

US moving to stockpile syringes

Need will explode when COVID vaccine is ready

Katie Wedell
USA TODAY

As scientists race to develop a COVID-19 vaccine, some experts warned that syringes could become the next face masks – coveted items in short supply able to plunge the market into chaos.

But it appears that the federal government and health care supply companies learned a lesson from the mad scramble for masks and other personal protective equipment that came to symbolize the early weeks of the pandemic.

Rather than wait for a viable vaccine to stock up on syringes, the federal government is securing them now. To date, it has signed \$260 million in contracts for their production.

“In the U.S. we’re in a well-positioned and well-prepared place,” said Chaun Powell, group vice president of strategic supplier engagement at hospital supply-purchasing group Premier Inc.

Global demand could still drain U.S. manufacturers’ supplies, he warned, and syringe shortages could emerge if the vaccine arrives earlier than anticipated.

A vaccine could be ready by early 2021, said Dr. Anthony Fauci, director of the National Institute of Allergy and Infectious Diseases, during the Senate Health, Education, Labor and Pensions Committee this week. But there’s no guarantee, he warned.

Questions about syringe shortages began surfacing as early as May.

Dr. Rick Bright, who President Donald Trump had reassigned in April from leading the Health and Human Services office tasked with helping develop a COVID-19 vaccine, submitted a whistleblower report on May 5 that – among other things – warned the United States would need as many as 850 million more syringes.

That’s enough to give to every American two shots of the COVID-19 vaccine and to also handle the increased demand for flu shots that medical experts see after a pandemic.



Dr. Rick Bright says one of his bosses shrugged off a pending need for syringes.
SHAWN THEW/AFP VIA GETTY IMAGES, POOL

In his report, Bright says that when he raised the issue to his superior, his boss told him they should worry about syringes when there was something to inject.

He eventually relayed his concerns to White House Trade and Manufacturing Policy Director Peter Navarro who wrote in a memo to the coronavirus task force: “Our current inventory of these supplies is limited and, under current capabilities, it would take up to two years to produce this amount of specialized safety needles. We may find ourselves in a situation where we have enough vaccine, but no way to deliver all of it.”

Bright says he was removed from the vaccine post because he was critical of the Trump administration’s leadership on COVID-19.

His complaint said the Strategic National Stockpile had just 15 million syringes available in May.

In addition to anticipating a two-shot vaccine, Bright’s calculations included about 180 million more syringes for an increase in requests for flu shots. Powell said that makes sense.

“In any given year we typically see about a 4% annual growth rate on flu shots and last year was estimated somewhere between 130 and 150 mil-

lion” shots administered, he said. “In a post-pandemic outbreak year that 4% jumps to 20%. We saw it historically with Ebola, we saw it with SARS.”

But the 850 million estimate also assumes every single American will get the vaccine, which is not possible, or even necessary for herd immunity.

Still, on a May 7 earnings call, the CEO of manufacturer Becton, Dickinson and Company said manufacturers could make that many – or even a billion – syringes, but not on a moment’s notice.

“People have to be proactive in beginning to order and stockpile these devices now,” the CEO, Thomas Polen, said. “It cannot be ‘wait until the last minute’ and expect that those products will be able to be manufactured.”

He said some governments around the world acted quickly to order syringes from BD, while the company continued to stress the urgency with other countries that were not as concerned. He did not specify which countries those were. The U.S. put in an order with BD on May 27.

In a normal year, U.S. hospitals go through 4.5 billion disposable, plastic syringes. That doesn’t include syringes pharmacies and doctors’ offices use for flu shots. It also doesn’t include the re-

tail market for diabetics or the flush injectors hospitals use for IV fluids.

“If we as a nation had to pivot and utilize those, we could,” Powell said.

If the market had been required to go from making 500 million syringes a year to making an additional 850 million, that would have been a problem, he said. But since the U.S. produces billions, it’s not as much of a stretch.

The U.S. Department of Health and Human Services has contracted with four companies to produce at least 820 million syringes – which includes 420 million by the end of this year and the rest next year.

Some 320 million syringes will come from two contracts with Retractable Technologies Inc. in Texas and Marathon Medical Corporation in Colorado, which got contracts in May for \$83.8 million and \$27.4 million respectively. The contract with BD is for \$11.7 million.

The rest will come in phases from a \$138 million contract with ApiJect Systems America.

BD is the largest syringe manufacturer in the world and had already increased its production before getting the government contract in late May, according to spokesman Troy Kirkpatrick.

“The U.S. has done a nice job of ramping up production,” Powell said.

But there are still factors that could complicate the rollout, he said. If the vaccine comes earlier than expected, manufacturers will have less time to stockpile syringes. There are also questions about whether companies will pre-fill syringes with the vaccine or distribute it in vials separate from the syringes.

Health-care providers hope to avoid the pandemonium that occurred in the early months of the pandemic as protective medical gear such as N95 masks became scarce.

Hospital administrators swapped stories of traveling across state lines to meet unknown dealers in warehouse parking lots just for a chance at a few thousand masks. Buyers were inundated with offers with no way to weed out scams. Governors called out the lack of coordination and support from the federal government.

Phones have virus tracker, sort of

Many surprised by recent discovery of tracing tool

Ryan Randazzo
Arizona Republic
USA TODAY NETWORK

PHOENIX – Yes, your phone might already have a tool to help track COVID-19 on it. No, it’s not tracking you.

