

CORONAVIRUS

How testing failures allowed coronavirus to sweep the U.S.

The Trump administration's decision to forgo a World Health Organization test and create its own had fateful consequences, experts say.



Researchers develop a test for coronavirus in New Jersey. | Kena Betancur/Getty Images

By **JOANNE KENEN**

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On Saturday Jan. 11 — a month and a half before the first Covid-19 case not linked to travel was diagnosed in the United States — Chinese scientists posted the genome of the mysterious new virus, and within a week virologists in Berlin had produced the first diagnostic test for the disease.

Soon after, researchers in other nations rolled out their own tests, too, sometimes with different genetic targets. By the end of February, the World Health Organization had shipped tests to nearly 60 countries.

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The United States was not among them.

Why the United States declined to use the WHO test, even temporarily as a bridge until the Centers for Disease Control and Prevention could produce its own test, remains a perplexing question and the key to the Trump administration's failure to provide enough tests to identify the coronavirus infections before they could be passed on, according to POLITICO interviews with dozens of viral-disease experts, former officials and some officials within the administration's health agencies.

The slowness of the testing regimen — which, administration officials acknowledged this week, is still not producing enough tests to meet the national demand — was the first, and most sweeping, of many failures. So far there have been confirmed cases in at least 23 states, and at least 15 deaths, while the stock market plunged and an otherwise healthy economy braced for a major disruption.

But neither the CDC nor the coronavirus task force chaired by Vice President Mike Pence would say who made the decision to forgo the WHO test and instead begin a protracted process of producing an American test, one that got delayed by manufacturing problems, possible lab contamination and logistical delays.

“Please provide an explanation for why the Covid-19 diagnostic test approved by the World Health Organization was not used,” Sen. [Patty Murray](#), the ranking Democrat on the Senate health committee, who represents the hard-hit state of Washington, asked in a 3½-page letter on the testing fiasco to Pence, Health Secretary Alex Azar, CDC director Robert Redfield, and Food and Drug Administration Commissioner Stephen Hahn.

So far, none has been provided.

“We developed a test very rapidly after China produced the [genetic] sequence. We are in the process of validating that and that’s the test we’re going to be using,” said the CDC’s Stephen Redd, a 30-year veteran of the agency, at a recent briefing, even as members of the presidential task force acknowledged that the pace of testing had lagged.

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Azar, who initially led the White House response and has now been sidelined by Pence, also has kept defending the testing regime.

“We’ve actually been progressing with this on par with our peer countries,” he told reporters recently.

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The government’s incapacity to conduct widespread testing slowed diagnoses, creating chains of infection. It also deprived epidemiologists of a map that

could have told them how far and how fast the virus was traveling and where they should concentrate efforts to slow it down.

But there were additional problems with the administration's approach to testing, according to experts and former officials. From the start, the White House focused on containment, trusting that a limited ban on travel to and from China could somehow force a fast-moving virus to stop cold when it hit the Chinese border. But, while containment might have helped buy the U.S. some time, without aggressive domestic surveillance through testing, it was an incomplete strategy.

"They needed and still need to be searching for where the cases are, instead of trusting that limited travel bans were keeping out a virus that was probably already on the march," said former FDA Commissioner David Kessler.

That wasn't how the president viewed it.

"China has been working very hard to contain the Coronavirus," Trump tweeted on Jan. 24. "The United States greatly appreciates their efforts and transparency. It will all work out well. In particular, on behalf of the American People, I want to thank President Xi!"

But once the CDC finally began its national testing regime, it faltered in almost every way imaginable.

The initial tests didn't work, and officials are probing whether there was possible contamination. The protocol for who could be tested was restricted to people already known to have been exposed to the virus or who had been in China, even as the epidemic raced to multiple countries like Japan, South Korea, Italy and Iran.

Decisions about testing are usually made by scientists, but Democrats have accused the White House of putting politics above expertise — and lacking a coherent response.

"We are staring down a potential pandemic," Senate Minority Leader [Chuck Schumer](#) said recently. "We have a crisis of coronavirus, and President Trump

has no plan, no urgency, no understanding of the facts or how to coordinate a response.”



The Centers for Disease Control and Prevention in Atlanta. | Jessica McGowan/Getty Images

The failures weren't by any means the CDC's alone. The FDA did not immediately trigger a regulatory workaround enabling qualified medical centers to roll out tests that they had designed themselves — tests that are now starting to become more widely available.

And the mistakes were not just in testing.

Trump repeatedly boasted of airport screening and travel restrictions — which Azar and other administration leaders touted as aggressive and historic in their scope — but experts told POLITICO that those measures that were far too little, too late, and too focused on China.

