

**Trump: We Have Met The Moment And We Have Prevailed On Testing;
Chinese American Reporter Questions Trump About His Comments On
Testing; Another Study Shows Drug Touted By Trump Doesn't Work Against
COVID-19, Could Cause Health Problems; Researcher: Clinical Trials For
New Antibody Treatment In June; Registered Nurse Helping In NYC Returns
Home After Five Weeks. Aired 8-9p ET**

CNN ANDERSON COOPER 360 DEGREES 8:00 PM EST

May 11, 2020 Monday

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Section: NEWS; Domestic

Length: 7763 words

Byline: Anderson Cooper, Kaitlan Collins, Sanjay Gupta, Gloria Borger, Andrew Yang

Guests: Michael Osterholm, David Holtgrave, George Yancopoulos, Jim Mullen, Gina Mullen, Gracie Mullen

Highlight: President Trump claims that we have prevailed on testing, despite the U.S. death toll now meeting earlier predictions for August ahead of time. CBS reporter, Weijia Jiang, after asking President Trump about his competitive nature regarding the virus, was told to ask China that question. New research is being done to make anti-viral antibodies outside of the body without a vaccine.

Body

[20:00:00]

ANDERSON COOPER, CNN HOST: And good evening. Today, the President said in his Rose Garden news conference that we have met the moment, and we prevailed. He said this on a day when we crossed a sickening and stunning milestone, 80,000 deaths in the United States.

You may recall early in the pandemic there was an estimate that 80,000 of us would die in this country, but that wasn't projected to happen until early August. Today is May 11th. More than 80,000 are dead. And the President saying - speaking about the American people, and assumedly his administration as well - as well, we prevailed.

In other words, mission accomplished, or sure sounds like it. And sadly, we know how that went. We have met the moment and we prevailed, the President says. Prevailed, past tense, as in it's already happened. It's over. Prevailed, as in we won.

Later, the President said he was talking about prevailing on testing, though he didn't say that at first. He also then later said we're making great strides toward total victory. At the same time, the President is saying we prevailed, he is unable to articulate clear guidance for this country about testing, and contact tracing, and all the other elements needed to move forward. He subverted his own administration's guidelines.

Trump: We Have Met The Moment And We Have Prevailed On Testing; Chinese American Reporter Questions
Trump About His Comments On Testing; Another Study Shows Dru....

48 states are partially reopened or making plans to do so, and many of them do not meet his administration's guidelines. The President doesn't seem to be too worried about that any more. Instead his answers at a formal press briefing in the Rose Garden were first misleading, then insulting, then he left.

The President once again repeated a line that became something of a sick joke a few weeks ago, after he first said it on a visit to the CDC. "Anyone who wants a test can get a test," he said way back then. Amazingly, he repeated that lie again today, and his own people had to correct him right in front of him.

His testing czar, Admiral Brett Giroir, corrected the President. "Anyone who needs a test can get one," the admiral said. Then the president ignored that correction and repeated his lie once again. (BEGIN VIDEO CLIP)

DONALD TRUMP, PRESIDENT OF THE UNITED STATES: If people want to get tested, they get tested. But for the most part, they shouldn't want to get tested. There's no reason.

(END VIDEO CLIP)

COOPER: No reason. Keeping him honest, that's not true now and it has never been true. And the President's statements about testing have been all over the place since this crisis began.

(BEGIN VIDEO CLIP)

TRUMP: Well we're testing everybody that we need to test. Anybody that wants a test can get a test. We took over an obsolete broken testing system. There's not a lot of issues with testing.

The governors are supposed to do testing. We are lapping the world on testing. We have so much testing, I don't think you need that kind of testing, or that much testing.

KAYLEIGH MCENANY, WHITE HOUSE PRESS SECRETARY: The notion that everyone needs to be tested is just simply nonsensical.

TRUMP: We've done more testing than every other country combined. So in a way, by doing all of this testing, we make ourselves look bad. I've always said testing is somewhat overrated. Something can happen between a test where it's good, and then something happens, and all of a sudden -

This is why the whole concept of tests aren't necessarily great. But testing certainly is a very important function, and we have prevailed.

(END VIDEO CLIP)

COOPER: We have prevailed. The President was also asked questions today about White House staff who have tested positive. Two we know of to date - Katie Miller, the Vice President's spokeswoman and wife of top Trump aide, Stephen Miller. Also, a White House valet. The President clearly trying to downplay that news.

(BEGIN VIDEO CLIP)

UNIDENTIFIED MALE: How can you ensure Americans that it's safe to go to their own workplaces when the most secure workplace in the country, the White House, cannot contain the spread of the coronavirus? It's infected some of your own staff.

TRUMP: Well, when you say "some". So we have a person, and the person got - something happened right after a test was done. Three other people met that person, came into relative contact, very little contact, and they're self quarantining. That is not exactly not controlling it.

(END VIDEO CLIP) COOPER: Well, he can try to downplay it, but in a new policy announced today, all White House staff are now being ordered to wear masks. In fact, you can see them on display at the Rose Garden event

Trump: We Have Met The Moment And We Have Prevailed On Testing; Chinese American Reporter Questions
Trump About His Comments On Testing; Another Study Shows Dru....

today. And while any American who wants a test can't get one, the White House sure seems to be relying on testing when it comes to their own employees.

