Project Manager
Enterprise Portfolio Management Division
Office of Information & Technology
US Department of Veterans Affairs
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Washington, DC 20420
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Office: (b) (6)
Cell: (b) (6)

“Alea iacta est” - Caesar



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