

**Remarks to the Senate HELP committee on the reauthorization of the Pandemics and All-Hazards
Preparedness Act (PAHPA)**

Marty Makary, M.D., M.P.H.
Professor at Johns Hopkins University School of Medicine
Professor, by courtesy, Johns Hopkins Carey Business School
Johns Hopkins University, Baltimore Maryland
Speaking on behalf of myself (not Johns Hopkins University)

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Chairman Sanders, Ranking member Cassidy, members of the committee, thank you for the invitation to present.

Congress should avoid the false narrative that insufficient federal funding was to blame for the country's pandemic response. In fact, it was a case study in bureaucratic failure.

One Johns Hopkins student developed a Covid tracker that the CDC, with its 21,000 employees, was unable to create. Was the CDC understaffed? Did it need 25,000 employees to make a website for the world to track the pandemic? No, the CDC was mired in bureaucracy.

More tragic, the NIH, with a \$42 billion budget, failed to conduct basic clinical research in a timely fashion. Critical scientific questions went unanswered—questions that could have been answered with one week of clinical study, like:

- Does Covid primarily spread from touching or is it airborne?
- When is the peak day of viral shedding and contagion?
- How long should you quarantine?
- Do masks work?

Leaving many basic scientific questions unanswered for half a year or more, public health officials ruled by opinion in lieu of conducting or funding clinical research quickly.

In July, 2020, Dr. Fauci told the American Federation of Teachers president at a public event that teachers should wear goggles and gloves. He has since said that we didn't know back then because we didn't have the science. But he controlled a \$6 billion research budget at NIAID. Did NIAID need \$7 billion to find out that Covid was airborne? Did he need an additional \$7 billion to tell us if cloth masks on toddlers and 50 million children for 2 years is effective?

Regardless of one's political affiliation, in the absence of good scientific evidence, doctors and the public were flying blind. What filled the void were opinions. That's how Covid became the most political pandemic in U.S. history.

My Johns Hopkins research team went back and found that in 2020, the year the pandemic hit the U.S., the NIH spent 2.2-times more money on aging research than it did on Covid research. I'm all for aging research, especially as I get older, but not when 3,000 Americans are dying everyday. Our study, published in BMJ, also found that when the NIH made a decision to fund a Covid research study, it took them 5 months to actually send the money to the researchers to start the research. In short, the gov't

failed to pivot, not because they didn't have enough resources, but because of a rusty and bloated bureaucracy.

Ironically, while the U.S. failed to fund basic clinical research on the big Covid questions, we were funding labs overseas to engage in the dangerous business of virus hunting, sending people to remote uninhabited rainforests and caves to obtain exotic viruses and bring them to labs in highly populated cities of 8-10 million people—the population of Wuhan. There are at least a million different viruses in the world and a small fraction, roughly fewer than 1%, infect humans. Why is the U.S. funding this dangerous work? The promise of virus hunters that they could use this information to predict future pandemic was a fallacy. It's never happened and never will. We don't need A.I. to prepare for future pandemics, we just need I.

The U.S. needs a rapid response team to conduct or fund clinical research to guide pandemic responses, so we're not simply following opinions.