Now, of course, the President is downplaying these infections in the White House, and the change in mask policy in the White House, because it offers evidence that no workplace, not even the White House, is truly safe. It also points the need for adequate testing of employees to at least keep offices and businesses functioning.

The most graceless moment of today's news conference, and that's saying a lot, happened at the very end, where a reporter from CBS tried to ask a reasonable question. The President not only shut her down suggesting the Chinese American reporter ask her question to China, he then refused a question from our reporter, and shutdown the news conference in kind of a huff.

(BEGIN VIDEO CLIP)

WEIJIA JIANG, CBS REPORTER: You've said many times that the U.S. is doing far better than any other country when it comes to testing.

[20:05:00]

TRUMP: Yes.

JIANG: Why does that matter? Why is this a global competition to you, if every day Americans are still losing their lives, and we're still seeing more cases every day?

TRUMP: Well, they're losing their lives everywhere in the world, and maybe that's a question you should ask China. Don't ask me, ask China that question, OK. When you ask them that question, you may get a very unusual answer. Yes, behind you, please.

JIANG: Sir, why are you saying that to me specifically that I should ask China?

TRUMP: I'm telling you. I'm not saying it specifically to anybody. I'm saying it to anybody that would ask a nasty question like that.

JIANG: That's not a nasty question.

TRUMP: Please go ahead.

JIANG: Why does it matter when --

TRUMP: OK. Anybody else? Please, go ahead in the back, please.

KAITLAN COLLINS, CNN WHITE HOUSE CORRESPONDENT: I have two questions.

TRUMP: No, it's okay. We'll go over here.

COLLINS: But you pointed to me. I have two questions, Mr. President.

TRUMP: Next, please.

COLLINS: But you called on me.

TRUMP: I did, and you didn't respond. And now I'm calling on the young lady in the back.

COLLINS: Sorry I wanted to let -- I just wanted to let my colleague finish, but can I ask you a question, please?

TRUMP: OK. Ladies and gentlemen, thank you very much, I appreciate it.

Trump: We Have Met The Moment And We Have Prevailed On Testing; Chinese American Reporter Questions
Trump About His Comments On Testing; Another Study Shows Dru....

COLLINS: But you called on me.

TRUMP: Thank you very much.

COLLINS: You called on me.

(END VIDEO CLIP)

COOPER: Joining me now is Kaitlan Collins who is the reporter that you saw standing near the mic who was called on by the president and politely allowed the reporter to ask a follow-up question, which is standard practice, and then the president clearly in a huff left.

Kaitlan, exactly what happened there? I mean, the idea that, you know, the president is so flustered and that he flees a press conference because you are asking to ask a question when called on is kind of remarkable.

COLLINS: Yes, I don't think I've ever been called on and then not allowed to ask a question after that just because I let another reporter follow-up which is, you know, as you noted standard operating procedure for these briefings. That's the whole point of following up a question so then the president can't avoid questions he doesn't like or doesn't want to answer by then just calling on another reporter.

And it was kind of just quiet there in the rose garden for a moment after the president turned around and left. There wasn't any applause like there is typically from his guests that he invites sometimes or staffers. And we all just kind of stood there for a moment.

But clearly the president did not want to continue that exchange with that reporter. We had multiple questions he had not called on CNN yet about not only testing, but also the new the mask policy here at the White House, what he's doing going forward, and the president refused to take those questions.

COOPER: It obviously comes at a bad time for this president who is, you know, encouraging states to defy the White House's own guidelines and encouraging protesters to defy the White House's own guidelines about social distancing.

The fact that there has now been an outbreak of coronavirus among two people in the White House, close to, you know, the president and the vice president, just explain the new policy because it suddenly seems like everybody now in the White House is being told to wear a mask, and I assume they can be tested.

COLLINS: Yes, they can. Anyone who is interacting with the president, senior staff, are being tested. But they're kind of letting other people if they want to be tested get tested.

And that's what was so confusing today because obviously the point that many reporters were trying to make is that if you can't even control an outbreak here in the White House, which is actually really small. It looks big on TV. The west wing is pretty cramped and pretty small.

You know, how should other people feel comfortable going back to work when here at the White House you can go and get a test and find out if you have coronavirus or not within 15 minutes or less. That is not the same luxury that's afforded to other people.

Obviously there is an importance in the White House and the president and his top aides being able to get tested, but the question is, you know, how should other people feel comfortable going back to work and they themselves cannot get a test?

And it was so interesting in the rose garden today before the president abruptly left, Anderson, because he was saying anyone who wants to get a test can get a test. The admiral there who was standing to his right who has been the one that's really the point man on testing so far was saying people who need a test can get a test. But then he was making the case about who it is that needs a test. Talking about people who are symptomatic.

Trump: We Have Met The Moment And We Have Prevailed On Testing; Chinese American Reporter Questions
Trump About His Comments On Testing; Another Study Shows Dru....

Now, that seems to go right in the face of what happened here last week which is when the vice president's press secretary was asymptomatic. She had tested negative the day before. If she was a regular person she probably wouldn't have been tested the next day. But she was tested and then it was positive. She had not had any symptoms, though.