Many Arizonans were surprised recently to discover that their phones have a COVID-19 tracking tool that came with the latest update of their operating system.

The tool, though, isn’t yet being used in Arizona. It would require the Department of Health Services to develop an application and submit it to the tech companies for approval. Also, users would have to agree to participate.

The presence of “COVID-19 Exposure Logging” on phones is unsettling to some nonetheless, as many people have discovered the tool and assumed it was already in use by governments or tech companies to track people’s health.

Twitter and Facebook are full of references tying the update to June 22 cellular outages. It wasn’t related. If you have the tool on your phone, it came from the latest operating system download you approved.

Facebook has even screened some of the references, indicating they have been fact checked and are partly false. But many other references remain, many encouraging people not to turn the notifications on.

To see if the tool is on an Android device, go to “Settings” and then “Google Settings.”

To see if the tool is on an iPhone, go to “Settings” and then “Privacy” and then “Health.”

In April, Apple and Google announced the platform was coming, and it’s been reported in the technology press such as Wired.

“Privacy, transparency, and consent are of utmost importance in this effort, and we look forward to building this functionality in consultation with interested stakeholders,” the companies said in an April joint statement announcing the partnership. “We will openly publish information about our work for others to analyze.”

If a health department wanted to develop an app for people to allow contact tracing, the platform from Google and Apple would ensure that it worked on all phones running those operating systems.

An app would use Bluetooth signals to indicate when two people, or at least their phones, are near one another. It could store the data for 14 days, the maximum time it seems to take people to get sick when exposed to the new coronavirus.

If a person using the app tests positive for COVID-19, that person could notify the app, which could then notify those people who had spent enough time near the infected person to warrant concern. A health department could give them instructions on how to prevent spreading the virus to others or seek treatment, if needed.

The companies further explained the platform



The presence of “COVID-19 Exposure Logging” on phones is unsettling to some who assumed it was already in use by governments or tech companies.
THINKSTOCK

when it was released in May for public health agencies to use if they wanted.

“What we’ve built is not an app – rather public health agencies will incorporate the (application programming interface) into their own apps that people install,” the companies said, explaining that the partnership is intended to make public apps for contact tracing work better.

“Each user gets to decide whether or not to opt-in to Exposure Notifications,” they said. “The system does not collect or use location from the device; and if a person is diagnosed with COVID-19, it is up to them whether or not to report that in the public health app. User adoption is key to success and we believe that these strong privacy protections are also the best way to encourage use of these apps.”

The Arizona Department of Health Services declined to respond regarding whether the agency had any intention of developing an app that could use the platform.

Alabama, North Dakota and South Carolina were working to use the companies’ technology, and Apple and Google reported that 22 other nations have shown interest.

Despite the announcements the platform was coming, finding it embedded on phones seems to have given the effort new reality for consumers, even if it’s not in use.

Phil Simon, a technology expert, author, speaker and adviser who lives in Arizona, said the distrust of tech companies is not unexpected, and neither is the social media storm of misinformation that ensued.

“Outrage sells more than facts,” Simon said. “Studies have indicated people share fake news more than they share facts.”

He said the propensity to distrust technology companies stems from instances in which those companies or their employees have acted in bad faith, but the contact tracing platform doesn’t concern him, and he doesn’t think that they are doing it as a way to generate revenue.

“They are agreeing this is a way to potentially limit its spread,” Simon said. “Their motives, I think, are benign. I’m OK with a little information sharing if it’s going to keep me alive and keep me from spreading disease to people.”

If states do deploy apps to help with contact tracing, building trust and getting people to participate will be important, Simon said.

“These apps benefit from network effects,” he said. “The more people that use it, the better it is.”

Ken Colburn, founder and CEO of Data Doctors Computer Services in Arizona, recently wrote about the platform, noting that some of the shortcomings could be people traveling between states needing to use separate apps and health agencies confirming positive cases before alerting potential contacts.

But he, too, said the presence of the platform on phones is not a concern.

“For the time being, there’s nothing to be concerned about if your smartphone has the ‘Exposure Notification’ option, as you are in total control,” Colburn said. “Despite what you may be seeing from outraged social media posts, neither company is automatically tracking your movements or forcing your device to engage in contact tracing.”

Obituaries

Patrick Joseph Fisher

MT. ANGEL - Patrick Fisher, of rural Woodburn, passed away at home from multiple health issues. He was the son of Leonard and Marie Fisher of Mt. Angel, who owned the Mt. Angel Drug Store for many years. Patrick graduated from Mt. Angel Prep and attended the University of Portland. He served 4 years in the US Air Force and then worked in Seattle for 28 years at Lynden Transport. He Married Christl in 1978 and she died in 2000. He rekindled a romance from post-military years, and married Carole Schneider Lake in 2002. They traveled to Hawaii, Europe, China, Australia, and Alaska they also went to on many cruises. Patrick loved watching sports, especially the Mariners and Seahawks. He was also an avid supporter of many charitable causes. He is survived by his wife, Carole; siblings, Joan Jones, Char Unrein, David Fisher, and Sharon Patterson, as well as many nieces and nephews. A private graveside service has already been held.

Donations can be made in Patrick’s memory to The Wounded Warriors Project (PO box 758516, Topeka, KS 66675-8516 or online) or the Benedictine Sisters (Abbey Foundation of Oregon, Box 497, St. Benedict, OR 97373-0497 Assisting the family is Unger Funeral Chapel - Mt. Angel.

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