

**From:** Fauci, Anthony (NIH/NIAID) [E]  
**Sent:** Sun, 8 Mar 2020 14:29:44 +0000  
**To:** (b) (6); 'Birx, Deborah L'; Redfield, Robert R. (CDC/OD); Kadlec, Robert (OS/ASPR/IO); Redd, Stephen (CDC/DDPHSIS/OD)  
**Subject:** FW: Hazardous use of Remdesivir in CoV-19  
**Attachments:** COVID19 linee guida trattamento 01MAR.pdf.pdf.pdf

There may be nothing to this, but we should at least be aware.

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**From:** rosario leopardi (b) (6) >  
**Sent:** Sunday, March 8, 2020 9:04 AM  
**To:** Fauci, Anthony (NIH/NIAID) [E] (b) (6) >  
**Subject:** Hazardous use of Remdesivir in CoV-19

Dear Dr Fauci,

I am copying below a letter I just sent to the editors of Lancet and NEJM that I think you should also read. It's informal as it is not meant for publication but just as a concern. Since I no longer work as a virologist, I am formally out of the field. I am however active as chief psychiatrist in Stockholm, Sweden. If you have doubts as to my expertise as a virologist or a physician, Dr Bernard Roizman at U of C knows me very well, as Markus Heilig does here in Sweden.

"I have noticed a striking difference in mortality by CoV-19 in different countries. China and Italy have a mortality that's at least 6-fold higher than that in South Korea. So far Germany and Scandinavia, totalling over 1300 cases, have not reported a single death. That's over a 35-40 fold difference.

Looking at the data more closely, I have found that China and Italy have been using the antiviral Remdesivir (Gilead Sciences) extensively on many patients in intensive care, justified as "compassionate use". In the epidemic areas of Italy this drug is now part of treatment guidelines for hospitalised patients, used on every single patient in "critical condition". (see attachment). The "rationale" is simply that the first two cases treated at the Spallanzani Hospital in Rome received this drug, and...well, actually survived.