And that's, you know, the case for more people across the nation is if they do not have symptoms, they're going back to work. How do they know if it's safe for them to go back to work?

So that was really the point that so many people were trying to make as the president was talking about ramping up testing and what it's going to look like over the next few weeks.

COOPER: It's so interesting when you see a charlatan, you know, tried to convince you of something because a lot of times what they say is so obviously untrue, but it's also kind of depending on just the brazenness of the lie. And it sort of is based on the idea that everybody else is a moron and doesn't pick up on the lie when you actually have the president saying, yet again, "Anyone who wants the test can get one," which he said at the CDC, wasn't true then, isn't true today.

[20:10:00] His own admiral says, "Well, it's anyone who, you know, needs a test can get one with a doctor's recommendation," et cetera. And then he comes out and again just ignores what he just said and just repeats the lie again. I mean, it's the most obvious microcosmic example of just the president's strategy to just invent his own history and make up his own facts.

COLLINS: And a lot of it has to do -- going back to the beginning of this, which is the United States was incredibly slow to roll out testing. So, you saw him today comparing it to South Korea and their numbers. Obviously South Korea has a different population, but also, they started their testing much more rigorously much earlier on, and so they were able to flatten the curve.

And that's why they've got a couple of hundred deaths in their country and then the United States, as you noted at the beginning of your show, we have -- we crossed 80,000 today alone. And so, comparing those, it's not really the same thing.

And so, that was another point the president has been making about, where we are in relation to other countries and other nations. But a lot of it, Anderson, has to do, I think, with -- if you talk to people going back, the failure and the criticism about the failure of testing is something that's one of the most sensitive points with the president and that's why I think the way you see him talk about testing the way he does is because he is sensitive to that criticism.

COOPER: Yes, I mean, Kaitlan, it does seem pretty clear that this president views testing as something he has not been encouraging, and it seems like -- at least, part of the reason, is that he believes more people get tested, the numbers go higher, and he knows that, or believes, that reflects badly on him. I mean, he has said as such.

COLLINS: He even said that last week in the Oval Office with the Iowa governor, Kim Reynolds, talking about that. He was saying, you know, "It makes us look worse, because the more people you test, the likely the higher numbers they are." And that's what we saw in so many states, including my home state of Alabama, struggle with, is that they didn't have the capability to do the testing early on, so it looked like they didn't have a lot of cases.

But then, when they started doing testing, and as now what you're seeing is a spike in cases actually happening right now because not enough people took it seriously enough early on to stay home and to do the things they needed to do.

So, you know, it is so important, and that is why you hear the health experts, none of them have said -- you know, tried to downplay testing, or dismiss it, or anything like that because they know how critical it's going to be and how much it can change the trajectory of what this looks like over the next several months.

Trump: We Have Met The Moment And We Have Prevailed On Testing; Chinese American Reporter Questions
Trump About His Comments On Testing; Another Study Shows Dru....

COOPER: Yes. Yes, I mean, today we prevailed on testing is -- well, it is what the president said. Kaitlan Collins, thanks you very much.

Joining us now is chief medical correspondent Sanjay Gupta, chief political analyst, Gloria Borger, and Michael Osterholm, director at the Center for Infectious Disease Research and Policy at the University of Minnesota.

Sanjay, the president saying we prevailed on -- when it comes to testing in this nation. I mean, based on what you've seen, what you know we need, is that even remotely accurate? I mean, I know, obviously, the tests have increased greatly, but there's still a rush to get more tests out, better tests, faster tests, more accurate tests, and not everybody can get tested.

DR. SANJAY GUPTA, CNN CHIEF MEDICAL CORRESPONDENT: Right. No, sadly, you know, we're not yet where we need to be. And I -- you know, I think most people recognize this. In order to start reopening, you know, businesses, the economy, we need to be testing a lot more, and we need to figure out, you know, who has the virus.

I think the fact that this virus can spread asymptotically, you know, before or without any symptoms, you know, it complicates things. If you could use screening tests to test for symptoms and have reasonable confidence, that would be good enough. That would obviously make things a lot easier.

That's not the case here. We need to be able to test because people may not have any idea that they are carrying the virus and they are potentially spreading the virus. I also think this idea of continuously comparing the number of tests we have to other countries really just -- it doesn't make any sense.

It doesn't really give us any more information. We need to know how many tests we need here. And Kaitlan is quite right, I think. The fact that we started late -- and Anderson, we -- you and I talked about this a few months ago now. If you're going to do these things, you know, you're going to put these stay-at-home orders in place, if you're going to start robust testing, all of it makes a bigger difference if you start earlier.

We started late, which is why we have more than a quarter of the world's confirmed cases right now and we're not even 5% of the world's population. We've been behind the curve on testing.

COOPER: Michael, I'm wondering two things from you. Where -- what you took away from what you heard today out of the White House and also just where you think -- you know, looking where we are right now tonight on this night, where we are in this pandemic, what is it looking like you to?

MICHAEL OSTERHOLM, DIRECTOR, CENTER FOR INFECTIOUS DISEASE RESEARCH AND POLICY, UNIVERSITY OF MINNESOTA: Well, I think Sanjay really summed it up very well. Testing is critical. We need it. We don't have a system for testing. Even the tests we have, for example, the ones we're using at the White House, gives us an unreasonable number of false negatives. Meaning that even if you were tested, you could still be positive, infected and be there.

