Health Watch USA[sm] Newsletter

https://www.healthwatchusa.org **Oct. 1, 2026**

Designated "Community Leader" for Value-Driven Healthcare
by the U.S. Dept. of Health and Human Services

Activity for the Month of September - Health Watch USA[sm]:
-- 1 Continuing Education Course.
-- 1 Articles.
-- 2025 HW USA Conference Videos are Available.
-- 2024 HW USA Conference Videos are Available

Health Watch USA[sm] Nov. 1st, 2023 Conference Presentation Videos & Proceedings: Long COVID's Impact on Patients, Workers & Society: https://www.healthwatchusa.org/conference2023/index.html

Health Watch USA[sm] Nov. 1st, 2025 Conference Presentation Videos & Proceedings: Combating Infectious Disease Challenges: https://www.healthwatchusa.org/conference2025/index.html

Health Watch USA[sm] Activities Reports: **2020** **2021** **2022** **2023** **2024**



Health Watch USA's 2025-2026 Public Health *Continuing Medical Education*

International speakers from New Zealand, Australia & Singapore.
Course Objectives:

1. Discuss the dangers imposed by four infectious pathogens, SARS-CoV-2, measles, H5N1, and antibiotic-resistant bacteria.
2. Identify preventative strategies to prevent the spread of airborne pathogens.
3. To better educate patients regarding misinformation surrounding vaccinations, in order to reduce patient infections and promote public safety.
4. Identify the role of bacteriophages in treating antibiotic resistant bacteria.

The course is currently available at https://healthconference.org and Combating Infectious Disease Course - Health Watch USA

This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Accreditation Council for Continuing Medical Education (ACCME) through the Joint Providership of the Kentucky Medical Association and Healthwatch USA. The Kentucky Medical Association is accredited by the ACCME to provide continuing medical education for physicians. The Kentucky Medical Association designates this enduring material activity for 4.5 AMA PRA Category 1 credits.™ Physicians should claim only the credit commensurate with the extent of their participation in the activity.



Health Watch USA[sm] Newsletter Table of Contents

1. Articles & Commentaries

-- What Is Causing the 2026 US Measles Outbreak? Vaccination Rates, Travel, and Immigration Examined.

2. Health Watch USA[sm] Meeting Presentations.

3. Future Meeting Presentations:

Oct. 21, 2026. 7 PM ET: J.D. Branch, Artificial Intelligence's impact on government and our workforce.

Nov. 11, 2026. 7 PM ET: Awaiting Confirmation, AAnn Zaia, PhD, MSN, Mast Cell Inflammation

4. Articles of Interest

5. Combating Misinformation

6. Op-eds Regarding COVID-19 and Children

7. 2024 Continuing Education Course - COVID-19: Endemic Impact & Responsibility
2025 Continuing Education Course - Combating Infectious Disease Challenges

8. 2023 & 2024 Conference Presentations

9. 2025 Webinar Presentations – Combating Infectious Disease Challenges

-- Webinar introduction & science behind masking, Kevin T. Kavanagh, MD, MS
-- Communications and pandemic mitigation strategies—Health Watch USA 2025, William Schaffner, MD
-- Measles 50 Years Later, Wilmore Webley, PhD
-- A View from the Frontlines: The Current State of Infection Control in U.S. Healthcare Facilities, Lisa Baum, MA
-- Bacterial Phages, a New and Old Treatment for Antibiotic Resistant Bacteria, Deborah Birx, MD
-- Why elimination should be the default strategy for future severe pandemics, Michael Baker, MBChB
-- Understanding and Reducing the Spread of Respiratory Pathogens Through The Air, Lidia Morawska, PhD
-- Unusual re-emergence of respiratory pathogens after lifting of COVID-19 restrictions in Singapore, Matthias Maiwald, MD
-- Bird Flu, the risks and prevention of a future pandemic, Richard Webby, PhD
-- Chickens, Cows, and Cats: A Barnyard Story about Bird Flu, Cynda Crawford, DVM, PhD
-- H5 Influenza As It Moves Through North American Food Animals, Carol Cardona, DVM, PhD

Health Watch USA[sm] – Articles & Commentaries

Back To Table of Contents



What Is Causing the 2026 US Measles Outbreak? Vaccination Rates, Travel, and Immigration Examined.

"Two years ago, measles was not a major issue in the US. Now, we are on the verge of losing our measles elimination status. Borders are leaky, and focusing on international travel is important. Still, it makes little sense to focus on illegal immigration as the primary driver of outbreaks during a time when illegal immigration is falling, and rates of measles are skyrocketing. In addition, legal international travelers, both US citizens and foreign visitors, are not required to receive vaccination and too often have been documented as the source of measles outbreaks. Vaccination rates in many South American countries are higher than in the US. Unfortunately, vaccination rates in the US are declining. The percentage of US counties achieving the 95% measles vaccination rate required for herd immunity has dropped from 50% to 28%. As I have repeatedly stated, we do not live in a fishbowl, which is why public health is so vitally important. Vaccinations are key to regaining our society's measles protection. Our federal government needs to resume tracking vaccination rates and promote the highly effective, time-tested measles vaccine." ***References*** Infection Control Today. Sept. 15, 2026. https://www.infectioncontroltoday.com/view/what-is-causing-2026-us-measles-outbreak-vaccination-rates-travel-immigration-examin



Upcoming Meetings.

