

# CDC ends Biobot Analytics contract for wastewater surveillance of COVID pandemic

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*“Many of you have reached out in recent days inquiring about Biobot’s future with CDC NWSS. The contract Biobot held with CDC NWSS for the last few years was up for rebid this summer, and was recently awarded to Verily, an Alphabet precision health technology company. While we are disappointed with this news, we are incredibly proud of the work we’ve accomplished with CDC to date, and we know that this decision had nothing to do with our past performance. This is just the reality of how government works.”*—October 6, 2023, Biobot Analytics

As of September 27, 2023, one of the few reliable sources of information on the real state of the COVID pandemic in the US was halted. The contract between Biobot Analytics and the Centers for Disease Control and Prevention (CDC) to provide extended data for the public health agency’s National Wastewater Surveillance System (NWSS) ended.

Instead, the CDC awarded the \$38 million contract for up-to-five years to Verily (formerly Google Life Sciences) on September 26, 2023. However, a glance into Verily’s COVID dashboard, WastewaterSCAN, offers little in terms of comprehensible data in regional or national terms. It simply states, “Medium: Downward trend and medium concentration in the last 21 days.”

The last Biobot report indicated the levels of SARS-CoV-2 nationally were rising again, with the Northeast accelerating and the rest of the country seeing levels plateau.

The available graphics and trends in SARS-CoV-2 wastewater levels are limited to the wastewater site and have not been aggregated to provide a coherent picture. And reviewing the CDC’s limited graphics, as of September 28, there has been a precipitous drop in the number of sites reporting.

It appears that the disruption in wastewater data is another deliberate attempt by the CDC to further

dismantle any semblance of organized real-time data on the state of the pandemic. Such shifts in contracts usually take place over a span of time to assure a seamless transition on the data being presented.

It was known in February 2023 that Biobot had been given a six-month extension to ensure data continuity for the NWSS program. The scope of the contract included data from more than 400 locations from over 250 counties across the entire United States, covering 60 million people. On top of this, Biobot also conducted genomic sequencing to identify the latest variants in circulation.

At the time of the contract extension, Newsha Ghaeli, Biobot president and co-founder, released a statement, “As the availability of clinical data decreases, wastewater monitoring has become a more reliable indicator of COVID-19 prevalence and provides local officials with a better understanding of viral spread in their communities. We’re excited to continue our partnership with CDC and lay the groundwork for future program expansion into other infectious disease and beyond.”

Since the beginning of summer, after the Biden administration declared the end to the pandemic in May, a new wave of infections began rapidly spreading across the country, driving up hospitalization rates and deaths. Many schools actually closed for one to two weeks to mitigate infection spread and some hospitals and businesses even went as far as to mandate masks again. Even the most recalcitrant were begrudgingly acknowledging another wave of infections with COVID.

The fraudulent “pandemic is over” was dealt a further blow in early September when the White House acknowledged that Jill Biden had been reinfected with COVID and was isolating at the Bidens’ Delaware home.

Meanwhile, President Joe Biden was flaunting his open hostility to even the most limited public health measures to protect himself and others around him. At a press briefing on September 6, before traveling to India, Biden

walked to the podium during a press briefing unmasked and holding his KN95 in hand.

He said, “I want to explain to the press, I’ve been tested again today. I’m clear across the board. But they keep telling me, because this has to be 10 days or something, I got to keep wearing it. But don’t tell them I didn’t wear it when I walked in.”

The week of that sick joke, more than a thousand people in the US—predominantly the elderly and immunocompromised—died from COVID.

Biobot Analytics was alone in tracking the entire course of the summer wave, enabling an appreciative public to take what self-protective measures they could and providing vital information to medical science and public health efforts.

The hostility of the CDC and its political and corporate masters to this effort—they evidently regarded data collection on COVID as more dangerous than the lethal disease itself—no doubt accounts for the decision to award the wastewater data monitoring contract to a different company.

As JP Weiland, a scientist and infectious disease modeler who regularly updated and translated Biobot data into clinical terms, recently noted, “I’m concerned the loss of @BiobotAnalytics contract with the CDC (transferred to Verily) will temporarily interrupt wastewater calibration. Biobot has been a fantastic data source, and tie most closely to other non-wastewater data sets. Hopefully Verily’s new data will live up to Biobot’s quality.”

Dr. Mike Hoerger, the founding director of Louisiana’s health psychology PhD program at Tulane University, and an expert in weighing medical evidence, compared Verily and Biobot’s analysis to data from the Institute of Health Metrics and Evaluation at the University of Washington from January 2021 to April 2023. While Biobot’s data correlated very strongly, Verily’s data correlated moderately. As Hoerger noted, “Either Biobot is much better, or Verily knows something we don’t.”

He added, “Once Verily brings on Biobot’s former CDC-contracted wastewater sites, that should help. Case estimation will be easier if they fold in the historic data to more accurately represent the nation. If Verily does not fold in historic data, case estimation will be much harder, and likely noisier.”

On his October 2, 2023, X (formerly known as Twitter) thread, Hoerger noted that US wastewater levels are higher than during 58 percent of the pandemic. This

translated to one in 64 people infectious, with more than 745,000 COVID cases per day and 37,000 Long COVID cases per day expected. Although there is an expected decline by the end of October, the trough should be reached by November 1 after which these modelers expect levels of COVID to increase again.

Meanwhile, the US Department of Health and Human Services said last Thursday that just over 7 million Americans have received the latest iteration of the COVID vaccine boosters since receiving the green light on September 12 for those age six months and older. Notably, the updated Novavax boosters are now available too.

But because of the commercialization of these lifesaving treatments and deplorable state of large chain pharmacies in regard to staff shortages, the current figures are far below the deployment of last year’s COVID-19 bivalent boosters. For most health systems, while flu vaccines are mandatory, COVID boosters are not compulsory, even though lethality with COVID remains higher than the flu and COVID is a magnitude of order more infectious.

Indeed, Pfizer, which had made billions on its mRNA vaccines, announced it had slashed its full-year revenue forecast by 13 percent and anticipates it will cut \$3.5 billion worth of jobs and expenses because of lackluster sales of its COVID vaccines and treatments.

Currently in the US, the HV.1 subvariant is outpacing EG.5 which has begun to recede. However, the Pirola variant (B.2.86.1) and its progeny are raising alarms. In Particular, JN.1 (BA.2.86.1 plus escape mutation L455S) appears to be showing a growth advantage compared to others despite only a few sequences.



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