[20:15:00] So, we really need to do much, much more to complete the entire system of testing in this country, not just only getting the results but how it's used. In terms of where we're at, when I hear the word we've prevailed, that's hard to understand, because as I've said before to you we're only in the second inning of this nine inning game. We have between five to 20 percent of the population of this country that's been infected, most of the country is closer to the five percent range.

This virus will not stop transmitting at the level that it is until we get to 60 to 70 percent. If you think about all the pain, suffering and death we've had, all the economic disruption to get from nowhere to five to 20 percent and we still have a long ways to go, I don't know how you can talk about prevailing when we still have such a road ahead of us.

Trump: We Have Met The Moment And We Have Prevailed On Testing; Chinese American Reporter Questions
Trump About His Comments On Testing; Another Study Shows Dru....

COOPER: Gloria, from a political standpoint, does it seem to you that the administration would sort of like to - is sort of trying to basically get as much distance between the President and this virus as possible? Question death tolls or raise suggestions about questions about death toll, don't be promoting testing or hang ups about testing, encourage people to go back to work.

Essentially to make death from coronavirus just - somebody else I know has made this comparison and I can't even remember where I read it, but I thought it was an interesting comparison. The idea that essentially the administration just wants to get businesses back up and have whoever dies from coronavirus just be deaths like school shootings, just things that happen that people say thoughts and prayers, but there's nothing that can be done about it.

GLORIA BORGER, CNN CHIEF POLITICAL ANALYST: Well, this is a President who is living in an alternate universe right now and the universe that he is living in is saying "OK. The coronavirus is going to be behind us really soon, we're going to get back to normal." And the phrase that really struck me today, Anderson, at his press conference was he talked about a transition to greatness. Think about that. What that means is that - OK.

Now that we're opening up the country, now that we're getting past all of this, we're going to be great again. This is my plan to let the American people know that I'm in charge and everything's going to be fine. But don't forget, this is also an administration who promised to have 27 million tests by the end of March.

That didn't happen. So, the question is at this point, will the American public believe the messages that are coming out of the White House right now on testing? Particularly what they see going on inside the White House itself right now.

With people getting tested and then getting re-tested and people showing that they are positive for the virus. I mean, if it can't be controlled there how can it be controlled anywhere? So, it's a really strange message he's delivering right now and a little too rosy.

COOPER: Yes. BORGER: Particularly for a lot of those Governors in states who are slower about opening up.

COOPER: Michael, I mean, the idea that we're not going to get to a place where everybody can be tested every single day at work and that's not going to happen just logistically. So, what would it look like to have enough tests that - what would that look like?

OSTERHOLM: Well, first of all we have to have what we call smart testing. When people asked (inaudible) why you rob banks? Because that's where the money is. We need to be testing everyone who has any clinical signs or symptoms that could have this disease. That's where we're going to find the most important activity in terms of what's happening with spread.

Next we need to be able to test health care workers or first responders who are having contact with patients who have made some symptom and we don't know if it's a potential early COVID infection. We need to test people in hospitals that are there and we suspect that they could be infected, but were not hospitalized for COVID infection.

But we want to know. So, there is actually a scheme which we can actually prioritize but we're not in many places in this country even close to getting through just what I just shared with you. So, that's where we need to concentrate our testing, but eventually expand it.

We do need much more expanded testing, you know, and thinking Anderson, just to put a context to this. When you think about that 60- days ago today, this disease was not even in the top hundred causes of death in this country. This past month it was the number one cause of death. There is no other disease since 1918 that's done that, and we're just getting started in the second inning of this nine inning game.

So, you can understand why we have to have a comprehensive plan for things like testing and so forth that are so different than what we have right now. We are just getting started.

Trump: We Have Met The Moment And We Have Prevailed On Testing; Chinese American Reporter Questions
Trump About His Comments On Testing; Another Study Shows Dru....

COOPER: Yes. And Federal leadership, not just a (peace meal) state by state approach, Michael Osterholm, I appreciate it. Gloria Borger as well. Sanjay, stay with us.

[20:20:00]

Still to come, more on the President's confrontation with a Chinese American reporter from CBS at that Rose Garden event. Former presidential candidate Andrew Yang will join me to discuss. A lot more ahead. Stay with us.

COOPER: We've been talking about the President's news conference today, including the way he ended it, sparring with a reporter about a very - after she asked a very reasonable question. The CBS reporter describes herself on her Twitter account as a Chinese born West Virginian. The President told her to go ask her question to China. (BEGIN VIDEO CLIP)

JIANG: You said many times that the U.S. is doing far better than any other country when it comes to testing.

TRUMP: Yes.

JIANG: Why does that matter? Why is this a global competition to you, if every day Americans are still losing their lives, and we're still seeing more cases every day?

TRUMP: Well, they're losing their lives everywhere in the world. And maybe that's a question you should ask China. Don't ask me. Ask China that question, okay? When you ask them that question, you may get a very unusual answer. Yes, behind you, please.

JIANG: Sir, why are you saying that to me specifically? That I should ask China?

