



Health Watch USAsm Newsletter

<https://www.healthwatchusa.org> July 1, 2026

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

Activity for the Month of June - Health Watch USAsm:

- 1 Continuing Education Course.
- 1 OpEd, 2 Articles
- 1 Meeting Presentation
- 2025 HW USA [Conference Videos are Available.](#)
- 2024 HW USA [Conference Videos are Available](#)

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

Health Watch USAsm Nov. 1st, 2025 Conference Presentation Videos & Proceedings: Combating Infectious Disease Challenges: <https://www.healthwatchusa.org/conference2025/index.html>

Health Watch USAsm Activities Reports: [2020](#) [2021](#) [2022](#) [2023](#) [2024](#)

COMBATING INFECTIOUS DISEASE CHALLENGES

Have we gone twenty steps forward or backwards?



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.



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- 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



RFK MAHA vaccine study censorship is driving US brain drain

"RFK's demands to researchers continues a growing effort to skew scientific literature towards pseudo-vaccine science to protect flawed antivaccine studies. The United States now appears to be on the verge of losing its measles elimination status and shifting to mitigation, a strategy of addressing outbreaks as they occur rather than focusing on the elimination of the virus. An even more devastating outcome

of these federal actions is the continued brain drain of our scientific institutions, with Europe, Canada and other countries luring our best scientific minds to greener pastures with a saner environment. Regrettably, this may well define the United States for generations to come." June 27, 2026. Courier Journal

<https://www.courier-journal.com/story/opinion/contributors/2026/06/27/rfk-jr-vaccine-research-science-research-public-health-maha-antivax/90605025007/>

Copilot Search

Most Common Elements in the Earth's Crust

The Earth's crust is composed mainly of a few elements, with **oxygen** and **silicon** dominating by far. Together, they make up about **74.3% of the crust by weight**, and the top ten elements account for roughly **99%** of its mass [WorldAtlas](#).

Top 10 Most Abundant Elements in the Crust

1. **Oxygen (O)** – ~46.1% by weight. Found in silicate minerals and oxides, it bonds easily with other elements [WorldAtlas](#).
2. **Silicon (Si)** – ~28.2%. Forms the backbone of silicate minerals like quartz and feldspar [WorldAtlas](#).
3. **Aluminum (Al)** – ~8.23%. The most abundant metal in the crust, found in minerals like feldspar and clay [WorldAtlas](#).
4. **Iron (Fe)** – ~5.63%. Present in oxides (hematite, magnetite) and silicate minerals [WorldAtlas](#).
5. **Calcium (Ca)** – ~4.15%. Found in minerals like calcite and plagioclase feldspar [WorldAtlas](#).
6. **Sodium (Na)** – ~2.36%. Common in feldspars and micas [WorldAtlas](#).
7. **Magnesium (Mg)** – ~2.33%. Found in olivine and pyroxene minerals [WorldAtlas](#).
8. **Potassium (K)** – ~2.09%. Present in micas and feldspars [WorldAtlas](#).
9. **Titanium (Ti)** – ~0.565%. Found in ilmenite and rutile [WorldAtlas](#).
10. **Hydrogen (H)** – ~0.140%. Part of water and hydroxyl groups in minerals [WorldAtlas](#).

Why are we so afraid of Aluminum

We take vacations in aluminum tubes (planes), cook acidic foods in aluminum pans, store our food in aluminum foil and drink acidic drinks from aluminum cans. It is in some antacids, deodorants and cosmetics. Aluminum is the third most common element in the Earth's crust making up 8% of the crust. It is everywhere and our kidneys efficiently excrete aluminum from the human body. Why are some so afraid of the miniscule amount of aluminum in some vaccines? It makes no sense.



Has the United States progressed from an elimination to a mitigation measles strategy?

Shift from Measles Elimination to Mitigation: Why and What It Means: The global measles strategy has evolved from a goal of complete elimination to a focus on mitigation because sustained elimination has proven difficult to maintain, and outbreaks continue to occur despite decades of vaccination efforts...In short, the shift reflects a realistic recognition that

measles elimination is a long-term, high-barrier goal, while mitigation is the immediate, actionable strategy to

protect populations and reduce the impact of the disease until global immunity is fully achieved.
<https://www.linkedin.com/pulse/has-united-states-progressed-from-elimination-measles-kevin-kavanagh-sypfe/>

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Below is an excellent and comprehensive monograph by Dr. Wilmore Webley, PhD regarding vaccines and autism. Listed are 35 links to studies along with their major findings. None of which support the contention that vaccines cause autism.

