# NATIONAL VETERINARY LABORATORY

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# NEWSLETTER


## Science, Veterinary Medicine, Medicine and Our Society are Under Attack!

## Anti-Science RFK, Jr Attacks CDC, HHS, Sound Science and Vaccines? ©


**Evelyn E. Zuckerman, Editor** **Spring 2025** **Vol. 24, Number 2**


## In This Issue:

The Spring 2025 issue of the NVL Newsletter will unfortunately present the massive disruption of American life, within a short few weeks, of the new Trump administration. I will present the facts of the science and damage done to veterinary (avian flu) and medical programs (COVID-19, seasonal flu, avian flu and vaccines) that have been in place for years through multiple presidents from both parties. As I finish this newsletter, I note that today, March 11, 2025, is the 5th anniversary of the WHO declaration of COVID-19 as a world-wide pandemic.[1] So far this year, 65,000 people have died from COVID-19 worldwide. These 5 years have seen the rise of anti-science, anti-public health and anti-vaccine attitudes worldwide. **Go to the CDC website for disease statistics before the CDC is eliminated or before all the scientific data are removed ("scrubbed")![2]**

**William D. Hardy, Jr., V.M.D.**

## US Department of Health and Human Services (HHS):

The USD HHS is massive and has more than 10 operating divisions including the NIH, CDC, FDA, and the Centers for Medicare & Medicaid Services (CMS). The recently installed Secretary of US DHHS is Robert F. Kennedy, Jr., a proponent of vaccine misinformation and public-health conspiracy theories, including the scientifically disproved claim of a causal link between vaccines and autism and he also founded an organization for COVID-19 vaccine misinformation. He has no medical background or experience as the head of such a large and important government department. In a recent TV interview, Kennedy said that he had a "generic list" of staffers at the department he'd like to see removed. For veterinarians, their products and services are under the FDA and RF Kennedy.

## Background:

**Vaccine Hesitancy:**

There are many reasons for vaccine denial or hesitancy.[3] Some are lack of knowledge, misinformation, lack of doctors to discuss vaccines and religious tenants. It is well known that many diseases have been controlled and even eliminated by vaccines. Thus, having a vaccine denier as Secretary of all the health agencies is unacceptable in the time of continuing COVID-19, the present worse seasonal influenza outbreak occurring, the new avian flu outbreak which has potential to become the next major deadly pandemic, and the recurrence of measles. I personally experienced both COVID-19 and the current 2024 flu season. The seasonal flu was much more severe than the COVID-19 episode. This all occurred after having had the 6 recommended SARS-CoV-2 vaccines and seasonal flu vaccines for each of the past 20 years. As expected, the vaccines did their job, not by preventing the infection, but by saving my life. Thus, it is very disturbing to have a vaccine denier as Secretary of the HHS.

## COVID-19 History:

**World Health Organization- To date, more than 9 million people have died of COVID-19 in the world.[1]**

**2023 History of COVID-19[2].**

**CDC USA: COVID-19 weekly data ~ May 10th[2]**

| | May 13, 2020 | May 12, 2021 | May 11, 2022 | May 3, 2023* |
|---|---|---|---|---|
| Cases: | 160,786 | 260,679 | 590,341 | 77,294 |
| Deaths: | 10,488 | 4,281 | 2,157 | 1,109 |

***CDC datatracter has been terminated as of May 3, 2023.**

**WHO Cumulative COVID-19 data as of May 2, 2023:[1]**

| | Cases | Deaths | % |
|---|---|---|---|
| Global: | 765,222,932 | 6,921,614* | 9.0% |
| USA: | 103,266,404 | 1,124,063 | 10.9% |

*WHO actually estimates that 15 million people have died of COVID-19 since the start of the pandemic.

**CDC- USA fully vaccinated & booster: 17%[3]

**Vaccines:** Current vaccines were prepared from the original Wuhan SARS-CoV-2 isolate from 2019 and were available to almost all US adults by May 2021. The vaccines were all about 90% effective against the original Wuhan SARS-CoV-2 isolate and, at that time, the outlook looked good. **Presently 69.5% are fully vaccinated but only 17% have the update bivalent booster vaccine.[4]** We rank only about halfway in the world with percent population vaccinated, behind countries like Bangladesh and Nepal. And unfortunately, present vaccine mandates are being withdrawn in many places in this country. **COVID-19 vaccinations are credited with controlling the pandemic so WHY now lift those mandates when variants are continually being generated?**

**Disease:** Despite an increase in transmissible SARS-CoV-2 mutants, there was a decrease in diseases and deaths. We rapidly developed the first and best vaccines, yet due to political interference, internet misinformation, antivaxxers, and uneven medical coverages, we lead the world, by far, in total COVID-19 cases AND deaths.

