

From: Fauci, Anthony (NIH/NIAID) [E]
Sent: Mon, 24 Feb 2020 11:15:02 +0000
To: Kadlec, Robert (OS/ASPR/IO); Redd, John (OS/ASPR/SPPR); Yeskey, Kevin (OS/ASPR/IO); Shuy, Bryan (OS/ASPR/IO); Phillips, Sally (OS/ASPR/SPPR)
Cc: Redfield, Robert R. (CDC/OD)
Subject: RE: Red Dawn Breaking, COVID-19 Collaborative, Feb 16 start

We really need to discuss this.

From: Kadlec, Robert (OS/ASPR/IO) (b) (6) >
Sent: Sunday, February 23, 2020 11:31 PM
To: Redd, John (OS/ASPR/SPPR) (b) (6); Yeskey, Kevin (OS/ASPR/IO) (b) (6) >; Shuy, Bryan (OS/ASPR/IO) <(b) (6)>; Phillips, Sally (OS/ASPR/SPPR) (b) (6) >
Cc: Redfield, Robert R. (CDC/OD) (b) (6); Fauci, Anthony (NIH/NIAID) [E] (b) (6)
Subject: Fwd: Red Dawn Breaking, COVID-19 Collaborative, Feb 16 start

Read this! This is unsettling if true efficient spreading in asymptomatics with negative test. Is that possible? Report is intermittent shedding is that true or artifact of poor sample collection or lack of sensitivity of pcr testing?

From Dr Eva Lee GaTech

“Means of spread A study from AMA confirmed many of the parameters assumed in our models:

- A 20-year old infected with COVID-19 left Wuhan and went on infecting 5 relatives. When they tested positive, she was finally isolated, but tested negative still, and later tested positive, and remain normal on chest CT with no fever, stomach or respiratory symptoms (cough or sore throat as late as Feb 11 (time of the paper study duration).

So spreading and its wide scope is unavoidable because there exists these very healthy individuals who can spread effectively -- even during incubation period -- while they remain perfectly healthy. It also showcases difficulty in testing -- negative test -- may not be the end of it. “

Sent from my iPhone