Vaccines and Autism, A comprehensive review

"The studies included in this bibliography represent evidence from some of the world's most comprehensive health databases and surveillance systems. Many involve hundreds of thousands of participants, while several meta-analyses combine data from more than one million children. The consistency of findings across countries, populations, and methodologies provides a strong and robust body of evidence."

https://www.healthwatchusa.org/HWUSA-References/Vaccines_and_Autism_A_Comprehensive_Review.pdf

Health Watch USAsm Presentations

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What counts as a bloodborne pathogen exposure?

Transmission requires both a potentially infectious fluid and a portal of entry.

FLUID + **PORTAL** = **EXPOSURE**

potentially infectious **route into body**

Potentially infectious
Blood; visibly bloody fluids; semen/vaginal fluids; selected sterile body fluids.

Portal examples
Needlestick/cut; mucous membrane splash; non-intact skin; bite involving blood.

Usually not an exposure Non-bloody saliva/sweat/tears, urine/feces/vomit, or intact skin.

If either element is missing, focus on reassurance, documentation, and local policy.

Bloodborne Pathogens Post-Exposure Management

Post Exposure Management of Bloodborne Pathogens

Dr. Anne Zaia's presentation covers post-exposure management of bloodborne pathogens, emphasizing rapid assessment, timely treatment, and clear counseling. A true exposure requires both potentially infectious material—such as blood, visibly bloody fluids, semen, vaginal fluids, or certain sterile body fluids—and a portal of entry. Saliva, urine, feces, vomit, sweat, and tears are generally not considered bloodborne pathogen risks unless visibly bloody. Human bites usually are not bloodborne exposures unless skin is broken and blood is present.

Immediate response includes washing wounds with soap and water, irrigating mucous membranes, removing contaminated contact lenses, reporting promptly, and avoiding harmful practices such as squeezing wounds or using bleach, peroxide, or betadine. When indicated, HIV post-exposure prophylaxis should begin as soon as possible, ideally within two hours, and generally no later than 72 hours. Current guidance favors a well-tolerated, once-daily three-drug regimen, with follow-up at 72 hours to assess adherence and side effects.

The presentation stressed the importance of hepatitis B vaccination and documentation, since hepatitis B is easier to transmit than HIV or hepatitis C. Baseline and follow-up testing should be performed for HIV, hepatitis B, and hepatitis C as appropriate. Clear risk communication, reassurance, and mental health support are essential parts of care. Health Watch USA Meeting June 17, 2026. <https://youtu.be/ZmGe1iw9olw>



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Upcoming Meetings.

July 15, 2026 at 7 PM ET

Kevin Kavanagh, MD, MS, The systematic destruction of science.

Aug. 19, 2026 at 7 PM ET

Donna Carden, MD, An ED-to-Home Intervention improves outcomes in patients with socioeconomic disadvantage.

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

Health Watch USAsm – Articles of Interest

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Another study finding vaccine effectiveness in preventing major adverse cardiovascular events. Statistical significance was reached in those age 75 and older.

2024-2025 COVID-19 Vaccine and Major Adverse Cardiovascular Events Among US Veterans

"This cohort study including 1,039,659 participants from the US Department of Veterans Affairs found that the 2024-2025 COVID-19 vaccine was associated with a lower risk of COVID-19–associated major adverse cardiovascular event (MACE)..." "At 8 months, the COVID-19 vaccine was associated with lower risk of COVID-19–associated MACE (VE, 37.7% [95% CI, 18.2%-54.9%]; risk difference per 10,000 persons, 2.0 [95% CI, 0.9-3.7])... While VE for COVID-19–associated MACE on the relative scale was statistically significant across subgroups of participants with and without comorbid health conditions, the absolute benefit was consistently and substantially greater for individuals with the comorbid health condition. Secondary analyses of all-cause MACE, all-cause hospitalization, and all-cause death suggested substantially larger absolute risk reductions (risk difference for all-cause MACE, 23.7 [95% CI, 14.1 to 34.7])."

<https://jamanetwork.com/journals/jamainternalmedicine/fullarticle/2850241>

The following two articles discuss a flu outbreak all but predicted by a [recent Health Watch USA OpEd](#).

