

Trump orders CDC to immediately stop all work and communications with the World Health Organization

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Less than one week after Trump signed an executive order to withdraw the United States from the World Health Organization (WHO), his administration issued a cease-and-desist order to all Centers for Disease Control and Prevention (CDC) staff and other public health employees, demanding they stop all communications and work with the WHO.

This marks a deepening of the unprecedented gag order imposed on all federal health agencies, requiring them to pause external communications, including health advisories, weekly scientific reports and any updates that communicate on the epidemiological data on any communicable infections through websites and social media. These actions by Trump and his office constitute a declaration of war on public health.

Indeed, a clause of the executive order withdrawing from the WHO stipulates that Trump's fascist National Security Advisor Michael Waltz "shall establish directorates and coordinating mechanisms within the National Security Council apparatus as he deems necessary and appropriate to safeguard public health and fortify biosecurity." Going forward, public health will be under the purview of the military-intelligence apparatus.

In essence, public health as a social service to the population is seen as a threat to the state and must be brought to heel. According to Trump, it is the public health institutions that represent a danger to the unimpeded function of commerce, not COVID-19, H5N1 bird flu and all the potential pathogens that can infect and harm populations.

Section 2, Subsection (d) of Trump's executive order provides the basis for the communications restrictions now imposed on the CDC, noting:

The Secretary of State and the Director of the Office of Management and Budget shall take appropriate measures, with all practicable speed, to (i) pause the future transfer of any United States Government funds, support, or resources to the WHO; (ii) **recall and reassign United States Government personnel or contractors working in any capacity with the WHO**; and (iii) identify credible and transparent United States and international partners to assume necessary activities previously undertaken by the WHO. (Emphasis added)

The task of delivering the news to the CDC and public health offices fell on Deputy Director for Global Health at the CDC, John Nkengasong, who sent an email Sunday night telling all staff that they had to immediately stop all collaborations with the WHO until "further guidance" is issued. The stop-work policy applied to "all CDC staff engaging with WHO through technical working groups, coordinating centers, advisory boards, cooperative agreements or other means—in persona or virtual." They were also instructed that they could not visit WHO offices.

In fact, the actions taken by the Trump administration not only constitute a serious breach of national security but elevate the danger of another pandemic for the entire world's population. James LeDuc, an adjunct professor at the University of Texas Medical Branch, correctly noted, "As has been repeated many times, infectious diseases know no boundaries and in today's world of rapid travel, an outbreak anywhere is a threat

everywhere.”

When open channels of communications and real-time situation reports between health agencies globally are paramount in containing outbreaks, the real hazards posed by such blatantly malign restrictions are incalculable. LeDuc, speaking with *CBS News*, explained, “The fact is that there is no alternative to WHO. WHO has the global mandate that allows health issues to be addressed on a global scale in a coordinated manner.”

That the gag order has been issued ahead of the influenza committee meeting next month, when CDC officials and WHO representatives would have selected the strains for next winter’s influenza vaccine, could very well mean that there will not be a flu vaccine for the coming year. One must place this in the current context that this year’s seasonal influenza outbreak has already sickened millions, hospitalized hundreds of thousands and killed thousands.

Considering the rise in cases of H5N1 bird flu affecting poultry and dairy farms throughout the country, as well as mice, deer, cats and other species, the evolution of this highly lethal virus and its potential to develop the capacity for human-to-human transmission are becoming ever more ominous. Seema Lakdawala, an influenza virologist at Emory University School of Medicine in Atlanta, Georgia, told *Nature*, “The risk has increased as we’ve gone on—especially in the last couple of months, with the report of severe infections.”

Presently there are two main bird flu strains circulating. The B3.13 strain is spreading among dairy cattle, while the D1.1 strain, which recently killed an elderly man in Louisiana and gravely sickened a teenager in British Columbia, is found mostly among wild birds and domesticated animals such as chickens. In Georgia, state officials placed a temporary ban on live-bird sales and exhibitions due to large-scale outbreaks on commercial farms. Recently, Maryland’s Caroline County and Virginia’s Accomack County have identified bird flu among large broiler farms.

Meanwhile, California has discovered the H5N9 bird flu on a poultry farm alongside the detection of the H5N1 strain on the same farm in Merced County. According to the World Organization of Animal Health (WOAH), “This is the first confirmed case of Highly Pathogenic Avian Influenza (HPAI) H5N9 in poultry in

the United States.” Virologist Dr. Angela Rasmussen warned on her social media:

This is bad news. It suggests reassortment of circulating H5N1 viruses with viruses containing N9 NA. Although this indicates reassortment with avian viruses, it’s still bad. Reassortment makes pandemics. The last three of four flu pandemics (and maybe 1918 too) were reassortment viruses.

Under these highly dangerous conditions, the sharing of such information and collaboration with the WHO has come to a grinding halt. The US serves as one of the world’s top laboratories for testing and studying the virus. Samples are sent to the CDC through the collaborative networks established over 70 years of cooperation with the WHO to evaluate viruses that could pose a pandemic threat.

US expertise has also been critical in responding to deadly pathogens like Marburg and Ebola, especially in complex geopolitical environments like the Democratic Republic of Congo and neighboring countries. Small outbreaks in rural communities can quickly spread to large, densely populated centers with access to international flights. The ability to respond to such outbreaks and roll out life-saving vaccines and medical aid has been the mechanism for containing the numerous outbreaks witnessed in just the last few years.

LeDuc said, “The expertise provided by CDC and other US government agencies is absolutely essential to the success of WHO activities and to the well-being of the United States. I don’t think we want, particularly as public health experts, to feel like they can only wave the US flag in those positions. The reason why it worked,” with respect to the cooperation between the WHO and United States, “is because we were able to be American and also to be global citizens.”



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