## Therapy:[4]

**Drugs- Antivirals:[4]**

**Paxlovid™-ritinovir-boostered nirmatrelvir**

WHO and NIH strongly recommend the use of Paxlovid in patients with non-severe illnesses at highest risk of hospitalization. It has demonstrated antiviral activity against all coronaviruses that are known to infect humans. Paxlovid reduces the risk of hospitalization and death by 89% compared to a placebo. **Paxlovid is the drug of first choice. Paxlovid is a major breakthrough and gives hope for controlling the pandemic.**

## Animals- Spillbacks:

**Susceptibility:** Many animal species are susceptible to infection with SARS-CoV-2 from people, and some can transmit the virus directly among their species. Now 5 animals, mink, mouse, hamster, deer, and cat, can re-transmit the virus back to people (**spillback**).



Many white-tailed deer, in the USA and Canada, have high prevalences of SARS-CoV-2 infections with several variants. There is an epidemiological link to a human case in the area which indicates **spillback,** deer-to-human transmission.[4] This is new evidence that mutants are being generated in deer which could make some more virulent for people. **However, there has been little to no evidence that our concern for important spillback from animals has or is occurring.**

## The Politics of COVID Deaths:

Unfortunately, politics has played a dominant part of everyday life for the past 10 years and has had devastating consequences on science.[5] In one study, in 10 states with the lowest vaccination rates (Republican states) where between 50-54.5% of the total population had been fully vaccinated, there was an average of 153 COVID-19 deaths per 100,000 residents. In contrast, during the same period 10 states with the highest vaccination rate (Democratic states), 75% fully vaccinated, 83.2 deaths per 100,000 residents from COVID-19 which was one-half of the deaths that occurred in Republican states.

National Institute of Allergy and Infectious Diseases director Anthony Fauci, whom I have known for 25 years, required government security protection after his conflicts over the COVID-19 information with President Trump during his first administration. In a petty, dangerous, vindictive move, President Trump withdrew the government protection for Dr. Fauci as one of his first acts in his second administration. In addition, the administration emailed 80,000 US HHS employees an offer to resign from their jobs for a $25,000 payment!

## Seasonal Influenza:

**Five Pandemics Since 1918**

| Year | Pandemic | Deaths | % of World Pop |
|---|---|---|---|
| 1918 | Spanish Flu*+ | ~50 million | 2.68% |
| 1957 | Asian Flu* | ~1.5 million | 0.05% |
| 1968 | Hong Kong Flu* | 1 million | 1.03% |
| 2009 | Pandemic Flu* | 300,000 | 0.004% |
| 2019 | COVID-19** | 6.6 million | 0.08% |

* Influenza A virus

** Coronavirus SARS-CoV-2- the second most deadly and first Coronavirus pandemic.[3]

+ I lost my aunt in the 1918 flu pandemic.

Seasonal Influenza Viruses of humans are classified as **Types** (Influenza A and Influenza B), then into **Subtypes** (A(H1N1), A(H3N2) and **Lineages** B(Victoria), B(Yamagata) then into **Clades** and **Sub-Clade**s. A **Type** is the only **Type** known to cause pandemics, **Types** B and C viruses cause only mild flu diseases, **Type** D mainly infect cows and spills over to other animals, but do not infect people. Type A viruses are based on subtypes based on their surface proteins such as H or HA for hemagglutinin and N or NA for their neuraminidase. It is these surface proteins that attach to cells for infection and vaccines are engineered to produce immune responses to these surface proteins for immune protection. The seasonal vaccines are formulated to protect against those viruses known to have caused epidemics in past years, including one influenza A(H1N1) virus, one influenza A(H3N2) virus and one influenza B/Victoria lineage virus. These vaccine viruses give immunity to people against the 3 basic vaccine virus Types, but also give some immunity, due to cross-reactions, with other flu viruses that might occur in the following year.