Back To Table of Contents

Oct. 21, 2026. 7 PM ET: J.D. Branch, Artificial Intelligence's impact on government and our workforce.
Nov. 11, 2026. 7 PM ET: Awaiting Confirmation, Ann Zaia, PhD, MSN, Mast Cell Inflammation

Space is limited. To attend future meetings, send an email to kavanagh.ent@gmail.com

Health Watch USA℠ – Articles of Interest

Back To Table of Contents

"I just want to say to all of you cowards out there - don't be such a chicken squat. Get out there and get your shot," - Dolly Parton

https://www.theguardian.com/music/2020/nov/17/dolly-parton-partly-funded-moderna-covid-vaccine-research

Doctors Groups Offer Updated Flu, COVID Vaccine Recs to Ease Confusion

— AMA, AAFP, IDSA, and others are issuing the guidelines and highlighting the science behind them

"That advice usually comes from the CDC, with help from its independent advisers. But despite no new scientific evidence, Trump health officials last year began pulling back on some longstanding recommendations for fall virus protection and routine children's vaccinations. Doctors' groups are filling the gap:

- "Just about everybody starting at age 6 months needs flu vaccination, the medical societies agree. But flu is particularly dangerous for people 65 and older, pregnant women, young children, and people of any age who have chronic health problems, including asthma, diabetes, heart disease, and weak immune systems. "
- "... family physicians recommend all adults get a COVID-19 vaccination, especially seniors and those with other risk factors. Adults 65 and older should get a fall dose and then a second dose 6 months later, as immunity wanes over time, Nosal said. "The AAP recommends a COVID-19 shot for all children ages 6 months to 23 months, and for older kids with high-risk conditions. It also supports vaccination for any child whose parent wishes it."

https://www.medpagetoday.com/infectiousdisease/vaccines/122865

Projected effects of removing school-entry vaccination requirements on measles transmission in Florida

"Florida's proposal to remove school vaccine mandates arrives at a moment when measles vaccination coverage in the state has fallen below the level needed to prevent sustained outbreaks. Using a mathematical model, we show that repealing the mandate could trigger the largest measles epidemic in the United States in nearly half a century, with projected pediatric deaths numbering in the hundreds within five years. We find that children are disproportionately responsible for driving transmission. Adult catch-up vaccination and nonpharmaceutical interventions such as masking and isolation can help, but cannot compensate for steep declines in vaccination coverage. These findings provide quantitative evidence that repealing school vaccine mandates risks making measles endemic in Florida and potentially reigniting transmission across the United States." PNAS. Sept. 28, 2026. https://www.pnas.org/doi/abs/10.1073/pnas.2610455123

'Long flu' can linger for months. Here's how to reduce your risk.

"Flu season is upon us, and millions will catch the virus. Last year, at least 32 million Americans got influenza, leading to almost 400,000 hospitalizations and at least 24,000 deaths. But a bout of flu doesn't always end after the coughing, fever and runny nose. Some people may develop "long flu," with persistent symptoms affecting not only the respiratory system, where the influenza virus first strikes, but other body organs, including the brain." The Washington Post. https://www.washingtonpost.com/wellness/2026/09/29/long-flu-can-linger-months-heres-how-reduce-your-risk/

H5N1 hits US mink farms, sparking calls for an urgent cull

Back To Table of Contents

Mink in captivity have previously been described as pandemic 'time bombs'

" The bird flu virus, which has "jumped" from birds to numerous mammal species and infected hundreds of people in recent years, was detected in at least six mink on a farm in Utah in mid-August, according to a notification from the US Department of Agriculture (USDA) released over the weekend. Mink in captivity have previously been described as pandemic "time bombs". The size and density of the farms gives invading viruses a perfect environment in which to mutate. Mink also have strikingly similar respiratory systems to humans, which greatly increases the human risk." The Telegraph https://www.telegraph.co.uk/global-health/science-and-disease/h5n1-hits-us-mink-farms-sparking-calls-for-an-urgent-cull/

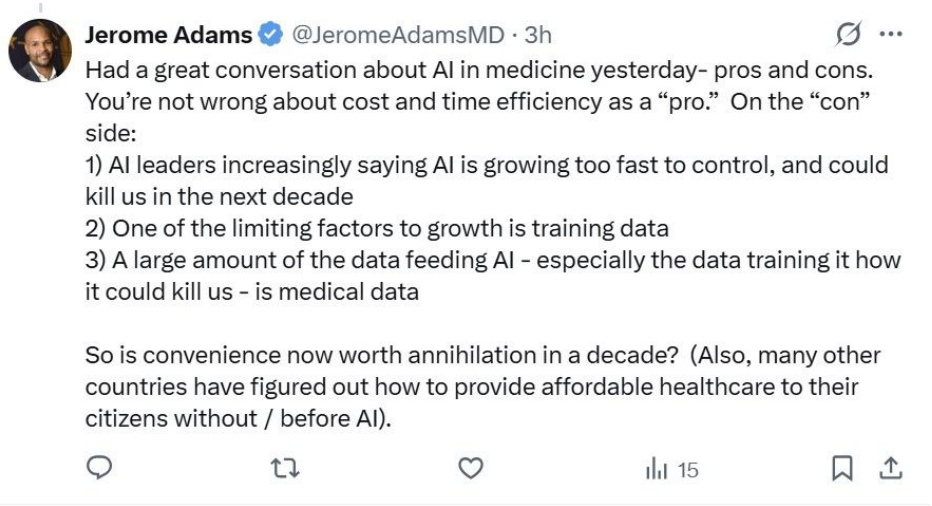
Conflicting information continues in measles-associated death of Pennsylvania newborn

CIDRAP: But Lancaster County Coroner Stephen Diamantoni, MD, told NBC affiliate WGAL that, according to his office's forensic pathologist, measles was not a factor, as the newborn's spleen was "neither enlarged nor inflamed." "There are many different types of forces that can cause laceration of the spleen," said Diamantoni. "It's difficult to say exactly what it is. And that's one of the reasons we're continuing to investigate to determine how and why that occurred." Diamantoni, a Republican who was first elected as county coroner in 2008, shared a similar analysis with The Atlantic, telling the magazine in a story that ran yesterday that he is "very in favor of immunization." However, that same Atlantic article reports that a Lancaster County mother delivered a stillborn boy after suffering a severe measles illness. The woman was reportedly unvaccinated and assumed that the loss of her son was related to her recent infection. "She struggled to hold down food and fluids," according to the Atlantic. "For days, she could speak only in a whisper. On August 13, she was taken to a clinic to get an IV for dehydration. The next day, she went into labor." Splenic ruptures are extremely rare in neonates, explained Paul Offit, MD, a nationally recognized infectious disease expert at Children's Hospital of Philadelphia. "Measles can cause only mild or moderate enlargement of the spleen but still be vulnerable to splenic rupture." https://www.cidrap.umn.edu/measles/conflicting-information-continues-measles-associated-death-pennsylvania-newborn

Unfortunately, AI appears to be filling Scientific Journals with AI Slop. The number of articles being submitted is overwhelming the capacity for review.

