

I'm a bit at a loss to know how to respond to Bob Gallo. (b) (5)

Francis

From: Gallo, Robert (b) (6) >
Sent: Sunday, May 3, 2020 12:07 PM
To: Collins, Francis (NIH/OD) [E] (b) (6)
Subject: RE: Your query to Dr. Kadlec

Dear Francis,

It was a pleasure to hear from you, and yes, it has been a long time since we met or even spoke. Moons ago I was set to write to you after reading your wonderful book, but I ended up instead speaking with others about it. I should add at this point that I did not quickly respond to your email of a few days ago because I simply missed it.

It is true that I strongly suggest that OPV be quickly (already it is not quickly) brought forward for induction of a strong innate immune response to prevent or markedly reduce SARS-CoV-2 infection and/or severity until the field obtains a proven safe and efficacious vaccine producing a long lasting, adaptive immunity. OPV is very safe (notably for OPV 1 and 3 as bOPV which we will use and completely safe in a vaccinated population), simple, cheap, rather obvious, yet unique among the massive number of vaccines many (maybe most) of which are the same or at least if not exactly the same aiming at the same mechanism (targeting the spike and searching for the putative correlate of neutralizing Abs.).

OPV should work for a few months and possibly longer. Also it should be working multiple times so I think could cover more than a few months, giving us time for a proven vaccine of adaptive immunity, which might be very long lasting as is hoped.

In the main the WHO comments are correct. Of course we sought and have letters of support from them as well as from many others. Though they are again supportive in their notes to you, there is one item that surprises me. They add that there was no clinical efficacy results as yet. They know or certainly should know that there is plenty of clinical data for this concept with BCG, OPV, and live Measles vaccine. Needless to say this is what turned me on during our regular Global Virus Network (GVN) conference calls. (Incidentally GVN is an organization I have thought of bringing to your attention. I think you would find it impressive and useful). I would be happy to share with you the clinical observations with OPV if you wish.