

was phased out in the military, only for cost-cutting reasons.

According to an analysis of military health-care records by investigative reporter, Michael J. Berens, in the *Seattle Times* on Oct. 14, "The respiratory virus now infects up to 2,500 service members monthly—a staggering 1 in 10 recruits—in the nation's eight basic-training centers."

The military symbol on the map locates several basic training centers, and other large bases. Internal military reports obtained by the *Seattle Times* record that at least six recruits have died from illness associated with the virus—four within the last year. A Defense Department decision had been made to resume the vaccine, but efforts to ramp up production are going so haltingly that its first use may be in 2007 to 2009. Berens reports, "Military foot-dragging

and high turnover of procurement officers have caused the replacement vaccine to fall behind schedule."

Boot camp virus spreading beyond military personnel, and is a general threat. Physicians at the Madigan Army Medical Center, Tacoma, Washington, reported six children of military staff diagnosed with the virus last Winter.

'Still Unprepared'

The U.S. map of clusters of incidence or potential, for just these four disease-types, underlines the general point about the entire spectrum of much-increased microbial threats to health today. In the face of this—and the annual lack of sufficient supplies of the common vaccines in recent years—the Administration's refusal to take required Federal

LaRouche on Health Policy: 'Enron-Type Dereliction'

Lyndon LaRouche was interviewed on Oct. 22 on Cincinnati radio, by talk show host Mike McConnell; the topic of preparedness to handle disease came up in the discussion of national security.

McConnell: Subject here will revolve largely around the lack of flu vaccine and who might be responsible for this. . . . Now, you make a point that you believe, this is according to the *Executive Intelligence Review*, that the lack of flu vaccine here falls—that the responsibility falls into the lap of President Bush.

LaRouche: It does, in many respects. First of all, he was very defiant in excusing himself in the third debate, which is hurting him badly, especially with people over 50 or 60 years of age, right now. But the problem goes more deeply on this, on the problem itself. But it goes to his philosophy of government, that the proper way to handle this problem is to put the responsibility on this program of—to the National Institutes of Health, and to have the government take the responsibility for the research and then, under government contracts, contract the production of the supply of vaccines as needed. There are other areas of health care which are in the same category of research, division between research and pioneering, and actually the follow-up by other agencies.

And what's happened in health care in schools—that is, immunization in schools—what's happened in the takedown of all of our Federal and related capabilities under Bush, is really a tragedy. And that's where the problem lies with Bush. The hard issue is, of course, the immediate flu vaccine shortage, an Enron-type case,

but the longer-term—

McConnell: Now, just step back. How do you compare this to Enron?

LaRouche: Well, the Chiron case. This is a case in which we should have had—we probably have 30% of the capacity to produce what we need for flu vaccine this year. We have also an incalculable situation, which is partly increased by the lack of vaccination in schools. Therefore, we have a "herd immunity" factor which gives us an incalculable risk on this kind of thing. Nobody knows what the risk is on this thing, but the point is—

McConnell: But, I mean, we haven't had successful flu vaccines for that long. We didn't even get good at this till about 1995. . . . Somehow our ancestors made it to this point in time, putting up with the flu on a regular basis.

LaRouche: Well, we remember 1918, and Ohio in particular. My mother was an Ohio resident at the time, and she was knocked in the hospital and near death in 1918, along with many others. The vaccine—there's a myth about vaccination, which is dangerous. People believe that a vaccination protects you against the infection. It does not. It helps you build up your immunity against the infection, and many people take risks, assuming they're protected by vaccination. Therefore, vaccines get a bad name because people have an unrealistic expectation of their benefit. They are simply ways of trying to moderate and control the spread of, the intensity and spread of, dangerous infections.

McConnell: Even in the best of times, those who produce vaccines don't believe they can get it 100% accurate. They believe that they can hit it about 85-90% of the time.

LaRouche: Absolutely, but that's the point. And the effect, the benefit to the population of those kinds of numbers, is great. We actually have the potential ability to

emergency measures is criminal.