TRUMP: I'm telling you. I'm not saying it specifically to anybody. I'm saying it to anybody that would ask a nasty question like that.

JIANG: That's not a nasty question.

TRUMP: Please go ahead.

JIANG: Why does it matter, when --

[20:25:00]

TRUMP: OK. Anybody else? Please, go ahead. In the back. Please.

COLLINS: I have - I have two questions.

TRUMP: No, it's OK. We'll go over here.

COLLINS: But you pointed to me. I have two questions, Mr. President.

TRUMP: Next, please.

COLLINS: But you called on me.

TRUMP: I did and you didn't respond. And now I'm calling on the young lady in the back --

COLLINS: Sir, I just wanted to let --

TRUMP: --please.

COLLINS: I just wanted to let my colleague finish, but can I ask you a question, please?

Trump: We Have Met The Moment And We Have Prevailed On Testing; Chinese American Reporter Questions
Trump About His Comments On Testing; Another Study Shows Dru....

TRUMP: OK. Ladies and gentlemen, thank you very much. I appreciate it.

COLLINS: But you called on me.

TRUMP: Thank you very much.

COLLINS: You called on me.

(END VIDEO CLIP)

COOPER: And he left. Joining me now is CNN political commentator Andrew Yang, former presidential candidate who's endorsed Joe Biden.

Andrew, thanks for being with us. The idea that the president - I mean, I don't know if it's to say that he became unhinged or if he left in a huff, but the idea that he, you know, couldn't deal with Kaitlan Collins asking him a question and, you know, yet again calling a female reporter's question nasty and telling her to ask China. I'm wondering what you made of this?

ANDREW YANG, FORMER PRESIDENTIAL CANDIDATE: Well, there was a memo that went out to Republican and political operatives recently, Anderson, and it said to blame China for the coronavirus because distracting the American people from the failings of the Trump administration in helping address this crisis is just about the only way they can put this in some kind of light that would enable him to win in November.

So that's out there for everyone to see. And when Trump got a question about his administration's handling of the virus, he went straight from that play book. He said, "Talk to china. Blame china." The fact that it was a Chinese-American reporter just serves to further the distraction.

What we have to deal with is keep the attention focused on what Americans care about, which is our health, our communities, our economic recovery, and not let Trump distract us all from the real issues.

COOPER: It is clearly the play book. I mean, you know, obviously early on the Trump administration, which was in negotiations with China over trade, you know, was praising Chinese leadership -- of all things, praising Chinese transparency which, you know, was obviously not actually occurring.

Now as you say, the play book has been written and that's what the president is following and trying to make this as much as possible, you know, something that they did rather than the failures of his administration, the missing month of February where he was hanging out with Diamond and Silk and talking about miracles happening and this disappearing by April.

YANG: That's exactly right. Where there are very few narratives that he can present that don't call attention to the fact that his administration has mishandled this pandemic in unprecedented ways, unthinkable ways, and we're all paying the price.

One of the few ways that he can frame it is saying that this is China's fault, this is a foreign effort, and it's us against them. Instead of saying, well, we're dealing with this pandemic that experts have warned about for years, and we dropped the ball. He can't win saying that we dropped the ball, we're seeing great depression-era levels of unemployment, 30 million plus jobs lost. That is not a winning case for an incumbent and he knows it.

So, this is one of the few things he can draw on that might distract enough voters to give him a path to victory. I don't think it's going to work, but it's one reason why I'm thrilled that we're talking about this because we have to call it out every time he tries it and make sure that this particular play is a total dud.

COOPER: What this reporter was also partly calling out, was that the president turns everything into, I don't know if a game is the right way, but into, you know, a competition with another country where he is the only victor, where, you know, where he wins, where America wins, when, in fact, you know, it's very interesting when you see that

Trump: We Have Met The Moment And We Have Prevailed On Testing; Chinese American Reporter Questions
Trump About His Comments On Testing; Another Study Shows Dru....

mentality play out because you heard him last week suggesting that, you know, more testing means his numbers go up -- you know, the numbers of people who are actually infected goes up and that reflects poorly, he believes, on his administration, on the United States.

It's such -- it's such an odd way of looking at this, and it's clearly -- I mean, if that is the way he's looking at, you know, not having so much testing because the numbers will go up and make him look bad, that's a really dangerous thing.

YANG: Now, we know that we're number one in the world in cases, in deaths from the coronavirus, and you're right that he likes to frame everything in terms of a competition, in terms of numbers. Unfortunately, here the numbers are disastrous for us all. Not just in terms of the cases, but also, again, 30 million plus jobs lost.

[20:30:00]

Record numbers of Americans are trying to figure out where their next paycheck is going to come from. So, presenting it as a zero sum game to me, it is something that they've written out as one of their few recourses in the situation.

But what we care about as Americans is not what's going on in other places, it's what's going on right in our homes our local hospitals, our communities every single day.

COOPER: Yes. Andrew Yang, I appreciate your time, hope you and your family are staying safe. We have breaking news ahead --

YANG: Anderson, congratulations on being a dad --

COOPER: -- on a study done --

YANG: -- I'm so freaking -

COOPER: Yes.

YANG: -- pumped for you.

