

A Bad Case of the Blues

Will bioterrorism and related perils be the biggest threats to public health in the new year?

December 4, 2017 By [Kate Ferguson](#)

As 2017 fades, undeniable dangers to public health hover like an ominous cloud over the United States. In 2018, health will continue to be a national security issue as evidenced by budget requests from agencies such as the Centers for Disease Control and Prevention (CDC) and the Department of Health and Human Services (HHS) that seek funds to counter possible chemical, biological, radiological and nuclear hazards (CBRN) or cyberthreats to civilian populations and government.

The drama began more than a decade ago after anthrax attacks were launched during the administration of former President George W. Bush. In response, Bush proposed a comprehensive program to fast-track the research, development, acquisition and availability of medical countermeasures, such as vaccines, antitoxins and antibiotics, to improve the government's preparedness to respond to potential disasters of these types. He announced the effort in his 2003 State of the Union address and then signed it into legislation the following year in the White House's Rose Garden.

The act was called Project Bioshield, and it outlined plans for the government to team up with pharmaceutical companies to study and develop products that could be stockpiled should CBRN agents or events threaten the country.

More recently, just prior to fiscal year 2018, the CDC and HHS submitted budgets that proposed establishing an emergency federal fund for measures to prevent, prepare for, or respond to these kinds of threats, as well as emerging infectious diseases, such as the Ebola and Zika viruses.

In addition, the agencies asked for a continuation of appropriations to produce antiviral drugs to meet the needs of individuals severely ill with influenza and to create devices that detect and diagnose new life-threatening strains of the flu.

In addition, HHS requested an increased budget to safeguard computer networks and systems and thwart attempts to access and steal data of all kinds from government entities and businesses in the private sector.

Certainly, the government remains committed to Project Bioshield. Despite flaws in the early legislation that resulted in many companies hesitating to partner with federal authorities, some

businesses reconsidered and looked beyond insufficient funds for the program, unclear expectations from the government and bureaucratic confusion about the program's rollout. Anthony Fauci, the director of the National Institute of Allergy and Infectious Diseases, believes "naturally occurring diseases and bioterror threats are pieces of the same pie."

Biodefense research to develop medical solutions in case of a CBRN event offers health benefits for everyone. "A lot of the expertise that we have been building up for biodefense is naturally the brainpower that could be applied clearly at something like SARS [severe acute respiratory syndrome]...the possibility of pandemic flu or a variety of other issues," Fauci says.

Since the launch of the program, HHS has stockpiled almost two dozen remedies to counteract CBRN hazards, such as inhalable anthrax and smallpox. (Some are vaccines designed for people with weakened immune systems.)

Still, concerns linger about the risks the public faces should the need arise for the government to administer unapproved and untested medicines to people following a bioterror attack.

Would it be enough to tell folks they're taking a chance with these treatments and then allow them to decide what to do?

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