Influenza outbreak among service members at Lackland Air Force Base in San Antonio, Texas, USA, following removal of vaccine mandate

"As of 18 Jun 2026, a confirmed influenza outbreak was reported among service members at Lackland Air Force Base (Joint Base San Antonio), Texas, USA, with 222 cases, at least two hospitalizations, and one death, all currently under investigation.....Following the April 2026 policy change that made annual influenza vaccination optional for all active-duty and reserve military personnel, the flu vaccination rate among recruits at the base has dropped from nearly 100% to about 40%."

<https://beaconbio.org/en/report/?reportid=5d15d54c-73c2-4c5b-88b5-63a2b22523e1&eventid=f80ab9b8-815b-4537-8fdd-c0a574117433>

Military services again requiring recruits to get flu shots as Air Force outbreak grows

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As of Wednesday June 24, 2026), the number of cumulative cases linked to a flu outbreak at Lackland Air Force Base, part of Joint Base San Antonio, had reached 275, according to sources familiar with the matter. That's up from 222 cases reported on Tuesday...The outbreak is unfolding just two months after Defense Secretary Pete Hegseth made the annual flu shot optional for troops, scrapping the military's requirement for it, which dates to 1945, a move breaking with longstanding public health directives.

<https://abcnews.com/Health/military-services-requiring-recruits-flu-shots-air-force/story?id=134126794>

Dozens of countries are trying to lure U.S. scientists abroad—and it's working

The great American brain drain could define science for a generation.

"This is Team Europe in action," says Maciej Berestecki, a spokesperson for the European Commission. What all of them offer, according to Berestecki, is to fill the gaps other nations leave. "We offer three things," he says, "that researchers increasingly cannot take for granted elsewhere: stable and long-term funding, the freedom to pursue bold ideas, and an exceptional quality of life." It's not hard to figure out which countries he's comparing the Continent to. "At a time when science is increasingly under pressure worldwide, Europe stands out ever more clearly as a place where the freedom of scientific research is actively protected and promoted," Berestecki says. That's appealing to young researchers who want to be able to build a scientific career and worry less about it being unbuilt underneath them.

<https://www.yahoo.com/news/science/articles/u-scientists-being-lured-abroad-095600158.html>

Below is an important paper documenting that the healthcare costs in those with long COVID were over 60% more than the control group.

Healthcare Resource Use and Costs under Pandemic Circumstances in The Netherlands: Results from the Lifelines COVID-19 Cohort

HCRU (healthcare resource use) was highest in the PCC (post-COVID-19 condition) group for almost all types of healthcare. Relative differences between PCC and control participants were highest for the hours of nursing care at home received, occupational and speech therapist consultations, day treatments at a rehabilitation center, and occupational physician visits. Total average annual healthcare costs per person were estimated at €1,136 (\$1315), €616 (\$712), and €678 (\$785) for the PCC, COVID-19 and control group, respectively.

[https://www.ijidonline.com/article/S1201-9712\(26\)00489-3/fulltext](https://www.ijidonline.com/article/S1201-9712(26)00489-3/fulltext)



Poll: Trust in CDC has fallen dramatically in the last year

"Boston, MA—A year after changes to federal leadership in the U.S. public health system, a new poll finds that trust in public health agencies has dropped dramatically. Only 50% of U.S. adults say they trust health recommendations from the Centers for Disease Control and Prevention (CDC), compared to 77% in spring 2025. The fraction who say they trust their state health department has declined from 80% to 66% and

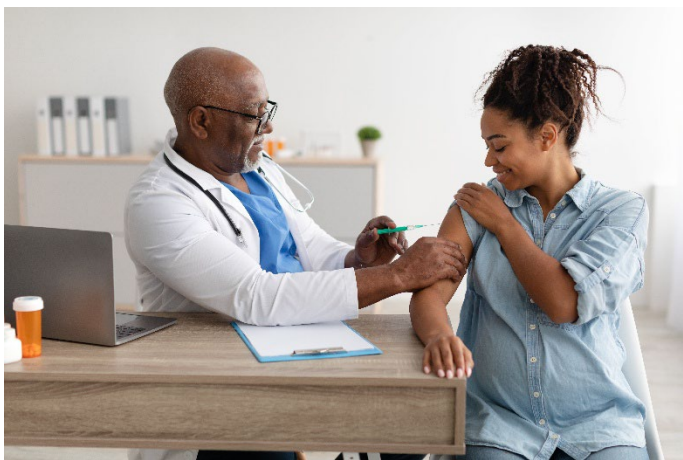
the fraction who say they trust their local public health department has fallen from 82% to 70%."