COOPER: Thank you so much. I really -- it's just extraordinary, as you well know, but it's just incredible. I'll probably be calling you for some advice, because I don't know what I'm doing.

YANG: Any time. I can give you advice as to how to keep them alive.

COOPER: That would be good, thank you. All right, you take care. There's breaking news ahead on a study done on the drug hydroxychloroquine that -- of course, President Trump had been pushing for coronavirus patients and his advisors were pushing. Remember, Peter Navarro talking about as a social scientist he knows how to read studies and how great it was. We'll tell you what the new study says in a moment.

[20:35:20]

COOPER: There's breaking news tonight about a new study on the effectiveness and medical impact on the drug hydroxychloroquine, famously pushed by the President for weeks in the pandemic. Joining me now is the study's lead researcher, David Holtgrave, who is the dean of the School of Public Health at the State University of New York at Albany.

Thank you so much for -- for being with us, David. Your study looked at more than 1,400 patients with coronavirus. What conclusions did you come -- come to when it -- when it comes to using hydroxychloroquine?

DAVID HOLTGRAVE, DEAN, SCHOOL OF PUBLIC HEALTH, STATE U. OF NEW YORK, ALBANY: Well, thank you for having me, Anderson. When we looked at these just over 1,400 patients who were living with coronavirus

Trump: We Have Met The Moment And We Have Prevailed On Testing; Chinese American Reporter Questions
Trump About His Comments On Testing; Another Study Shows Dru....

and were hospitalized in New York, we really looked at three questions. Did physicians actually use these drugs? Were they prescribed or not? And for whom?

And then we looked at three outcomes. Outcomes on the basis of in hospital deaths, cardiac arrest, and abnormal heart rhythms. And what we found was that, after you adjust for differences in terms of illness upon admission to the hospital and other factors, hydroxychloroquine and -- and azithromycin was not associated with a benefit in terms of in hospital death, nor was it associated with a benefit in terms of abnormal heart rhythm.

When we looked at cardiac arrest, what we saw was that the combination of azithromycin and hydroxychloroquine did seem to be associated with elevated levels of cardiac arrest. And that was true even after we made our statistical adjustment for differences in illness upon admission to the hospital.

COOPER: So not only was it not effective in -- in what they hoped it would be effective for. It actually was associated with -- with more cardiac arrest. Is that -- am I summarizing that correctly?

HOLTGRAVE: Yes, you are, Anderson. Exactly. In terms of in hospital death or abnormal heart rhythm, we didn't see a significant effect of benefit, or a significant effect of harm. But when it comes to cardiac arrest, especially for patients who got the combination of these two drugs, we saw that there was an elevated level of cardiac arrest. And that remained true even if we made these other statistical adjustments for things like patient age and gender, and level of illness upon admission to the hospital. Absolutely.

COOPER: I mean, again, it's just a reminder of the importance of -- of actual medical professionals being people who discuss medication. Not politicians or, you know, newscasters recommending it, you know, as in saying things like, "Well, it's not going to kill you," when, in fact, it's actually associated with elevated cardiac arrest. And you point out that your study does have limitations, and you write about in your report, that we need -- we still need clinical trials.

COOPER: Absolutely. This was an observational study. So not a randomized controlled trial, in which the researchers would be assigning whether or not -- by randomization -- who got the drug and who got placebo.

In our case, we did an observational study, because it was we thought it was important very quickly to look at what was the actual real world experience of physicians prescribing these drugs, and what occurred with their patients when these prescriptions were made. And the kind of observational study we did, its weaknesses is in terms of randomization, not being able to randomize to different conditions.

But its strength is that you can do something in the real world that's looking, in a very timely way and much shorter time period, to see what the effects would be. But I think that you want to take into consideration, what were the findings of our study, of other observational studies that have been released. Maybe other randomized control trials.

But also, our study was very consistent with recent FDA statement of drug safety concern for hydroxychloroquine. And it's also very consistent with a recent NIH treatment guideline on the use of hydroxychloroquine and azithromycin together.

And that NIH treatment guideline said -- they made their recommendation in a strong way, but needed to see some more empirical data. And hopefully studies like ours are filling that gaps in terms of some empirical information out there.

COOPER: Yes. It's such an important point you make, that your study is -- your observational study -- it's not an outlier. It is -- when you look at it in the context of the other studies that have been done, the other advice from the FDA and others, it -- you know, it adds to that, and it's so important in that sense.

So David Holtgrave, I really appreciate what you do. And thank you very much for -- for coming on and talking about it. Thank you very much.

[20:40:00]

Trump: We Have Met The Moment And We Have Prevailed On Testing; Chinese American Reporter Questions
Trump About His Comments On Testing; Another Study Shows Dru....

While questions pile up on that drug, the biotech firm Regeneron says it expects to begin clinical trials next month of an antibody cocktail that it hopes will prove critical as a treatment, not a vaccine. Want to bring Sanjay back, and also joining us Dr. George Yancopoulos, the company's co-founder and a chief scientific advisor.

George Yancopoulos, thanks so much for being with us.

You said that the antibody testing could actually prevent people from getting the disease. Can you just explain to me how that might work and how optimistic or -- if you're optimistic about that?