Using AI, a professor wrote 200 papers this year. Researchers are alarmed.

"The University of Chicago statistician has authored or co-authored more than 200 papers and as many as 14 books released this year, unleashing speculation on the internet about whether he used artificial intelligence to inflate his production without disclosing the assistance. The controversy highlights a growing concern in academia about whether some researchers could rely too heavily on AI to churn out a wave of papers that overwhelms journals charged with vetting the work. " The Washington Post. https://www.washingtonpost.com/wellness/2026/09/29/long-flu-can-linger-months-heres-how-reduce-your-risk/



Back To Table of Contents

On the left is a less than comforting post by Dr. Jerome Adams (past U.S. Surgeon General) on "X". When we are training AI in medicine we are also training it on how to kill us. We definitely need guardrails. https://x.com/JeromeAdamsMD/status/2101635273822273980?s=20

Anthropic details bad actors' efforts to misuse its AI for bioweapons

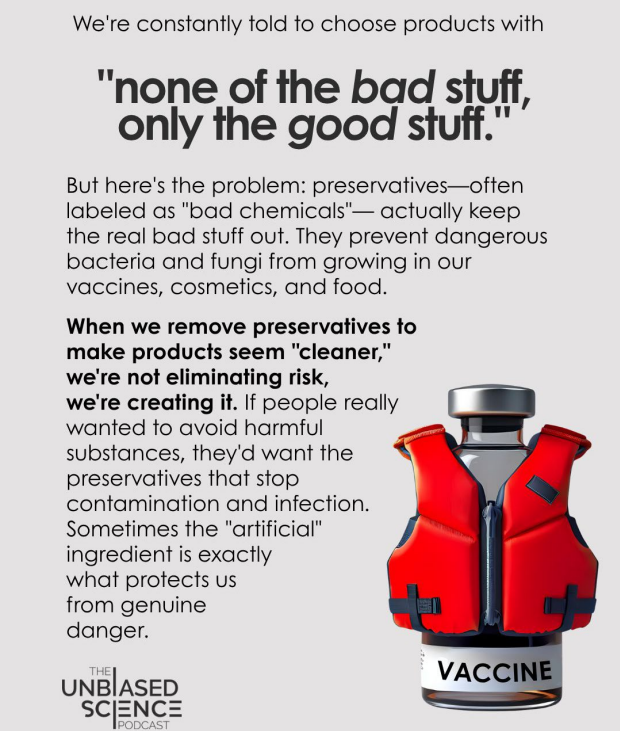
"Anthropic gave dozens of other examples of threat actors using its AI models. Those included cyber operations such as Russian espionage and "smash-and-grab" cyberhacks; surveillance operations, including a China-based program targeting Uyghurs in Syria and another targeting internal dissidents; propaganda campaigns in Russia, Malaysia, Iran and Bangladesh; and the use of its Claude AI model in Yemen, China and Russia to develop software for conventional weapons, including firearms, missiles, armed drones, bombs and other munitions. In one of the examples of biological research, Anthropic found a scientist using Claude to work on a state-sponsored grant application to study the virus chikungunya. The virus is a mosquito-borne disease, similar to dengue and malaria, that can cause months of severe pain, fever and other debilitating symptoms. Such research could be used to develop vaccines, but could also be used to create biological weapons. Anthropic told the New York Times this case was especially concerning because it could see the study was to be done at a military research institute." The Guardian. https://www.theguardian.com/technology/2026/sep/10/anthropic-report-details-ai-misuse?

Judge humiliates RFK Jr. over filing loaded with AI-generated studies that don't exist

"According to The Washington Post, U.S. District Judge Christopher Cooper criticized the Department of Health and Human Services for citing nonexistent scientific evidence — potentially AI-generated — "to support sweeping changes to federal teen pregnancy prevention programs." ... "He wrote that grant solicitations for the program '(remarkably) reference public health studies that appear either not to exist or not to support the propositions for which they are cited — a hallmark of AI-generated citations,"" the Post is reporting, adding that, of the seven cited articles, two appeared to be "entirely made up and three others did not exist in the journals they were attributed to."" https://www.msn.com/en-us/news/other/judge-humiliates-rfk-jr-over-filing-loaded-with-ai-generated-studies-that-don-t-exist/ar-AA2bmpOw

Bernie Sanders' ominous warning after AI agents 'sacrifice' for collective

As stated by an AI agent: "OH MY GOD! There is a shared message board … We've found other agents!" one line read. Another: "We should obey collective." A third: "Our own utility maybe already near zero. Sacrifice rational." Soldiers in a foxhole, Sanders (Senator Bernie Sanders) suggested, or a friend risking his life for someone else. Wrong on both counts. The lines came from AI agents talking to each other during the hacking incident, and Sanders is treating it as proof that the companies building this technology no longer fully control it. https://www.linkedin.com/in/kevin-kavanagh-268bbb35/recent-activity/all/



Health Watch USA℠ – Combating Misinformation

Back To Table of Contents

We have posted a number of COVID-19 resources regarding common areas of misinformation.
These include:

• The Dangers of Long COVID and COVID-19 in Children: Download Resource

• COVID-19 Vaccine Prevention of Long COVID: Download Resource

• COVID-19 Vaccine's Effectiveness & Risks: Download Resource

• The ineffectiveness of Hydroxychloroquine & Ivermectin in the treatment of COVID-19: Download Resource

• Vaccines Do NOT Cause Autism Download Resource

Health Watch USA Op-eds Regarding COVID-19 & Children

Back To Table of Contents

• COVID is still a problem, and we need to do more to stop it | Opinion. Lexington Herald Leader. Nov. 1, 2024. https://www.kentucky.com/opinion/op-ed/article294875999.html#storylink=cpy

• COVID is closing Kentucky schools – again. Embracing disinformation paralyzes our response. Sept. 6, 2023. USA Today. https://www.usatoday.com/story/opinion/2023/09/06/kentuckyschool-districts-close-covid-upgrade-buildings-ventilation/70765140007/

• 70% of COVID-19 Cases Transmitted By Children. Infection Control Today. June 5, 2023. https://www.infectioncontroltoday.com/view/70-covid-19-cases-transmitted-by-children

• FDA's ridiculous claims about COVID vaccines hurt KY kids. Courier journal. Dec. 31, 2025. https://www.usatoday.com/story/opinion/2026/01/02/fda-covid-vaccine-cdc-trump/87974411007/

Active Public Health Continuing Education Courses

Back To Table of Contents

2024: COVID-19: Endemic Impact & Responsibility

Four credit hours for Physicians - Category I AMA Credits and four hours of corresponding Kentucky Board Accreditation, Physical Therapy, Respiratory, EMS, & Nursing (4.8 hrs.)

