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Mock Clade X pandemic decimates human population; denotes global pre-planning needs

Monday, May 21, 2018 by [Kim Riley](#)

The lack of both a protective vaccine and a proactive worldwide plan for tackling the spread of a catastrophic global pandemic resulted in the death of 150 million people across Earth during the recent Clade X simulation exercise hosted by the Johns Hopkins Center for Health Security.

And minus any pre-pandemic policy solutions or an effective vaccine in the pipeline to counteract the ongoing spread of the fabricated Clade X —

identified as a novel strain of a human parainfluenza virus with genetic elements of the Nipah virus — the fabricated death toll was expected to rise to 900 million deaths worldwide and 30 million to 40 million deaths in the United States, said Anita Cicero, deputy director of the Center for Health Security, who acted as host during the day-long Clade X event held May 15 in Washington, D.C.



Credit: Johns Hopkins Center for Health Security

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The Clade X simulation was held to illustrate the possible consequences of a pandemic, the challenges posed and consideration of policy solutions toward improving outcomes, Cicero said in starting the event, which she called a fictional, but well-researched scenario based on epidemiologic modeling, public health principles and an assessment of past outbreaks.

“We aren’t asserting that the scenario [in Clade X] is the most likely to occur,” she said, “but we are asserting that we’re simulating an event that is possible.”

Cicero encouraged the participants and the audience on site and online to look at the big picture and policy implications for health security rather than the center’s assumptions being presented during the livestreamed exercise.

“Health security issues are nonpartisan issues,” she said, “and this exercise is explicitly non-partisan.”

The Clade X event featured 10 “players” — former high-ranking U.S. government officials and a current United States congresswoman prominent in the fields of national security or epidemic response — who portrayed members of the Executive Committee, also known as EXComm. As a team of advisors to the president, they engaged in four fake National Security Council (NSC) meetings to resolve real-world policy issues upon learning a pandemic had struck.

Cicero pointed out that EXComm members were not meant to represent the current or any former administration and they used their past experiences in previous high-level federal positions, as well as their best judgement, in addressing significant uncertainties in current prevention and response capabilities, hamstrung by policy challenges at the federal level.

The scenario opened with the present-day outbreak of a new, serious respiratory disease in Germany and Venezuela. In the weeks that followed, a radical group focused on reducing the human population claimed responsibility for the creation and intentional release of Clade X — claims that later were verified by government and international bodies, including the World Health Organization (WHO).

There’s no vaccine for Clade X and pressure on the players to help the president find solutions intensifies as cases continue to appear in the United States, first at a Massachusetts university and then near the nation’s capital, among other locations. Clade X quickly caused widespread, worldwide angst as the numbers of severe cases and deaths mounted.

Within a year, 150 million people died, 15 million of them in the United States, where a constitutional crisis unfolded: both the president and vice president fell ill, leaving the Speaker of the House as acting president, and one-third of the members serving in Congress died following the failure of the first vaccine introduced during the tabletop exercise.

Finding solutions

During each of the four EXComm meetings, the players work to solve evolving policy challenges as the crisis escalates. Their dialogue and efforts were unscripted and demonstrated how challenging the situation would be to handle.

For instance, during the first meeting, Dr. Tom Inglesby, director of the Center for Health Security, who plays the White House national security advisor, relayed that the president wanted to know what EXComm members think should be done to help Venezuela.

In setting up the situation, fake news clips from the pretend GNN network would inform EXComm members, followed by administration updates from Eric Toner, a senior associate with the center who played NSA’s senior director of global health security.

GNN reporters said Caracas had fallen into chaos. The city had no isolation capabilities, so many people were turned away at the already overloaded hospitals unless they had Clade X, according to the GNN special report. Venezuela had publicly rejected medical help from America, but medical personnel from Cuba, Russia and Iran were allowed into the country. “Only massive international intervention will help solve the crisis,” an anonymous source told GNN.

Toner said one option the administration had developed for EXComm consideration included sending six U.S. Department of Defense (DOD) teams and two hospital teams to provide “unprecedented help.”