<https://hsph.harvard.edu/news/poll-trust-in-cdc-has-fallen-dramatically-in-the-last-year/>

Obstetricians oppose CDC to recommend more shots for moms

"In a first, the American College of Obstetricians & Gynecologists (ACOG) released its own vaccine schedule. The CDC withdrew its recommendation that all pregnant people get a COVID vaccine in 2025. And it only recommends a flu shot during flu season, not any time of the year and in any trimester, as the ACOG recommendations do. Overall, the ACOG schedule calls for the Tdap (tetanus, diphtheria and pertussis) shot between 27 and 36 weeks of pregnancy and the respiratory syncytial virus (RSV) shot from weeks 32 to 36 during a first pregnancy. Pregnant people with risk factors may need pneumococcal, meningococcal and hepatitis shots as well, the group advises. Three other vaccinations—those against human papillomavirus, measles, mumps and rubella, and chickenpox—should be received before or after pregnancy, including while breastfeeding, according to the recommendations"

<https://washingtonweeklytimes.com/science-2/obstetricians-oppose-cdc-to-recommend-more-shots-for-moms/>



Maternal RSV Vaccine Cuts Infant Hospitalizations by 70%

"A study led by researchers at the University of Pittsburgh and UPMC, published June 5 in JAMA Network Open, a peer-reviewed journal of the American Medical Association, found that vaccination against respiratory syncytial virus (RSV) during pregnancy reduced the risk of hospitalization in young infants by nearly 70%. This study provides early real-world evidence from U.S. clinical care, showing that administering one dose of the maternal RSV vaccine (Pfizer's ABRYSVO RSVpreF vaccine) reduces

hospitalization related to RSV in young infants. The results are consistent with findings from RSVpreF vaccine clinical trials. The RSVpreF vaccine was approved by the U.S. Food and Drug Administration in 2023."

<https://www.medschool.pitt.edu/news/maternal-rsv-vaccine-cuts-infant-hospitalizations-70>

How to identify and counter vaccine misinformation: PAHO guidance for journalists and content creators.

Pan American Health Organization: "The guidance highlights that misinformation often spreads faster and reaches wider audiences than evidence-based information, particularly when it appeals to strong emotions or contains elements that make it appear credible. Much of this content originates from so-called "superspreaders"—actors who undermine scientific evidence and, in some cases, profit from promoting unproven products or charging for access to exclusive content. " <https://www.paho.org/en/news/23-6-2026-how-identify-and-counter-vaccine-misinformation-paho-guidance-journalists-and>

We're constantly told to choose products with

**"none of the *bad* stuff,
only the good stuff."**

But here's the problem: preservatives—often labeled as "bad chemicals"—actually keep the real bad stuff out. They prevent dangerous bacteria and fungi from growing in our vaccines, cosmetics, and food.

When we remove preservatives to make products seem "cleaner," we're not eliminating risk, we're creating it. If people really wanted to avoid harmful substances, they'd want the preservatives that stop contamination and infection. Sometimes the "artificial" ingredient is exactly what protects us from genuine danger.

THE
UNBIASED
SCIENCE
PODCAST



Health Watch USAsm – Combating Misinformation

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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](#)

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

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- 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.infectioncontrolday.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

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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

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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.

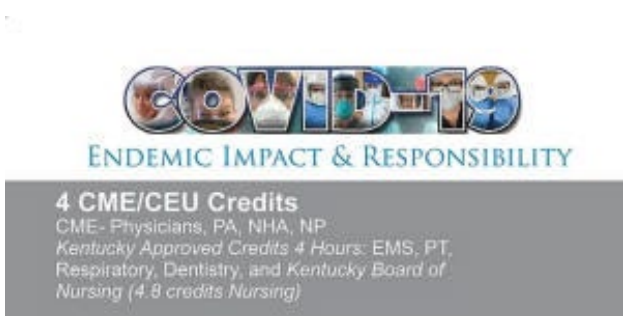
The course is currently available at <https://healthconference.org> and [Combating Infectious Disease Challenges](#)

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 USAsm – 2023 & 2024 Conference Presentations

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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 USAsm – 2025 Webinar Presentations

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2025 Webinar Introduction & Science Behind Masking: Dr. Kevin Kavanagh, Board Chairman of Health



The Statement: "More high-quality RCTs are needed..." is true,

<https://www.sensible-med.com/p/the-cochrane-mask-fiasco>
-- Vinay Prasad,

1. But to be high quality a Randomized Controlled Trials must be double-blinded or significant biases can occur.

2. And with public health, RCT often cannot be ethically performed. Take for example the effectiveness of parachutes; which was the subject of the famous BMJ article regarding ethical implications of RCTs.