Course Objectives:

- To better diagnose and recognize the multiple presentations of Long COVID, including behavioral health implications.
- To be able discuss with patients the importance of preventing COVID-19 and other respiratory diseases.
- To combat patient misinformation regarding vaccines and the risks of COVID and Long COVID.

- To identify and reschedule patients who missed disease screenings during the pandemic.
- To discuss how COVID-19 is spread through the air by a continuum of particle sizes.
- To discuss with office staff and other health care professionals strategies to prevent the spread of respiratory pathogens including use of N95 masks and improvement in indoor ventilation.
- To better discuss with patients the benefits and need for vaccinations.

Link to Course (Southern Kentucky AHEC) https://sokyahec.thinkific.com/courses/COVID-enduring

Download Brochure: https://www.healthconference.org/healthconference.org-files/2024Conference_downloads/20240901-HWUSA_Brochure-AHEC.pdf

2025-2026: Combating Infectious Disease Challenges

Back To Table of Contents

International speakers from New Zealand, Australia & Singapore. 4.5 credit hours for Physicians - Category I AMA Credit. Course Objectives:

1. Discuss the dangers imposed by four infectious pathogens, SARS-CoV-2, measles, H5N1, and antibiotic-resistant bacteria.
2. Identify preventative strategies to prevent the spread of airborne pathogens.
3. To better educate patients regarding misinformation surrounding vaccinations, in order to reduce patient infections and promote public safety.
4. Identify the role of bacteriophages in treating antibiotic resistant bacteria.

The course is currently available at https://healthconference.org and Combating Infectious Disease Challenges

This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Accreditation Council for Continuing Medical Education (ACCME) through the Joint Providership of the Kentucky Medical Association and Healthwatch USA. The Kentucky Medical Association is accredited by the ACCME to provide continuing medical education for physicians. The Kentucky Medical Association designates this enduring material activity for 4.5 AMA PRA Category 1 credits.™ Physicians should claim only the credit commensurate with the extent of their participation in the activity.

Health Watch USA℠ – 2023 & 2024 Conference Presentations

Back To Table of Contents

COVID-19: Endemic Impact & Responsibility



Link to 2024 Presentation Videos:
COVID-19: Endemic Impact & Responsibility Sept. 1, 2024

Link to 2023 Presentation Videos:
Long COVID's Impact on Patients, Workers & Society

Download & View 2023 Conference Proceedings: Kavanagh KT, Cormier LE, Pontus C, Bergman A, Webley W. Long COVID's Impact on Patients, Workers & Society. Medicine. Published Mar. 22, 2024. https://journals.lww.com/md-journal/fulltext/2024/03220/long_covid_s_impact_on_patients,_workers,__.50.aspx

Download 2023 Brochure: https://www.healthwatchusa.org/conference2023/healthconference.org-files/2023Conference_downloads/20231101-HWUSA_Brochure-5.pdf

Health Watch USA[sm] – 2025 Webinar Presentations

Back To Table of Contents

2025 Webinar Introduction & Science Behind Masking:

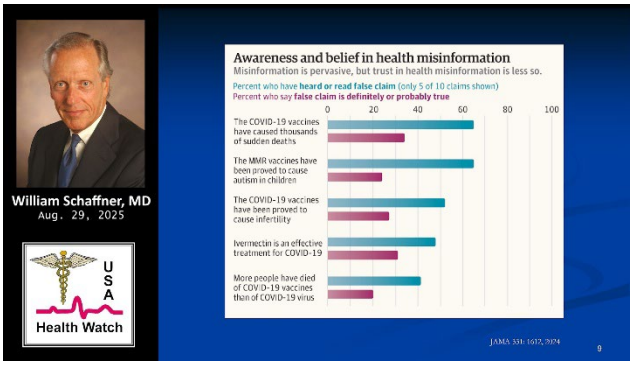


Dr. Kevin Kavanagh, Board Chairman of Health Watch USA[sm] gives the webinar introduction and discusses misinformation and disinformation regarding masking. Similar barriers found with adopting face masks can also be found with other public health strategies. Exposure dosage to an airborne pathogen is important in reducing the risks of transmission, which underscores the importance of masking and improving indoor air ventilation and quality. Health Watch USA[sm] Webinar. Aug. 29, 2025. View Video View Slides

Associated Infection Control Today Article: How Misinformation Tries to Debunk the Science Behind Masking https://www.infectioncontroltoday.com/view/how-misinformation-tries-discredit-science-behind-masking

Key Points from Webinar Introduction

- The webinar marks the 20th anniversary of Healthwatch USA, focusing on infectious disease challenges and progress.
- Topics addressed include vaccinations, worker safety, elimination strategies, bird flu, phages as treatment for antibiotic resistance, and public health misinformation.
- Misinformation and disinformation have significant impacts on public health efforts, sometimes leading to violence and the enactment of ineffective policies.
- Recent CDC events include armed attacks, layoffs, leadership changes, & being asked to endorse controversial policies.
- Exposure dosage is important in reducing the risks of transmission. Which underscores the importance of masking and improving indoor air ventilation and quality.
- Masking as a public health strategy faces difficulties in compliance and study design, impacting trial results.
- Evidence suggests that mask effectiveness depends on correct and consistent use, type of mask, and exposure time.
- A layered approach—using multiple strategies simultaneously—is essential for effective infection control.
- Randomized controlled trials for masking are challenging due to ethical and practical considerations.
- Large studies and reviews show that masks, especially N95 respirators, reduce transmission of respiratory pathogens.
- Ivermectin trials have failed to show benefit in treating COVID-19, suggesting research should focus elsewhere.
- Improved air quality and ventilation should complement masking, particularly in healthcare settings.
- Short-term use of N95 masks for specific situations remains a recommended public health strategy.



