

THE TOP TEN REASONS TO OPPOSE THE BIOLAB

(Presentation by David Ozonoff, M.D., M.P.H., Professor of Environmental Health, Boston University School of Public Health, to Boston University faculty, students, and staff, September 23, 2004. For more information: www.ace-ej.org)

I have spent more than forty years in medicine and public health and because I am committed to the public health mission I was an initial supporter and proponent of the lab. But for the same reasons I came to oppose it. My time for presentation is short so I can only summarize my thinking. I hope the question and answer session can address them further. Here are my Top Ten Reasons for Opposing the Lab:

#1. The Proposed Laboratory is not meant to pursue a public health agenda

I supported the lab because I saw a need for work on new and emerging infectious diseases that threaten our citizens but even more often afflict people in far away places who have few resources and fewer people who care. I have come to the conclusion that the proposed laboratory is not meant nor is it suited to pursue a genuine public health agenda.

An examination of the Request for Proposals (the RFP) to which BU responded tells the story clearly. NIH monies for this project come from President Bush's Homeland Security Budget specifically related to defense against bioterrorism. Indeed the primacy of the counter-terrorism objective is repeatedly emphasized in various NIH documents.

The NIH RFP explicitly states that the objective is to contribute to NIAID's biodefense research agenda, an agenda which supports "basic research and the translation of that research into products that can counter bioterrorism worldwide" (NIAID 2002a). The lab will be directed to concentrate its work "on those agents that pose the greatest risk" for bioterrorism.

But these agents are not usually agents of most interest to general public health. A good example is inhalational anthrax. While cutaneous anthrax continues to be a problem in other parts of the world, the deadly form of inhalational anthrax requires the spores to be specially weaponized if it is to pose a threat to populations. Similarly, there is also likely to be a concern with new and novel *constructed* pathogens.

In essence, this laboratory is meant to be a counter-bioterrorism research and development facility. The line between offensive and defensive work will be hazy and ambiguous.

#2. Potential for secret research on campus

Scientific work that cannot be published, disseminated and replicated lies outside the norms of accepted scientific practice and cannot contribute to a public health purpose.

But NIH has stated its intention to work with the public and private sector to combat terrorism, with its primary "partner" in the public sector being the US Army. Partnership, here, means sharing resources and facilities for "basic and translational research for bioterrorism defense" (NIAID 2002d). The Army and other named partners (DOE and CIA) all conduct classified research. Moreover the scarcity and cost of BSL-4 labs lead NIH to make them available to scientists from other federal agencies for their own projects.

There is no University policy prohibiting carrying out classified sponsored research. And while NIH and BU scientist's work at this lab may be unclassified (although we have no written

assurance this will remain the case for the 20 years of NIH oversight), the work of partners or other agencies that use the lab may not, and likely will not, adhere to this.

#3. Drains resources from other important objectives

In general terms, it is clear that as money for social objectives, including scientific research, becomes tighter, increasing the size of one slice of the pie will make others smaller. This is explicitly true for constructing biomedical research facilities, where, buried in the recently signed \$5.6 billion bioterrorism bill was an obscure provision that funds biocontainment facilities by eliminating federal funds for construction of other biomedical facilities. According to NIAID Director Tony Fauci, this was done as an “incentive” to get universities involved in research on defenses against biological weapons. I guess an incentive was necessary because this objective is not normal for public health oriented researchers.

Moreover, the BU facility is a 3:1 matching grant. This means BU and BMC will have to expend \$50 million to get the \$120 million construction grant. This very large sum of money could more fruitfully be applied to other institutional needs.

The scientific resources created will not benefit most BU or area scientists who do not do infectious disease research and the status of foreign nationals still remains a question.

#4. Foreseeably would make all of us less safe

The only existing population attacks, the anthrax attacks, came from within the bioweapons lab establishment. Anthrax spores are widely dispersed in the natural environment, but *weaponized* anthrax spores are only available from weapons laboratories.

The creation of weaponized, new or novel pathogens, even if only for defensive purposes, makes them available to terrorists for the first time.

#5. Environmental Justice

From the standpoint of the local community, a laboratory with armed guards and questionable activities is a Locally Undesirable Land Use, a so-called LULU. This is a low-income community of color already overburdened with environmental problems. The entire laboratory project was planned without community input. The community is not unorganized and has been working on community development and urban planning issues for many years. This project completely by-passed this process.

There is no compelling reason to have the lab in this neighborhood other than convenience of the scientists and the relative powerlessness of the community.

#6. Project has created serious rift with community

Community opposition is broad and deep. The reason you had to show your BU ID to get in here tonight is because relationships with the community are at an all-time low. This is the community that we, at the School of Public Health, see out our windows and among whom we work on matters of mutual interest in public health. The poor public relations are a matter of deep concern to me and many of my colleagues.

#7. No effective civilian oversight

There are currently no state or local laws or regulations that guide siting of facilities such as this. Existing biosafety committees will have the task of oversight. These committees vary widely in their effectiveness and diligence, but they are also creatures of the institution.

If this lab is built and begins to operate, we are calling on BU to establish two independent oversight committees, with effective teeth and broad representation, one to hear worker complaints, respond to accident or safety concerns and monitor whether any secret or classified research is being done on the premises; and the other composed of independent scientists to advise and monitor the research agenda to assure it remains faithful to public health principles and norms.

#8. Local health and safety issues of unknown magnitude

Understandably, given the nature of the agents involved, there has been much discussion about the prudence of building such a facility in a high density urban area. In discussing the Taiwan SARS outbreak that originated in a BSL-4 laboratory, Dr. Karl Johnson, Dr. Klemperer's guest here tonight, is quoted as saying that "an argument could be made that the single biggest risk for a new SARS outbreak comes from virus laboratories rather than civet cats in China... The [Taiwan] event certainly says the world virology community now has two strikes, so how many strikes are you going to them? I don't want to see strike three for God's sake." Accidents *do* happen in failsafe facilities (SARS, anthrax, Challenger, TMI).

Nor is there a workable surveillance system in our community to detect a failure in time.

#9. Its economic impact will be minimal

Few jobs will be created in the community and the skill level required is unclear.

#10. It may violate the Biological Weapons Convention or give the appearance of violating it

In 1975 the United States, along with more than 100 other countries, became a signatory to the Biological Weapons and Toxins Convention, an international treaty that outlaws the research and development on biological agents for offensive purposes. It applies both to public and private parties, unlike many other treaties.

Operations of the US self-described biodefense laboratories and industry have pushed at least to the limits, and according to many, past the limits, prescribed by this international treaty. The construction of several new facilities, expressly for so-called biodefense activities, will further strain the credulity of the international arms control community in this regard.

It is worth noting that the BWC contained no means for verification. In 2001, shortly after his inauguration and prior to September 11, President Bush announced that the US would not pursue strengthening of the BWC through verification provisions. The constraints on private industry were major reasons for this.