In the past two issues of *EIR* (Oct. 22 and Oct. 29), we have presented the parameters of the decades-long takedown of America's public health system, and the record of non-feasance by the Bush-Cheney Administration to allow this season's flu vaccine production to depend on only two suppliers, one known to be using an offshore facility with a risky history of contamination problems.

A new summary picture of the lack of readiness to handle bio-threats was issued in October, by the Democratic Staff of the House Select Committee on Homeland Security. The 30-page report, titled, "Bioterrorism: America Still Unprepared," surveyed officials from 100 state and local health departments (including such major locations as New York City, New

Orleans, and St. Louis, as well as rural areas). Reductions in Federal funding assistance have undermined preparedness, according to the majority of state and local health officials contacted. The report notes that Federal funding for public health preparedness has declined by 18% since Fiscal Year 2003, with another 11% cut proposed by President Bush for Fiscal Year 2005.

The report notes that the Department of Health and Human Services would *not* release preparedness information to the Committee, leading the staff to conduct its own survey. "We must do all we can, as fast as we can, to protect the United States from . . . the outbreak of a pandemic influenza," declared Rep. Jim Turner (D-Tex.), Ranking Member of the House Homeland Security Committee.

prevent the kind of effect we had in the 1918 flu epidemic. We can't stop the infection, but we can moderate the effect within the population, so the spread is not as intense and the levels reached are not generally as high.

McConnell: Well, I'm sure if we expected to have something along the lines of the Spanish flu—which is what circled the globe in 1918, killing more people than died in World War I, which had recently ended—if we knew it was something of that intensity, we certainly would've geared up to make sure *every American* was immunized against the flu. . . . There's every reason to believe this is a mild flu season, so what's the problem?

LaRouche: No, it is not a mild flu season. The expectations are of a much more severe case, because the herd-immunity factor in the United States is down, because of economic factors, because of the loss of vaccination and so forth, in schools—because children are one of the key vectors in this process. Many other factors. So there was a *totally irresponsible behavior* on the part of the present Administration in dealing with this problem—or, we say, irresponsible, but maybe they didn't know what was going on, maybe they weren't capable of knowing what was going on, but they goofed. . . .

McConnell: What immunizations are we not giving in schools?

LaRouche: For all kinds of things, childhood diseases, things of that sort.

McConnell: We never got those at school. My daughter never got those at school. You went to the doctor for that.

LaRouche: Well, the same thing. This was in the school, period. You had a relationship between the private physician and the school, that the children coming into the school were vaccinated. And that program has been

downsized. . . . We're very negligent these days. . . . It's like national defense. It's a different kind of national defense. We are supposed to have an institution, various institutions—of the Surgeon General, for example, such as the NIH [National Institutes of Health]—or institutions which are responsible for Federal overview of these things, and to report to the Congress and others, as well as through the Administration, on what these problems are, and what we should do about them.

McConnell: Yeah, but when it comes to a kid not being vaccinated for school, that's a local School Board issue, not a Pennsylvania Avenue issue.

LaRouche: It is implicitly—ultimately, the buck stops at the top. And the Federal government, all the way down. All our good systems work that way. If the Federal government took its responsibility, whether at the executive level or at the level of Congress. . . . We made enabling legislation which provided means for cooperation with states and local communities and private facilities to handle problems. We had an intelligence responsibility—that is, the Federal government has an intelligence responsibility for advising various aspects of the institutions on what the problems are, because no local institution has that ability, that power.

Therefore, the Federal government has a defense responsibility for defense of the General Welfare, which it can not solve entirely by itself, but it can not abandon that responsibility.

McConnell: Does this Administration have a policy of saying kids do not have to be vaccinated to go to school anymore?

LaRouche: Their policy is much different. The policy is like the Enron policy. The policy is, we want our friends to make a lot of money. And we will overlook a few things which may stand in the way of what's called free trade.