“I closed them down very early, against the advice of almost everybody, and we’ve been given rave reviews,” Trump proclaimed to a Fox News audience at a televised town hall this week.

But after the virus started spreading and cases popped up outside China, the U.S. policy did not immediately change.

Other failures appear to have been related to a lack of preparation within agencies that spanned administrations but certainly continued through the first three years of Trump’s tenure.

Masks and gowns were in short supply despite years of talk about bulking up federal emergency stockpiles — without Congress appropriating enough money. A whistleblower has alleged HHS staff were inadequately protected when greeting U.S. evacuees returning from Wuhan, China. The CDC has had trouble wrangling passenger information from airlines to contact people who may have been exposed on flights, administration officials said. And health officials are trying to figure out how to handle a second “floating petri dish” in the Pacific, another cruise ship contagion with elderly passengers at high risk. With some passengers already sick, test kits were delivered by helicopter.

James Lawler, a global-health expert at the University of Nebraska Medical Center’s Global Center for Health Security, where some coronavirus evacuees are being treated and the possible course of the epidemic is being modeled, said the government’s failures have been so extensive that when asked what went wrong, he parried, “What went right?”

Airport passenger screening has gotten less scrutiny than testing, but it appears to be lagging, too. Acting Homeland Security Secretary Chad Wolf told House lawmakers that Customs and Border Protection and medical staff had screened

more than 50,000 passengers on flights from China and Iran who were funneled through 11 airports. But the screening, which involved measures such as testing people for elevated body temperatures, may have detected only one in three infected travelers arriving from overseas, Harvard School of Public Health communicable disease expert Marc Lipsitch told a news briefing this week.

“I think you could have certainly hundreds, if not more, cases around the United States by this point,” he said.

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- Reps. Mario Diaz-Balart and Ben McAdams **have tested positive for coronavirus**, the first members of Congress to do so.

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In recent days, the administration has stressed the seriousness of its preparations and downplayed partisan politics. It hailed the bipartisan support for an \$8.3 billion emergency spending bill to rush money and supplies to states, hospitals and labs, as well as to key federal agencies searching for vaccines, treatments and shorter term solutions to minimize the spread.

But at many times, administration officials have seemed to be under political pressure to minimize the risks of the coronavirus, partly to fall in line with the president's own statements. Trump has often downplayed the severity of the outbreak, contradicting the top government scientists squirming right by his side. At other times, health officials have outlined the risks of a major epidemic while Trump's economic officials, eyeing the plunging stock markets, have insisted that everything's under control.

"We have contained this," White House economic adviser Larry Kudlow insisted to a television interviewer on Feb. 25. "I won't say airtight but pretty close."

Two days later, the CDC reported the first case of community transmission, meaning there was no known link to any travel. More would follow.

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The cascade of miscues and misjudgments continues to challenge the U.S health care system, the economy and the national transportation network, as the Trump administration struggles to mount a response in an era of rancor, disunity and distrust.

The rivalries in the administration — between health agencies such as the FDA and CDC, and between individual officials — that appeared to hamper the initial response have been only partly quelled by the appointment of Pence as leader of the task force. This week, Pence sidelined Azar while adding new officials, like Medicare chief Seema Verma, to the group of officials joining the vice president for his news briefings.

“The level of chaos with which the administration has greeted the spread of coronavirus is unacceptable and frankly frightening,” several dozen House Democrats wrote in a letter to Trump this week, citing “wildly conflicting answers to critical questions” that suggest a lack of coordination and communication among crucial federal agencies.

And science can be hard: Experts can fumble. Assessments of risk and plans of counterattack change as scientists learn more about a new virus that is believed to have leapt from bat to pangolin to human and then surreptitiously swept across the planet.

The disease has now spread to more than 60 countries in six continents, sickening more than 100,000 and killing well over 3,000.

Soon there will be a second wave of decisions to be made about controlling the “hot spots” emerging in the U.S. — politically sensitive moves that could disrupt daily lives and damage businesses. Some of those steps may turn out to be mistaken as well — and intrinsically difficult public health measures will be even harder to carry out if people get mixed messages from the government

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Some state and local public health agencies and political leaders have begun to order quarantines of people who might have been exposed to the virus and canceled schools and events in order to stop the progress of the disease.

While the administration has been supportive of some of those moves, it is still sending mixed signals.

“I know events are being canceled,” Kudlow told CNBC on Friday. “I wish they wouldn’t be canceled, because I think there may be overreaction in certain cases.”

Brianna Ehley, David Lim, Stephanie Beasley and Kathryn A. Wolfe contributed to this report.

CORRECTION: Due to an editing error, an earlier version of this report misstated Sen. Chuck Schumer’s title. He is the Senate minority leader.

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