Another center senior associate, Amesh Adalja, playing an infectious disease expert at the Centers for Disease Control and Prevention (CDC), reported to EXComm members that Clade X had an uncertain origin, no known antiviral drugs would be helpful in treating it, none were in development or known to be effective, and it would take more than a year to develop and test for a vaccine.

“Should we deploy such significant DOD help?” asked Inglesby.

“I would support it,” said John Bellinger, former legal adviser to the U.S. State Department, who played the head role of U.S. Secretary of State. “We need to lead internationally. Venezuela isn’t North Korea, with which we have tense relations, and it will accept our support.”

But if the United States were to deploy federal help to Venezuela, then the U.S. also needed to consider if it would be able to provide American personnel with adequate protection, said former CIA General Counsel Jeff Smith, who played the director of the CIA.

U.S. Rep. Susan Brooks (R-IN), the only player to act out what she would do in her current position as a federal lawmaker, echoed that concern.

“We have little to no relationship with this country,” Rep. Brooks said. “We have no idea how long doctors would be there. And they could bring the virus back here. If China and Russia are there to help contain it, then let them and we can focus on Germany.”

“Yes, we do want to coordinate with other countries,” said former U.S. Food and Drug Administration Commissioner Margaret Hamburg, who played the U.S. Secretary of Health and Human Services, “but we don’t have to do it all ourselves.”

Former U.S. Senate Majority Leader Tom Daschle, who played his previously held leadership position, suggested it might be better to send “a small team to see what’s actually happening on the ground there first.”

On the contrary, said Bellinger, it’s a failed state overall “so in our national security interest, we need to cut it off now.”

Roughly an hour into the first EXComm meeting, former Undersecretary of the U.S. Department of Homeland Security Tara O’Toole, who also acted in her previous position, threw in a twist.

“We just got word that the Coast Guard has intercepted boats carrying people from Venezuela to Puerto Rico who are seeking refugee status based on the epidemic,” O’Toole said. “The Coast Guard has requested more resources for more ships to intercept these boats.”

O’Toole said the United States wasn’t equipped to offer such significant medical care on the ground in Venezuela and suggested that the administration instead offer management capabilities and advice.

Rep. Brooks asked her fellow EXComm members if Puerto Rico was able to handle an influx of people coming from Venezuela and whether members of the Coast Guard were protected as they intercepted the boats with fleeing refugees.

“I’m concerned about protecting our people in the Coast Guard and in Puerto Rico, especially considering what Puerto Rico has already been through,” she said, referring to the ongoing work there to overcome devastation wrought on the American territory by back-to-back hurricanes in 2017.

The first EXComm meeting ended with a GNN special report from an anonymous source who said it was unclear if the virus had escaped or was occurring naturally, and neither WHO nor the CDC could confirm whether it was a bioweapon.

The subsequent three EXComm meetings that followed put the players in increasingly tense situations that resulted in similarly stressful policy discussions. And by the end of Clade X, another vaccine, the mock Omega vaccine, supposedly goes into production with a third of the world’s population expected to have access to it within six to eight months.

Once 80 percent of the remaining population received the vaccination, then Clade X would be under control, according to an infectious disease expert during the simulated exercise. If a vaccine had been developed earlier, maybe more lives could have been saved, he surmised in a mock TV report.

Final word

At the conclusion of the exercise, Cicero presented the Center for Health Security’s six strategic policy goals that would need commitment from the United States to prevent or reduce the worst possible outcomes in future pandemics. The recommendations are to:

1. Develop capability to produce new vaccines and drugs for novel pathogens within months not years.
2. Pioneer a strong and sustainable global health security system.
3. Build a robust, highly capable national public health system that can manage the challenges of pandemic response.
4. Develop a national plan to effectively harness all U.S. healthcare assets in a catastrophic pandemic.
5. Implement an international strategy for addressing research that increases pandemic risks.
6. Ensure the national security community is well prepared to prevent, detect, and respond to infectious disease emergencies.

Going forward, the center’s Clade X project team plans to synthesize the most important points from the exercise and disseminate the findings among members of the U.S. and international biosecurity policy communities, Cicero said.

“The center will translate these goals into policy recommendations,” she added.

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