GEORGE YANCOPOULOS, CO-FOUNDER AND CHIEF SCIENTIFIC ADVISOR, REGENERON: Right, the antibody cocktail, not the antibody testing. Let me just remind you what our cocktail is. We all know when you get a vaccine that's intended to make you immune against the virus. What is immune against the virus means?

It means that the vaccine is making your body make antibodies, antiviral antibodies that will attack and kill the virus. That's why the vaccines are so important. We hope, eventually obviously, to have a safe and effective vaccine, but we've heard from so many people, from Dr. Fauci, those could still be a year or two away.

But what we've done is over the last many decades, we've developed a whole new set of technologies that we've actually invested billions on to make these sort of antibodies, antiviral antibodies outside of the body without a vaccine. Recombinantly it's called.

Grow them in these massive bioreactors, purifying them, and then we give back these antibodies, just like the antibodies a vaccine does, but much more potent, much more concentrated, much more powerful, and instantaneously they would have the opportunity to make somebody immune as if they had been vaccinated, but even more powerfully.

And moreover, they can even work where -- whereas vaccines, you can't give them to somebody who's already sick or infected. These things have been shown to actually work in other diseases in cases where people are already sick and infected.

So the reason why there's reason to have a lot of hope for this is because these exact approaches in technologies that we invented and we've developed, we've applied them over and over again to many other diseases, on the order of 10 or so different antibodies using these approaches have been or will soon be approved by the FDA.

And most notably, we use these in the Ebola epidemic, and showed rather dramatically that it could save people in the early stages of infection with Ebola or even the later stages. And as we know, Ebola is a much more universally lethal disease than the COVID.

COOPER: Right.

YANCOPOULOS: So, that provides a lot of confidence.

COOPER: Sanjay has got some questions I know as well. Sanjay?

GUPTA: Yes. So, you take these antibodies, you give them to somebody. Do you have any idea how long that might last then, in terms of giving them protection? Like, with a vaccine, the body is essentially making antibodies and it may last a long time, maybe for the rest of their lives even, the protection. What about with this -- with this antibody cocktail that you're talking about?

YANCOPOULOS: No, that's a great point. That's why we need both of these approaches. Vaccines, the goal of vaccines is they may actually make your body provide these protective antibodies forever. The limitation of our approach is that you will have to take them once a month or once every few months.

However, as we know with vaccines, they also have their limitations. They don't tend to work as well, for example, in the elderly and the immuno-compromised, some of the people that are most likely to be affected by this virus.

Trump: We Have Met The Moment And We Have Prevailed On Testing; Chinese American Reporter Questions
Trump About His Comments On Testing; Another Study Shows Dru....

Whereas giving them these antibodies that we're talking about allows those sorts of people to immediately fight against the virus.

So, there's reason for both. We need to have both. We need to have a lot of effort on the vaccine front for exactly the reasons that you talk about. You can create herd immunity in a large percentage of the population, but you also need these approaches, because they can either immediately cure people or they can actually protect people before a vaccine or those people who won't ever be responding well to a vaccine.

COOPER: Wow, it's incredibly exciting. Dr. Yancopoulos, I wish we had more time, but I really appreciate you coming on. It's fascinating work, and I look forward to following your progress. Good luck.

YANCOPOULOS: Thank you.

COOPER: We all need a lot of luck. Thank you.

Up next, a very special family reunion in Texas. A dad who left his job as an attorney to volunteer as a nurse in New York City is finally -- finally out of quarantine and back home.

[20:44:40]

COOPER: You may remember last week when we showed you a video of a young girl squealing with delight at the television set when she saw a picture of her dad -- her dad she hadn't seen in quite some time.

He'd left his family to volunteer as a front line nurse here in New York City to treat coronavirus patients. When he got back to Texas, he couldn't see his family because he was in quarantine, here's his daughters reaction when we showed his picture on the program last week.

(BEGIN VIDEO CLIP)

GRACIE MULLEN, DAUGHTER OF VOLUNTEER NURSE: Daddy, what is this (INAUDIBLE)

(END VIDEO CLIP)

COOPER: That is Gracie, now she and her mom, Dr. Gina Mullen, an ER physician are reunited with Gracie's dad Jim Mullen. We're very happy that they all join us now. Thank you so much for being with us and as a family thank you all for the sacrifice you made. Jim, that you went out of your way to do something like this you're -- you don't even work as a nurse anymore.

You're trained as a nurse, you're an attorney, if my memory serves me correct -- you've volunteered to come here in a different state, it's just amazing to me that you were willing to do that. When you look back on it now, what do you think?

JIM MULLEN, REGISTERED NURSE WHO VOLUNTEERED IN NYC: I look back on it as an amazing opportunity, it's something that I'll never forget for as long as I live. And now that I've had the opportunity to come home and finally be with Gina and Grace, I look at it slightly differently, just because you see how it affects the two-year old even when she seems so happy normally. But overall, it was an unbelievable experience that I'll never forget.

COOPER: And Dr. Mullen, what went through your mind -- first of all when you saw your husband, but also when he first told you "You know what, I'm going to go to New York and do this"?

[20:50:00]

DR. GINA MULLEN, EMERGENCY ROOM PHYSICIAN: I, you know, you're just kind of like in shock and you have a few selfish thoughts that go through your mind. But at the end of the day, I wanted to be supportive and I knew that he had been on the front lines with me in Atlanta and I wanted to support him in this. Gracie.

