

## **BRIEF19**

*A daily review of covid-19 research and policy.*

### **POLICY BRIEFING**

**White House and CDC clash over reopening guidance.** On May 7<sup>th</sup> the New York Times [obtained](#) detailed guidance for reopening drafted by the Centers for Disease Control and Prevention. The document contains targeted guidance for everything from restaurants to daycares to religious institutions. The White House had rejected the recommendations as too prescriptive, with the guidance for churches being a particular sticking point. A CDC spokesman told the Times that the guidance was still under discussion with the White House. The administration continues to wrestle with how to weigh President Trump's desire to open the economy against public health concerns. Many experts fear that if we reopen too soon, we will find ourselves back in a surge, necessitating the reinstatement of stay-at-home orders. *New York Times*. [8 May 2020](#).

**Data suggests premature opening.** A common criterion among plans to re-open, including the President's, is that covid-19 cases be on the decline. Despite this, three states started to re-open on May 4<sup>th</sup> despite an increase in the number of covid-19 related deaths. More concerning, a federal model, not previously available to the public but [obtained](#) by the *New York Times* on May 4, showed a predicted national trend towards more daily covid-19 deaths. Additionally, data shows that Florida and Georgia, two of the earliest states to re-open, have recently decreased the number of covid-19 tests performed daily, despite the fact that ample testing is another criterion for re-opening under President Trump's plan. While the effects of opening remain to be seen, premature openings could cost many lives. *New York Times*. [5 May 2020](#).

**FDA to address sketchy antibody tests.** *Brief19* previously [reported](#) on the poor quality of existing coronavirus antibody testing kits. These tests came to market under Emergency Use Authorizations granted by the FDA. As a result, new tests were not required to go through the regulatory processes normally require that manufacturers demonstrate that their products do what they purport to do. Many new tests have failed to produce accurate results. This could have substantial implications as states make decisions based on information garnered from antibody tests about reopening. To combat inaccuracies, on May 4<sup>th</sup> the FDA ordered antibody test manufacturers to provide evidence within ten days that their tests are accurate. Those that fail to do so will be removed from market. If we are to make policy decisions based on epidemiologic information, it is crucial that the information be accurate. This is an important step towards that goal. [5 May 2020](#).  
—Kimi Chernoby, MD, JD, Policy Section Editor

**Remdesivir: So now what?** Last week, the FDA granted remdesivir emergency use authorization for severely ill hospitalized patients with covid-19 after Anthony Fauci announced that data from a study conducted by the National Institutes of Health preliminarily showed the medication could shorten the duration of hospitalization for these patients. In an unprecedented move, the U.S. government [will be allocating](#) the drug to authorized distributors and federal agencies, taking allocation decisions out of the hands of the drug's maker, Gilead. While Gilead has not yet announced the price for the medication, it has pledged to donate an initial 1.5 million doses, enough to treat 150,000-300,000 patients, with plans to produce enough medication to treat 1 million people by the end of 2020. *Politico*. [7 May 2020](#). —Jordan M. Warchol, MD, MPH

**USDA covid-19 food assistance neglects food workers.** The USDA Coronavirus Food Assistance Program is providing [\\$16 billion](#) in direct aid to farmers and ranchers while purchasing \$3 billion in perishable foods from distributors. The Agriculture Department has also taken steps to purchase food for food bank distribution and to subsidize food bank administrative expenses. Some states have expanded Electronic Benefit Transfer and Supplemental Nutrition Assistance Program benefits (formerly known as the “Food Stamp Program.”) (Even so, there has been [an alarming rise](#) in American households experiencing food insecurity.) Left out of these relief [measures](#), however, are the workers on whom the supply chain depends. Many have lost jobs—60% of jobs lost in March were in food services—while others, like employees of meat packing plants, are considered essential and are working in crowded conditions that have already led to SARS-CoV-2 [major outbreaks](#). At one Tyson Foods [plant](#) in Iowa, for example, more than half of the workers have tested positive for the virus. *Various*. [7 May 2020](#).

**CDC study fails to explain racial disparities in hospitalization.** A recent CDC Morbidity and Mortality Weekly [Report](#) shows that while Black patients accounted for 47% of all all-cause hospitalizations in patients in Atlanta and southern Georgia through March 2020, Black patients comprised over 80% of the patients hospitalized specifically for covid-19. The median age was not significantly different between Black and non-Black patients. Black patients were not more likely to have diabetes, heart disease, or severe obesity, though they were more likely to be Medicaid beneficiaries. With respect to covid-19 care, Black patients were not more likely to require mechanical ventilation or die in the hospital. This information suggests that Black patients did not have increased risk factors for hospitalization in general, but were nevertheless disproportionately represented in patients hospitalized especially for covid-19. *Abbreviated from Brief19 for* [5 May 2020](#).  
—Aida Haddad, M.Div.

**Tribal tribulations continue.** Last week, *Brief19* [described](#) the disproportionate effect covid-19 has had on the Navajo nation. Delays in financial relief provided under the CARES Act, the \$3 trillion relief legislation passed last month, have only made things worse. The bill appropriated \$8 billion for tribal governments. However, Alaska Native corporations, which are for-profit entities, have made claims that they should also have access to this funding. Their position is that they manage areas of Native land and, in essence, function in a government-like capacity. Tribal governments filed a [lawsuit](#) against the United States Treasury Department after it decided that these corporations could compete and apply for the aid. As a result, the funds are now frozen, causing further delays in help for the intended recipients of the money. *New York Times*. [4 May 2020](#).  
—Kimi Chernoby, MD, JD, Policy Section Editor

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*Brief19* is a daily executive summary of covid-19-related medical research, news, and public policy. It was founded and created by frontline emergency medicine physicians with expertise in medical research critique, health policy, and public policy.