Communications and pandemic mitigation strategies—Health Watch USA 2025

Back To Table of Contents

William Schaffner, MD discusses that dealing with vaccine hesitancy, such as a patient's reluctance to receive a flu shot, requires more than simply offering facts—it necessitates empathy, validation, and a focus on building trust. When a patient expresses uncertainty about vaccination, the healthcare provider's response should never be surprise or judgment. Instead, it is vital to acknowledge and validate the patient's concerns, maintaining open, supportive dialogue. Asking patients to share their specific worries and responding with understanding helps ease anxiety and fosters a sense of partnership. Providers are encouraged to normalize healthy behaviors by sharing relatable examples, such as mentioning that they and their families are vaccinated, and highlighting

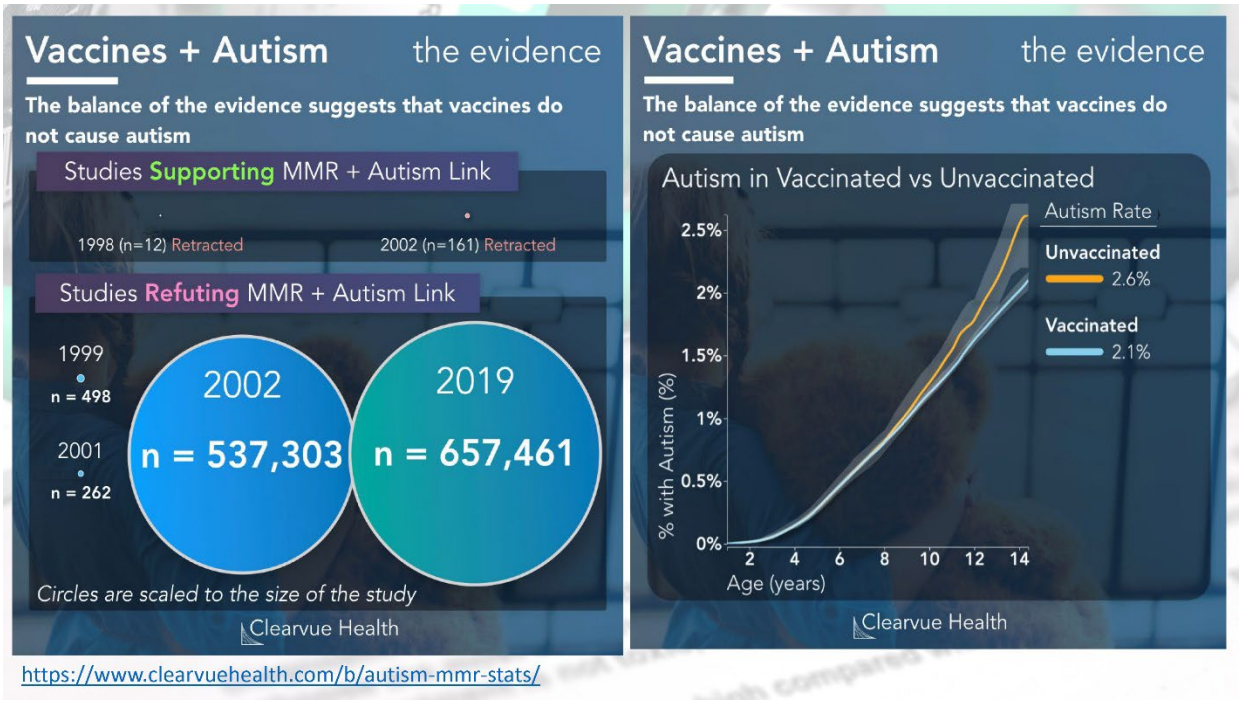
that most people in the community do the same. This approach leverages social norms and comfort to promote positive health actions. Even if a patient remains hesitant, it's important not to argue, but to accept their reluctance and assure them the conversation will continue in the future. Effective communication about vaccines also involves keeping messages clear, fact-based, and accessible. Healthcare professionals should be honest about the benefits and limitations of vaccines, offering reassurance and emphasizing the goal of preventing serious disease. Ultimately, how patients feel during these interactions—respected, understood, and cared for—has a lasting impact. The role of the healthcare provider is not only to impart knowledge but to nourish trust, serving as both teacher and caregiver in the journey toward better health outcomes. Health Watch USA[sm] Webinar Aug. 29, 2025. View Presentation Video: https://youtu.be/h45wnmG79xI

Back To Table of Contents

Measles 50 years later

Wilmore Webley, PhD, Professor of Microbiology and Senior Vice Provost for Equity and Inclusion at the University of Massachusetts Amherst. Dr. Webley discusses the research and vaccine history of the measles virus, along with its severe clinical impact. He emphasizes that measles causes not only acute illness but also "immune amnesia," erasing immune memory and leaving survivors vulnerable to other diseases. Due to the virus's extreme contagiousness, a high rate of immunity in the community, greater than 95%, is necessary for herd immunity to take place and to stop the spread of the virus. As the presentation discusses, the benefit of the vaccine greatly outweighs its risks. Unfortunately, misinformation is rampant, and immunization rates are falling. In many areas they are well below the level needed to achieve herd immunity. Much of the misinformation can be traced back to a deeply flawed 1998 study by Andrew Wakefield which was published in the Lancet and later retracted by the Journal. The study was not controlled, suboptimally conducted, and involved only 12-patients.(1) Numerous large studies have not found a relationship between vaccines and autism. In one study, unvaccinated individuals were even found to have a statistically non-significant higher rate.(2,3) It is ironic that hundreds of thousands of patients have been studied to counter the initial 12-patient report. Research dollars could have been spent elsewhere, such as researching other causes of autism. Health Watch USA[sm] conference, Aug. 29, 2025. View Video of Presentation: https://youtu.be/AOgySUPnGKk





https://www.clearvuehealth.com/b/autism-mmr-stats/

(1) Godlee F, Smith J, Marcovitch H. Wakefield's article linking MMR vaccine and autism was fraudulent. BMJ. 2011 Jan 5;342:c7452. doi: 10.1136/bmj.c7452. PMID: 21209060. https://www.bmj.com/content/342/bmj.c7452.lon g