The fall and winter is the flu season in the United States. Influenza viruses can spread year-round, but most flu activity peaks in December, January and February. Clinical cases are characterized by infections, hospitalizations, and deaths and each year the number of flu cases can vary significantly. The CDC's current seasonal flu data estimations from October 1, 2024, to March 1, 2025, are alarming in that the occurrence of flu cases is more than double those from each year of the past 10 years.

**Seasonal Flu CDC Data Estimates March 2025**

| Illnesses | Medical Visits | Hospitalizations | Deaths |
|---|---|---|---|
| 40-70 M | 18-31 M | 520,000-1.1M | 22,000-110,000 |

M= million

It is this time each year, for one of the 2 yearly meetings of global influenza researchers to meet to discuss the influenza strains that have circulated around the world in-order to choose those strains that should be chosen for next year's influenza vaccine stocks. **For the first time in more than 70 years, this meeting is held in the UK since the Trump administration called off this meeting for the US with no explanation at all! This attack on human health is unprecedented.[6,7] Why, Why??**

## Highly Pathogenic Avian Influenza Virus:

The World Health Organization (WHO) says 870 humans have been infected with avian flu over the past 20 years, and 457 have died (53%). During this current outbreak, there have been some poultry workers infected by this virus, but fortunately just a few have died. Only the inability of H5N1 to mutate, by reassortment, within infected people has prevented the spread of the virus person-to-person that has prevented a pandemic so far.

A(H5N1) highly pathogenic avian influenza virus (HPAI) has killed thousands of marine mammals, including seals and elephant seals, in South America since 2022.[8] These groups (FAO/WHO/WOAH) found ecological and phylogenetic data to support ongoing mammal to mammal transmission of the A(H5N1) virus and spillback from mammals (elephant seals) to birds (terns). Forty-two mammalian species are susceptible to infection with PHAI. This is an ominous finding in that the evolution of these viruses, adapting to mammals, might foretell a similar adaptability in humans.[9]



**Elephant seal and wild bird cohabit a beach in Antarctica. Photo by Dr. WD Hardy, Jr.**

In addition, susceptibility of endangered mammalian species might hasten their extinction including many birds, wild cats (tigers), and even polar bears.



**Tiger hunting in India. Photo by Dr. WD Hardy, Jr.**



**Polar bears at play, on Hudson Bay, Churchill Canada. Photo by Dr. WD Hardy, Jr.**

The most frightening scenario would be a healthy, or even worse, an immunosuppressed person, infected severely with the seasonal flu which is so rampant presently and then becoming superinfected with A(H5N1) highly pathogenic avian influenza virus (HPAI) from a bird or worse, from one of the 42 susceptible mammals. Infection from one of the 42 mammals (including possibly cats[10] and dogs), carrying the viral receptor for mammal cells could easily mix with the seasonal flu virus, by reassortment of the viral genes, to produce a much more transmissible, and possibly far more pathogenic, recombinant virus.[11] The new virus might spread much more rapidly leading to a more lethal pandemic than even COVID-19 was.

## Measles:

Measles, one of the most contagious diseases on earth, was officially eliminated in the US 25 years ago. A current Texas outbreak has 222 cases, 23 hospitalizations, 94% unvaccinated and the death of a school-age child. In neighboring New Mexico there are 30 cases, 26 were unvaccinated. After hearing of this report, the Secretary of HHS, Robert F. Kennedy, Jr. downplayed the outbreak in Texas as "It's not unusual." Two Texas counties have MMR vaccine rates of 82% and 46% which is well below the needed 95% for herd immunity.[12]

## What does all this mean for veterinarians?

Of course, with the lack of rigorous fact-based science, rigorous standards for veterinarians and their families, their hospital personnel and clients by our government's lack of rigorous science, these pathogens will infect and affect our families and our animal patients. Will Secretary Kennedy decree that no rabies or other important veterinary vaccines be administered? I am certain that our profession will continue to do what we know is right for America.

## OPINION- WD Hardy, Jr. V.M.D.:

Without strong public health programs in the CDC, HHS or universities, funded by government, to be actively looking for such occurrences, the US and world will be at great risk. To allow cost cutting and elimination of large parts of our public health apparatus to be handicapped by trying to give tax cuts at this time is very problematic. These are VERY troubling possibilities since our government is presently veering toward an anti-science and anti-fact future for the country with a vaccine denier as the Secretary of HHS. Veterinarians and animal lovers must all unite to try to correct these deficiencies.

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