

**STATEMENT OF
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**BEFORE THE
HOUSE COMMITTEE ON VETERANS AFFAIRS
SUBCOMMITTEE ON OVERSIGHT & INVESTIGATIONS**

**WEDNESDAY, NOVEMBER 14, 2001
10:00 A.M.**

Mr Chairman and Members of the Subcommittee, thank you for the opportunity to appear before you this morning to share my thoughts on how the Department of Veterans Affairs and schools of medicine can work together to further research in critical bioterrorism-related areas as well as to educate medical students and health professionals in diagnosing and treating the casualties of bioterrorism-related events. I ask that the Committee include my complete written statement as part of the hearing record.

I am Martin Blaser, Professor and Chairman of the Department of Medicine and Professor of Microbiology at the NYU School of Medicine. I am also a staff physician at the NY Harbor VA Medical Center, and I have been a VA physician for more than 20 years. My research laboratory is at the VA and I have always been proud of my VA affiliation, especially now!

The VA medical system is a tremendous national resource. In addition to operating the nation's largest integrated health care system, the system trains approximately 85,000 health professionals each year in its medical facilities. The VA also has a long history of expertise in diagnosing and treating a variety of diseases with major public health implications. As our government examines ways to improve our nation's capabilities to respond to medical and public health emergencies in a post-September 11th world, collaboration between the VA health system and our nation's medical schools offers a way to address many of the gaps in our current ability to address the consequences of bioterrorism-related events.

As an example of this, I would like to discuss the exciting collaboration underway between the NYU School of Medicine and the NY Harbor VA Medical Center to create the VA-NYU Joint Center for Bioterrorism Research. It is my hope that this collaboration can be used as a model for future collaboration between VA health facilities and medical schools across the country.

NYU Facilities and Efforts

The NYU School of Medicine and its three major affiliates – Tisch University Hospital, Bellevue Hospital Center (Bellevue) and the NY Harbor VA Medical Center (Manhattan Campus) – are located on a single contiguous campus. We are the closest Academic Medical Center to both Wall Street and the Midtown business district. Bellevue Hospital Center is the flagship hospital of the New York Health and Hospital Corporation. It combines both primary and tertiary care capabilities, advanced isolation facilities, and a unique emergency care facility with specialized features in its structure and air handling systems which make it a major site for referral of patients with illnesses resulting from bioterrorism. Enjoying a close working relationship with New York City's Department of Health during recent tuberculosis and anthrax outbreaks, Bellevue may truly be considered the city's major disaster hospital.

Both prior to and since the events of September 11, the NYU School of Medicine and its affiliates have been closely involved with local, state, and federal government officials in preparing for and responding to acts of war and bioterrorism. The recent anthrax attacks which were focused on public officials, news media and postal workers have put into vivid perspective the reality of the threat to public health posed by terroristic biological warfare. In the event that a major bioterrorism attack occurred in New York City, especially involving either the downtown or midtown financial districts, Bellevue would become the major site for hospitalizing victims. The NIH-supported **General Clinical Research Center (GCRC)** located at Bellevue Hospital

would enable us to perform physiologic measurements on patients, banking of specimens, and enrolling seriously ill persons (e.g. inhalational anthrax, smallpox, plague) in clinical trials to determine optimal therapies. It would also enable our scientist to translate new knowledge developed at the Research Center to the bedside.

The School of Medicine has already committed itself to the preparedness effort by creating **The Center for Health Information and Preparedness, or CHIP**. Initial efforts of the center are focused in two areas: (1) the creation of a web site which will provide accurate, up-to-date, and independent information and assessments in terms understandable to both professional and lay readers, and (2) the delineation of the full spectrum of biodefense- related research at all component schools of NYU. As a result of the second goal we expect to foster and create a program of research characterized by collaboration between all members of the academic community on the biological, medical, environmental, psychosocial, and societal questions relevant to biological warfare and biodefense.

Program Elements

Our VA-NYU proposal contains a program of basic and translational biomedical research on the prevention (e.g. by development of vaccines) or treatment (by developing new antibiotics or novel types of antitoxins) of agents with potential as biowarfare weapons. Essential to that infrastructure are modern research facilities in which bench research, animal studies and human clinical investigations can be performed safely, including at the BLS-3 or -4 level. Accordingly we propose to develop such facilities as a major part of the core of our biodefense effort.

Core research program areas will include: infectious disease, clinical pharmacology, pulmonary disease, and toxicology. The infectious disease research would include development of humanized monoclonal antibodies for treatment of bioterrorism agents, development of novel vaccines against bioterrorism agents, and epidemiological studies. Research in the area of pulmonary disease would include animal models, human studies, and in vitro studies. Such research may lead to enhanced diagnosis and novel treatments. Research in the area of toxicology are critical in preparing for the possibility of chemical warfare. Studies would be conducted on nerve agents, highly irritating gases (such as chlorine or phosgene), and other likely chemicals that could be used in a terrorist attack.

The areas of research outlined above hold the promise of translating the results quickly to novel treatments and therapies for victims of biological and chemical attacks. In addition to research, however, the training of our health professionals is a key piece to improving the preparedness of our national health care system. And in addition to its contribution in areas of cutting edge research, VA health facilities around the country have much to contribute in this area as well. As part of the NYU CHIP program we would develop web-based modules for the education of physicians, first-responders, emergency room personnel, and other health professionals about diagnosis and treatment of bioterrorism victims.

Conclusions

Thank you again, Mr. Chairman, for your invitation to appear before the Subcommittee today, and for your interest in this important issue. Our world was forever changed on September 11th, but I am confident that with adequate funding, our nation's academic centers, the VA health

system, the Departments of Defense and Health and Human Services, and other key entities will be successful in working together to prepare for any challenge that may lie ahead.

I am happy to answer any questions that the Subcommittee may have.