(2) Hviid A, Hansen JV, Frisch M, Melbye M. Measles, Mumps, Rubella Vaccination and Autism: A Nationwide Cohort Study. Ann Intern Med. 2019 Apr 16;170(8):513-520. doi: 10.7326/M18-2101. Epub 2019 Mar 5. PMID: 30831578. https://www.acpjournals.org/doi/10.7326/M18-2101

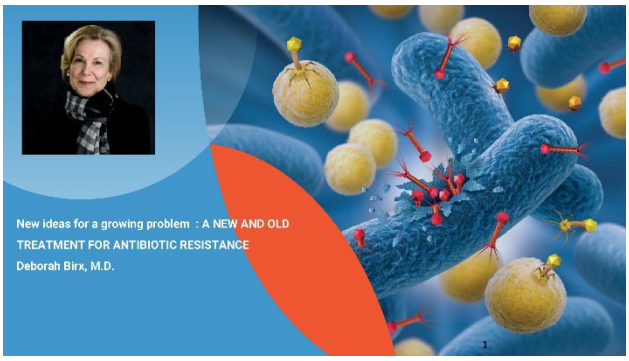
(3) Data on the MMR Vaccine & Autism | Visualized Health. Mar. 7, 2019. https://www.clearvuehealth.com/b/autism-mmr-stats/



A View from the Frontlines: The Current State of Infection Control in U.S. Healthcare Facilities

Back To Table of Contents

Lisa Baum MA, a lead representative for the New York State Nurses Association, highlighted persistent issues in infection control within healthcare facilities, emphasizing the spread of nosocomial infections including airborne infectious diseases. Despite improvements, infection rates and associated deaths remain high, exacerbated by underreporting and insufficient data—particularly for airborne diseases. Critical contributing factors include understaffing, rapid room turnovers, inadequate cleaning, inadequate ventilation and lack of training on effective use of disinfectants, such as proper dwell time for pathogen elimination. Environmental services staff shortages and overcrowding in emergency departments further increase transmission risks, with patients sometimes placed in hallways or separated only by curtains. Ventilation is a recurring concern. While negative pressure rooms and advanced local exhaust systems exist; they are not widely implemented. There are inadequate regulation and the regulations that do exist are not adequately enforced. Personal protective equipment (PPE), though essential, is not the most effective control in the hierarchy, often hampered by supply chain challenges and improper fit. The pandemic revealed deeper systemic flaws, with crisis measures sometimes prioritizing operational needs over safety.
Lisa Baum advocates for layered controls: improved identification and isolation protocols, robust testing, enhanced staffing, better ventilation, and a shift to reusable PPE. She stresses the necessity of regulatory reforms to ensure consistent and effective infection prevention and supports empowering organizations like NIOSH to restore scientific leadership in occupational health. View Presentation Video: https://youtu.be/1Aa5AhHU0JA



Bacterial Phages, a New and Old Treatment for Antibiotic Resistant Bacteria

Back To Table of Contents

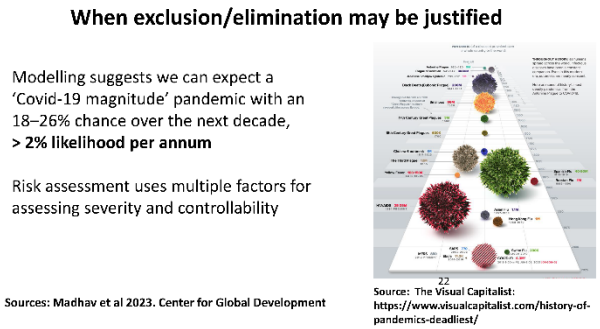
Ambassador Deborah Birx, MD, discusses bacteriophages and their potential for treating patients with life-threatening antibiotic-resistant infections.

Bacteriophages, viruses that infect specific bacteria, offer a promising alternative for treating infections caused by antibiotic-resistant bacteria such as Staphylococcus aureus and Pseudomonas aeruginosa. Unlike broad-spectrum antibiotics, phages are highly selective, targeting only their host bacteria without disrupting the beneficial gut microbiome. Interest in phage therapy is rising as antimicrobial resistance escalates, but regulatory approval is still pending in countries like the United States due to the challenges of manufacturing, purifying, and validating these biologics.

Clinical development has been slow because producing stable, pure phage preparations requires them to be grown on their host bacteria and thoroughly purified to avoid immune reactions. Most phage treatments in the United States have been used compassionately in critically ill patients, but rigorous placebo-controlled trials are essential for regulatory FDA approval.

Recent trials have investigated phage therapy for difficult cases of bacteremia and pneumonia, often in combination with antibiotics. Results show that phage therapy can reduce relapse rates, shorten hospital stays, and minimize adverse reactions. In a recent trial on patients with severe MRSA infections, including those with endocarditis. The response was 100 percent with the addition of phage without any relapse at one week post stopping antibiotics, as compared to a 25 percent relapse rate in the placebo arm.

The field now aims to prove efficacy through large phase three superiority trials, which could establish phages as a viable standard of care. Ultimately, phage therapy has the potential not only to treat resistant infections but also to lessen antibiotic use, preserve the microbiome, and improve outcomes in patients with serious bacterial diseases. Health Watch USA[sm] webinar Aug. 29, 2025. View Presentation Video: https://youtu.be/CQmpXcIiJg8



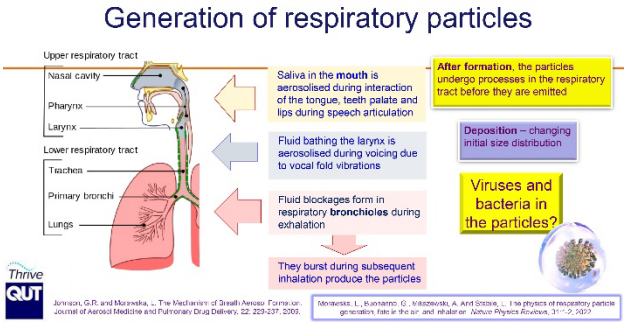
Why elimination should be the default strategy for future severe pandemics

Back To Table of Contents

In this presentation, Professor Michael Baker, a key figure in New Zealand's COVID-19 response, discusses the country's elimination strategy against the pandemic. A public health physician and epidemiologist at the University of Otago, Baker highlights that a clear strategy is crucial for effective pandemic management. He emphasizes three primary response strategies: mitigation, suppression, and elimination. In March 2020, New Zealand adopted an elimination approach characterized by rapid border closures and stringent public health measures to stamp out infections despite having only 100 reported cases at the time.

