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Subject: FW: [BIOWAR] Net-based germ warfare watch
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-----Original Message-----

From: Dan S
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Net-based germ warfare watch
By Steve Sternberg, USA TODAY

Doctors in New Mexico and in the once-secret Russian city of Chelyabinsk-70 have forged the first links in a grass-roots network to alert the world if anyone unleashes biological weapons of war. The researchers share their findings on the Internet, and meet there, too using miniature video cameras and software that retail for less than \$300. Organizers hope the four hospitals that started the network will be joined by hundreds of others in a global early warning system that could save scores of lives.

Alan Zelicoff, a national security expert at Sandia National Laboratory in Albuquerque, proposed the network to close a vast loophole in the Biological and Toxin Weapons Convention. But the 1972 treaty lacked provisions to assure compliance.

"We think investigating unusual outbreaks of disease may be the best way to catch a cheater," Zelicoff says. Now signed by 150 nations, the treaty is the first and only effort to outlaw an entire class of weapons. Yet signing a treaty does not mean that it will be honored or that the signatories will get along. Not surprisingly, Zelicoff says, Russia and the United States have "a long and bitter history of accusation and counteraccusation," each claiming the other violated the treaty. Since negotiators could not agree on a mechanism for monitoring and enforcement, the claims have never been resolved or thoroughly investigated.

Covert germ research Although then-Premier Leonid Brezhnev approved the treaty, he had no intention of honoring it, says biodefense expert Ken Alibek, who ran the germ-warfare program from 1988 to 1992. Instead, Alibek says, Brezhnev ordered a massive expansion of the Soviet Union's covert germ-warfare program. In his new book, *Biohazard* (\$24.95, Random House), Alibek says that the program grew to encompass 100 laboratories and seven factories capable of churning out, on demand, tons of weapons-grade anthrax, smallpox and other deadly microbes.

That threat prompted Zelicoff to propose the network, established by doctors and funded by the Department of Energy. D.A. Henderson of the Johns Hopkins University School of Public Health recently wrote that the first evidence of secret weapons development "will almost certainly be cases (of infectious disease) in hospital emergency rooms. Specialists in infectious diseases thus constitute the front line of defense."

The speed with which they act, he wrote in the journal *Emerging Infectious Diseases*, "could spell the difference between thousands and perhaps tens of thousands of casualties."

A laptop-to-laptop surveillance network connecting scores of emergency doctors and infectious disease specialists could get the word of an attack out rapidly and perhaps save many lives, says Nobel Prize-winning microbiologist Joshua Lederberg of Rockefeller University in New York. "It's unusual and interesting to see and hear colleagues at the other end of the globe and discuss medical problems with them in real time," says Russian collaborator Natalja Marusina, a doctor in the 70-bed infectious-disease unit at Snezhinsk Hospital in Chelyabinsk-70. "It's like having a real conversation with real people."

However, Alibek asserts that even a global surveillance system such as this one could not sound an alarm quickly enough to save many lives. "The first sign of a biological attack would be thousands of people flocking to hospitals," he says. "There would be hundreds of thousands of cases the first day."

Preventive vaccines would provide protection only if they are readily available-and if authorities learn the identity of the germ-warfare agent in advance, so they can give the right vaccine.

But even if a vaccine exists, no one can guarantee safety, doctors say. Outdated vaccines Take smallpox. The last smallpox vaccinations in the USA were administered in 1972, about the time smallpox was eradicated and the biowarfare treaty was signed.

Since then, vaccine-induced smallpox immunity probably has worn off in 90% of those immunized. And there's not enough vaccine in stock to start up the smallpox vaccination program again, health officials say. Only about 7 million doses remain in a stockpile that has been stored for decades in a Lancaster, Pa., warehouse by manufacturer Wyeth-Ayerst Laboratories. Alibek's solution-learn how to cure lethal infections-offers little immediate security. He advocates learning how to manipulate the human immune system, so doctors can activate it at the first sign of a germ-warfare attack.

Such research will probably take years, if not decades, Alibek says. He nevertheless lauded Zelicoff's experimental network, saying it would provide valuable information on the emergence of ordinary infectious-disease epidemics, which will allow doctors to sharpen their epidemic-fighting skills.

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