Trump: We Have Met The Moment And We Have Prevailed On Testing; Chinese American Reporter Questions
Trump About His Comments On Testing; Another Study Shows Dru....

JIM MULLEN: Gracie.

COOPER: Grace is so beautiful and she's just glowing and so adorable. Gracie, what did you think when you saw your dad come home?

JIM MULLEN: What did you think?

GRACIE MULLEN, DAUGHTER: (INAUDIBLE)

JIM MULLEN: Kisses, yes. Lots of -

COOPER: Were you happy?

GRACIE MULLEN: Yes.

GINA MULLEN: Take your finger out.

COOPER: And I also understand that Gracie received a special gift, is that right? Something that dad had been putting together -- that dad has been putting, having to put together.

GINA MULLEN: Yes, did you get a dollhouse?

GRACIE MULLEN: Yes.

JIM MULLEN: Did you like it? GRACIE MULLEN: Yes.

JIM MULLEN: Yes. Did you say thank you to Mr. Cooper?

GRACIE MULLEN: Thank you (INAUDIBLE).

COOPER: Dr. Mullen, just through the community outpouring we're watching again on our TV screens it's so uplifting to see given what a sobering time this has been and to see people clapping in their windows and banging pots and pans and to -- for the nurses and the doctors and you've been working in a hospital in Dallas, what message do you have for those who came out even decorated their cars to welcome you guys back -- to welcome Jim back?

GINA MULLEN: I think we're just so appreciative but we don't want to forget that there's so many people out there on the front lines and that we're just two people who are trying to serve our country and serve the people here. And so, so many people, you know, we could never say thank you to everyone, we just hope that everyone continues to stay safe and continues to take this seriously.

COOPER: Jim, just lastly to those watching right now who may be missing their own loved ones who are on the front lines, what message do you have for them? And for those who are on the frontlines and you know what that's like, what's your message for them?

JIM MULLEN: Yes, I would say just keep doing the unbelievable work that you're doing. Five minutes before I hopped on this call, I was scrolling through my Facebook feed, saw a patient at the hospital in Queens where I was that had been discharged after 29 days, incubated in 45 days in the hospital so your work is making a huge difference and paying dividends for families all over the United States.

So, we really appreciate you, there was over 4,000 nurses, EMTs and paramedics where I was in New York City that were doing exactly what I was doing and I just thank you all so much for everything that you're doing.

COOPER: Well, Jim and Gracie and Dr. Gina Mullen, thank you so much for all you have done and no doubt will continue to do, we wish you the best.

Trump: We Have Met The Moment And We Have Prevailed On Testing; Chinese American Reporter Questions
Trump About His Comments On Testing; Another Study Shows Dru....

GINA MULLEN: Thanks so much.

JIM MULLEN: Thanks. Say "Thank you, Mr. Cooper."

GINA MULLEN: Say "Thank you."

GRACIE MULLEN: Thank you, Mr. Cooper.

COOPER: Nice. Bye.

JIM MULLEN: Bye, appreciate you.

GINA MULLEN: Bye. COOPER: Up next we remember a really special lady, a mom, a grandmother and a moving tribute that her grandson made for her. In a moment we'll be right back.

[20:53:30]

COOPER: As often as possible, we try to end our show remembering some of the lives that have been lost during this crisis, and tonight we want to honor Margaret Mackenzie. She passed away from the coronavirus on Saturday. She was living in a nursing home in New Jersey when she became infected.

She was a mother to four girls, and a grandmother to 15 grandchildren and great grandchildren. They all called her Nana. Because of the lockdown, this beautiful family, they can't be together to mourn their Nana, to have the memorial service that she deserves. They can't give each other hugs, or laugh or cry together, or tell stories to remember her all in one place.

And so her grandson, Jamie Masauskas, posted a tribute online as a way to remember her. He sent it to me on Instagram, and I wanted you to see it. We've had to edit it down, but we think it's worth watching. It's a beautiful tribute to his Nana.

(BEGIN VIDEO CLIP)

JAMIE MASASKAS: It's amazing to look at this family, and know she's responsible for all of this. And a piece of her will live in all of us. She's helped molded us into the men, women, uncles, aunts, mothers and fathers that we all are today.

I'm going to miss her calling me after the 1 o'clock and 4 o'clock games during football seasons to confirm the results for her pool. I'm going to miss surprising her with a visit. I'll miss making her laugh. I'll miss the way that she would smile at me when we would make eye contact across the room at family parties.

I'll miss her singing happy birthday over the phone to me every year. I and our entire family are going to miss Nana. We love you.

MARGARET MACKENZIE: Hi, Jamie. Just Nana. I called to talk to you. I love you.

(END VIDEO CLIP)

COOPER: Beautiful tribute to a wonderful woman who is very much loved and missed. What an incredible life she lived. Our thoughts go out to all the families who lost a loved one due to coronavirus. The news continues right now. I want to hand it over to Chris for "CUOMO PRIME TIME."

[21:00:00]

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Trump: We Have Met The Moment And We Have Prevailed On Testing; Chinese American Reporter Questions
Trump About His Comments On Testing; Another Study Shows Dru....

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