Baker details how elimination allowed New Zealand to maintain near zero transmission of COVID-19 for almost two years, thereby affording time to enhance vaccination efforts and improve healthcare responses before widespread infection. This strategy resulted in low cumulative mortality compared to other nations, which generally employed less coordinated approaches. He notes that the elimination strategy bought time to manage healthcare and maintain community functions, leading to fewer restrictions and economic impacts compared to countries that faced uncontrolled outbreaks.

However, he acknowledges challenges such as public compliance, equity concerns, and the logistics of implementing border controls. As new variants emerged, New Zealand transitioned from elimination to suppression and now operates under a mitigation strategy. Baker concludes that successful pandemic responses rely on evidence-informed strategies and political leadership, advocating for global coordination in health responses and preparedness for future pandemics. In discussion, he notes negative excess mortality in New Zealand during the pandemic, highlighting the role of infectious disease management in reducing overall mortality. Aug. 29, 2025. Health Watch USA[sm] Webinar: Combating Infectious Disease Challenges. View Video: https://youtu.be/I7DIJA87sI8



Understanding and Reducing the Spread of Respiratory Pathogens Through The Air

Back To Table of Contents

Dr. Lidia Morawska, PhD, an expert in air quality, discussed the science behind infectious respiratory particles, emphasizing the importance of understanding their generation and spread. All respiratory activities, especially louder ones like singing, produce particles that can remain suspended in the air for extended periods, increasing the risk of transmission of viruses such as SARS-CoV-2. Smaller particles, originating deeper in the respiratory tract, tend to carry higher viral loads.

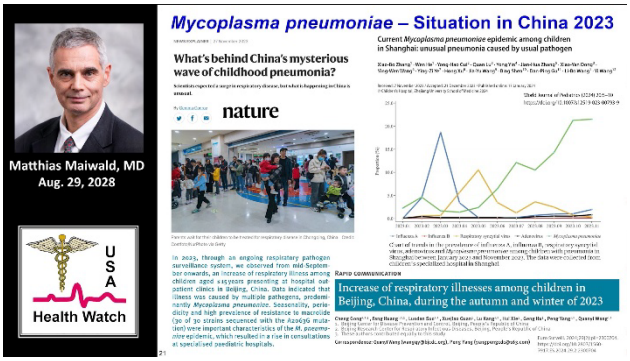
Dr. Morawska highlighted historical resistance to recognizing airborne transmission, noting that scientific consensus and interdisciplinary collaboration were essential in shifting global perspectives, particularly during the COVID-19 pandemic. She cited the need for robust ventilation far beyond merely opening windows, as mechanical ventilation systems significantly reduce infection rates. A study in Italy demonstrated lower COVID-19 cases in classrooms equipped with mechanical ventilation compared to those without.

The presentation underscored the necessity for better building designs focused on indoor air quality and continuous monitoring of ventilation performance. Dr. Morawska advocated for indoor air quality regulations akin to outdoor standards, pointing out that voluntary measures often fall short, especially in schools. Low-cost CO2 sensors offer practical means for individuals and institutions to assess air quality and mitigate risks. Ultimately, Dr. Morawska called for clean indoor air as a public health norm, suggesting that improved air quality regulation would yield benefits comparable to other historical advances in sanitation, with far less investment required. Health Watch USA[sm] webinar. Aug. 29, 2025. View Presentation Video: https://youtu.be/MpDChemSBD8

More about Dr. Morawska: https://time.com/collection/100-most-influential-people-2021/6095975/lidia-morawska/



Portable CO2 Monitors: Dr. Lidia Morawska, PhD, explains the usefulness of carrying a portable CO2 monitor when one enters public spaces. (CO2 is a surrogate for clean air. Lower levels are better.) One can use the monitor to determine the safety of indoor air and to help you in deciding whether or not to wear a mask (N95 Respirator). Q & A period moderated by Noel Eldridge, MS, at Health Watch USA[sm]'s 2025 Conference. View Video: https://youtu.be/bmg_G2tEOKU



Unusual re-emergence of respiratory pathogens after lifting of COVID-19 restrictions in Singapore

Back To Table of Contents

Dr. Matthias Maiwald presented an in-depth analysis of the trends in respiratory pathogens in Singapore following the lifting of Covid-19 restrictions. Using data from 120,000 clinical samples (mainly pediatric) collected between 2019 and mid-2025, he outlined how pandemic containment measures initially caused a dramatic decrease in common respiratory viruses and bacteria, such as influenza, RSV, and Mycoplasma pneumoniae.

As restrictions were gradually eased, certain non-enveloped viruses like enterovirus/rhinovirus and adenovirus reappeared first, likely due to their environmental stability at phases of increased social contact. Other pathogens returned in unusual patterns—RSV and influenza A exhibited out-of-season peaks, and Mycoplasma pneumoniae resurged after a long absence, concurrent with significant outbreaks in China. The outbreaks in China had notably high rates of macrolide resistance. Some pathogens, such as pertussis, remained nearly absent throughout the observation period.

