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MARGARET KOVAL: Hello, Princeton. This spring, with coronavirus disrupting all our lives, we're reaching out to Princetonians everywhere to hear how we're continuing our collective and personal missions, how we're staying together while far apart, and how so many of us are working to serve the wider world. In this episode of "We Roar," former Senate Majority Leader Bill Frist talks about pandemics past, present and future.

BILL FRIST: I am Bill Frist, out in Nashville, Tennessee. Went to Princeton back in 1970 to 1974. I'm a heart and lung transplant surgeon, former majority leader of the United States Senate. I've been in health and health care for about 40 years, 45 years.

Specifically in the field of virology, I've been — and pandemics — I've been involved heavily, in large part because my world was, as a medical doctor and as a surgeon, in the transplant world, built around fighting infections. Fighting viruses, fighting bacteria, fighting other microbes who might be attacking my patients.

And when I went to the United States Senate, I became very involved addressing issues of infectious disease. I came to the United States Senate in 1994. Shortly after that, SARS, the other coronavirus, emerged in China in a very similar way out of an animal market just like this coronavirus.

At that time, I was in — I took a delegation to China in April of that year. And so ever since then, I've been very involved, in a legislative standpoint, and currently involved in the outbreak here — the now pandemic here — in the United States.

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If you look back to my speeches in 2005 and the lectures that I gave, on the floor of the Senate at the time, I had said that there will be another pandemic that will cause massive destruction and death. And it's really inevitable that about every 10 or 15 years you will see the emergence of a virus which is — to which we have no immunity.

And at the time, I was calling for a nationalized effort that brings together the very best of government, the very best of our universities, the best scientists, the smartest minds. It brings together all of our resources and focuses them on a single project.

But that was never realized, in part because the government in the United States, too often, unfortunately, tends to think in two year cycles. That's the election cycle for your typical person in Congress. To look at pandemics, you have to look over 20 years. You have to look over 30 years, 40 years.

The last big pandemic, it was here in 1918, and most people in America just weren't born there. So it does take presidential leadership. It takes continued congressional leadership. And then, our great democracy tends to respond to much more short-term and immediate risk and challenges today, instead of these longer-term risks.

I left the Senate in 2005, 2006. And people just did not pick up on it after that. And so what is needed today is really what was proposed in 2005, and it would entail an investment that's as much as \$4 billion a year more than what we have been spending, and it would focus on continued surveillance. Not just in America, but around the world, to identify these viruses early on.

Secondly, a huge research effort and infrastructure among our great universities and private labs around the world, to be able to accelerate vaccine production with the latest scientific techniques.

Right now it's going to be another year or a year and a half before we have a vaccine for the coronavirus. That really is inexcusable. And if, over the last 15 years, if we'd invested sufficiently, we would have been able to do that in a much, much, much shorter time.

A third component is a promotion of research both at our National Institutes of Health, which has several different institutions, but fund those to a sufficient degree with a focus on early identifications of an epidemic and a pandemic. These can be predicted, and it takes the science, it takes the investment.

So those are the three big components. But in essence, you walk away, it's the equivalent of a Manhattan Project to prevent massive death and destruction like what we're seeing today around the world. Because there's no question that what we are seeing today over these months will come back in this country in the next 10 to 15 years.

It's human biology. It's viral biology. These viruses simply change faster than we change, and they can outstrip any vaccine that we put forward. And probably 50 to 60 percent of the American people ultimately will be infected by this virus.

And again, 99 percent of people will do well over time. But that's how pervasive the virus is. And so it's very clear to me what we need in the next month: number one, first and foremost, we need to support our health personnel who are responding to this surge in so many cities, but most notably in the recent past in New York City.

Number two is testing. If there's been one significant failure, it has been our inability to test both who has the disease today and who doesn't. But most importantly, and increasingly importantly, who has had it in the past.

And then number three, we need to begin and accelerate that development of a vaccine. And that vaccine we know is going to take a year. But the research, the support, the moneys need to be focused on that in a — in an aggressive way over these next several weeks and months.

You know, a lot of people ask about the impact of the pandemic on the health insurance industry. And I — and I spent a lot of time with the health insurance industry — I'm not concerned about the private commercial health insurance industry.

I do think the non-commercial aspect, both Medicare and Medicaid, we'll put a huge stress on, which will require a lot of replenishment. A lot of states did not expand Medicaid, especially in the south and the southeast. And I would like to personally see that expansion of Medicaid. It is probably the most direct way that we can address the health insurance needs of the poor and to get funds to the poor and the underserved today.

Well, there's no question to me that we're on the way to winning this battle, and we will win this battle. We are aggressively developing the medicines to do so, to treat it, though there's no treatment yet, and to develop a vaccine, which we know has worked in other devastating infectious diseases in the, in the past.

The patience of the American people, I admire. Their staying at home is a punishment, especially for our vulnerable populations. But I am optimistic. And with a lot of continued diligence, and hard work, and yes, pain, we'll — we will win this battle.

Health care has unfortunately been a partisan issue for decades.

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I have great hope that this will bring people together, because the common enemy is a pathogen. A pathogen does not have a passport. A virus does not have a visa. It is a unifying enemy to which we come together around.

And I am very hopeful in the ensuing months and probably years that that togetherness, that collective coming together around a common enemy, will result in us both first preparing for the next pandemic, with something like a Manhattan Project, number one.

But number two will spill over into other issues like education, like climate change, the sort of political — politicized issues of the past, that there will be a coming together to address them in a common sense, intelligent, and smart way.

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