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### **BIOTERRORISM SAFEGUARDS RAISE QUESTIONS ABOUT FUTURE RESEARCH**

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Scientific research is being held up by an interpretation of a recent law designed to track potentially dangerous biological agents that may be transported around the country. Bioterrorism issues gained spotlight last month when President Clinton announced a new initiative to protect citizens against this threat.

Minnesota Department of Health's Michael Osterholm, who represented the American Society for Microbiology (ASM) at a June 2 congressional hearing, complained about implementation of a provision of the Antiterrorism and Effective Death Act of 1996.

Provisions that cover the transfer and receipt of specified infectious agents for institutions and **laboratories** are interfering with valuable scientific research without supplying the public a safety benefit, said Osterholm. He urged Congress to give the Centers for Disease Control and Prevention (CDC) an additional \$1 million to provide education and training programs for institutions seeking these controversial materials.

At the hearing held by a Senate appropriations subcommittee, a representative of the International Association of Fire Chiefs called on Congress to step up funding of fire and emergency services to pay for training, detection equipment and mass decontamination needs.

Last month, President Clinton announced a government-wide plan to shore up the protection of U.S. citizens from the threat of biological weapons. Transportation officials will play a role in increasing security of government systems under a new Presidential directive.

Under the four-pronged effort, which was announced May 22 in Annapolis, Md., Clinton said the administration would move first to improve the public health and medical surveillance systems to ensure a rapid response in the event of an incident.

Second, "Emergency response personnel must have the training and equipment to do their jobs right," he said, pledging to ensure federal, state and local authorities have the resources and knowledge to deal with a crisis.

Third, the administration will propose the creation of an unprecedented civilian medical stockpile comprised of medicines and vaccines as insurance against the lethal impact of these weapons. Finally, Clinton said the plan includes a coordinated research and development effort to use genetic engineering and biotechnology to develop advances to use against these weapons.

The issue of how to restrict Biosafety **Level 4** classified agents also was discussed at a microbiology meeting in Atlanta.

Southwest Foundation for Biomedical Research's Jean Patterson argued that CDC should not implement a blanket moratorium on distributing Biosafety **Level 4** agents, such as Ebola virus, Lassa fever virus and Sabia virus. Patterson's biomedical research center in Texas has housed one of the few **Level 4 laboratories** in the country for 15 years.

"We have CDC and [U.S. Department of Agriculture] permits to work with any agent," she said. "Southwest Foundation has been certified by CDC as a **Level 4** institution and has complied with all inspections." Patterson called for lifting the moratorium so legitimate researchers who need to obtain and exchange reagents can do so to support anti-bioterrorism development.

Shipments of infectious agents are restricted by CDC regulations that require **laboratories** to be registered and approved before they may receive or send select agents, explained Connie Schmaljohn, who works for the other **Level 4 laboratory** run by the U.S. Army Medical Research Institute of Infectious Diseases (USAMRIID). The Frederick, Md.-based facility conducts research on biological warfare agents and naturally occurring agents of military importance that require special containment.

Transfer of all other agents, such recombinant DNA, is conducted through agreements between the Army **laboratory** and the requesting institute. CRDAs are initiated by individual investigators at USAMRIID and administered under the U.S. Technology Transfer Act, explained Schmaljohn.

Each shipment to a domestic lab or to a non-government, foreign lab located in NATO countries or other countries allied with the U.S. is reviewed and approved on a case-by- case basis by the initiating investigator and the USAMRIID commander, she said.

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