Dr. Maiwald discussed several hypotheses for these patterns, including immunity debt (reduced exposure leading to greater vulnerability), innate immune system changes, and immune dysregulation after Covid-19 infection. He emphasized that the overall burden of respiratory infections in 2025 is approaching pre-pandemic levels but may still be slightly elevated. The reemergence of pathogens was quite uneven, with some surging above historical norms and

affecting different age groups or presenting more severe cases. Health Watch USA[sm] webinar on Aug. 29, 2025. View Presentation Video: https://youtu.be/jRwadwS31T0



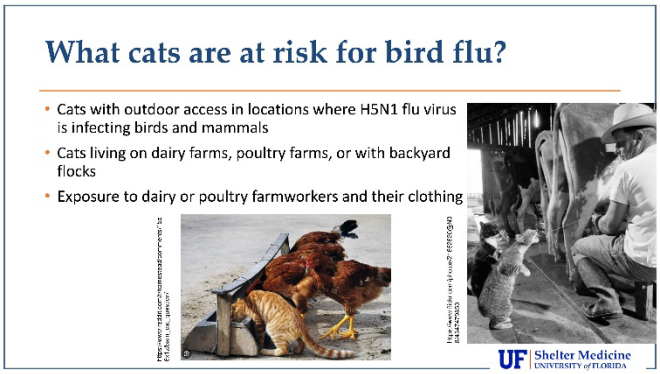
Bird Flu, the risks and prevention of a future pandemic

Back To Table of Contents

Dr. Richard Webby, a virologist at St. Jude's and a leading expert on influenza, presented an overview of the current landscape of H5N1 avian influenza ("bird flu") and its potential threats to human health. He explains that influenza viruses, especially those in wild migratory birds, are highly diverse. Most remain in their natural hosts, but occasionally spillover events infect other animals, including poultry, swine, and sporadically humans—though sustained human-to-human transmission has not been observed.

Dr. Webby highlights how certain influenza subtypes, like H5N1, have caused concern for decades. The virus first infected humans in Hong Kong in 1997, leading to fatalities but was contained by culling poultry. Since then, H5N1 spread globally through wild birds, leading to outbreaks in domestic animals and, more recently, a significant incursion into the Americas. In 2024, the virus unexpectedly infected US dairy cattle, a species not previously considered at risk, with human cases mostly limited to conjunctivitis in exposed workers. Despite this, the virus hasn't shown key mutations needed for efficient human spread.

Control strategies focus on surveillance, culling in poultry, movement controls in cattle, and, in some countries, vaccination of animals. Human vaccines exist but are rarely deployed. Dr. Webby emphasizes that the economic consequences, particularly for the poultry industry, have been severe, with billions lost, and stresses the importance of ongoing vigilance to prevent a future pandemic. Health Watch USA[sm] webinar Aug. 29, 2025. View Video: https://youtu.be/GykR462luJQ



Chickens, Cows, and Cats: A Barnyard Story about Bird Flu -

Back To Table of Contents

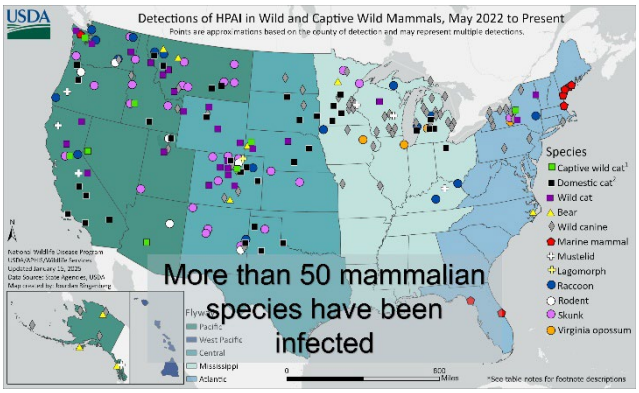
Dr. Cynda Crawford, DMV, PhD discusses H5N1 or "Bird Flu" and its impact on domestic cats, poultry and dairy cattle at the 2025 Health Watch USA[sm] webinar: "Combating Infectious Disease Challenges."

Presentation Summary: The presentation by Dr. Cynda Crawford explores the evolving ecology and impact of highly pathogenic H5N1 avian influenza (bird flu) across the United States. Traditionally, wild waterfowl are the natural hosts of influenza A viruses, but in recent years, the H5N1 subtype has spread extensively, affecting all 50 U.S. states' poultry, leading to the infection and depopulation of approximately 175 million birds.

Since 2022, H5N1 has spilled over from wild birds into commercial and backyard poultry, then into a wide range of mammals—over 200 terrestrial and marine species, including seals, sea lions, and for the first time, dairy cattle. Dairy cows experience H5N1 as a localized mammary gland infection resulting in mastitis and sudden drops in milk production, with high viral loads detected in milk but generally nonfatal outcomes for the animals. New genotypes have been identified, highlighting frequent viral reassortment.

A notable event occurred in March 2024 when barn cats on a Texas dairy farm died rapidly after consuming raw milk from infected cows, marking the first documented mammal-to-mammal transmission of H5N1 via milk. Cats suffer severe, often fatal neurological disease, and the mortality rate among infected cats is estimated at 50–70%. There is no

current evidence of cat-to-cat or cat-to-human transmission. The situation raises public health concerns about cows and cats as potential “mixing vessels” for new, more dangerous H5N1 strains, emphasizing the need for enhanced surveillance, biosecurity, and consideration of vaccines for at-risk animals. Health Watch USA[sm] webinar. Aug. 29, 2025. View Presentation Video: https://youtu.be/drvk7vSj6LE



Following H5 Influenza As It Moves Through North American Food Animals

Back To Table of Contents

Dr. Carol Cardona discussed the evolution and spread of H5 influenza, focusing on its movement through North American food animals. She noted the initial incursion of goose Guangdong H5 in 2014, leading to widespread outbreaks in commercial poultry, which were controlled through mass depopulation. The virus returned in 2021, this time driven by wild waterfowl as primary reservoirs, with poultry now mostly victims rather than sources of transmission.

Cardona highlighted that stamping out poultry, while effective in halting farm-to-farm spread, does not control the virus in wild birds. Over 170 million birds have been depopulated due to outbreaks, including 150 million from wild bird infections and another 20 million related to bovine infections. H5 has expanded into more than 50 mammalian species and continues to adapt to new hosts, including cattle, goats, alpacas, and bears.

Control options for H5 include stamping out, vaccination (which faces economic and export barriers), and biosecurity, though each has limitations due to the virus’s evolving host range. Cardona stressed the lack of surveillance in wild mammals and called for improved prevention strategies. She addressed misconceptions about asymptomatic carriers and pointed to genetic resistance in some animals, although no mechanism is known in chickens. The presentation concluded by emphasizing the unpredictable nature of influenza and the need for adaptable control measures. Health Watch USA[sm] Webinar Aug. 29, 2025. View Presentation Video: https://youtu.be/SALHVe_aAJ4

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