Smith GC, Pell JP. Parachute use to prevent death and major trauma related to gravitational challenge: systematic review of randomised controlled trials. *BMJ*. 2003 Dec 20;327(7429):1459-61. doi: 10.1136/bmj.327.7429.1459. <https://www.bmj.com/content/327/7429/1459.long>

Watch USAsm 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 USAsm Webinar. Aug. 29, 2025. [View Video](#) [View Slides](#)

Associated Infection Control Today Article: How Misinformation Tries

to Debunk the Science Behind Masking <https://www.infectioncontrolday.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.

William Schaffner, MD
Aug. 29, 2025

Awareness and belief in health misinformation
Misinformation is pervasive, but trust in health misinformation is less so.
Percent who have heard or read false claim (only 5 of 10 claims shown)
Percent who say false claim is definitely or probably true

False Claim	Percent who have heard or read false claim	Percent who say false claim is definitely or probably true
The COVID-19 vaccines have caused thousands of sudden deaths	~60%	~20%
The MMR vaccines have been proved to cause autism in children	~60%	~20%
The COVID-19 vaccines have been proved to cause infertility	~60%	~20%
Ivermectin is an effective treatment for COVID-19	~60%	~20%
More people have died of COVID-19 vaccines than of COVID-19 virus	~60%	~20%

JAMA 331:1037-3094

Communications and pandemic mitigation strategies—Health Watch USA 2025

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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 USAsm Webinar Aug. 29, 2025. View Presentation Video: <https://youtu.be/h45wnmG79xl>

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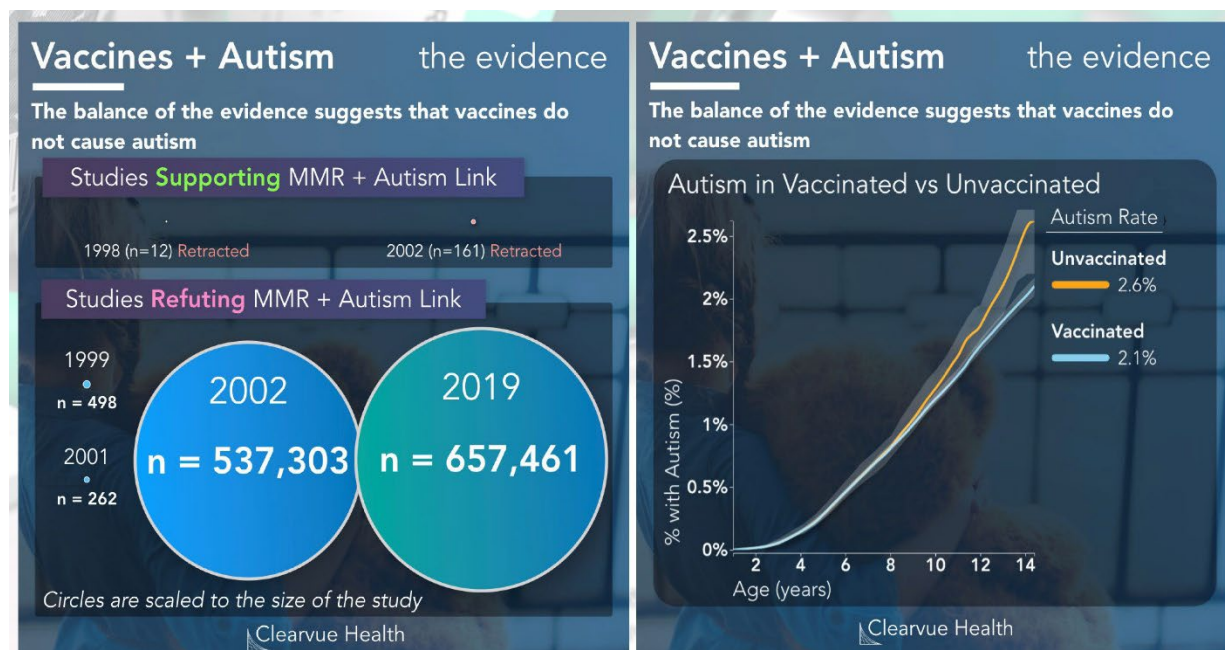
Measles 50 years later

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 USAsm conference, Aug. 29, 2025. View Video of Presentation: <https://youtu.be/AOgySUPnGKk>

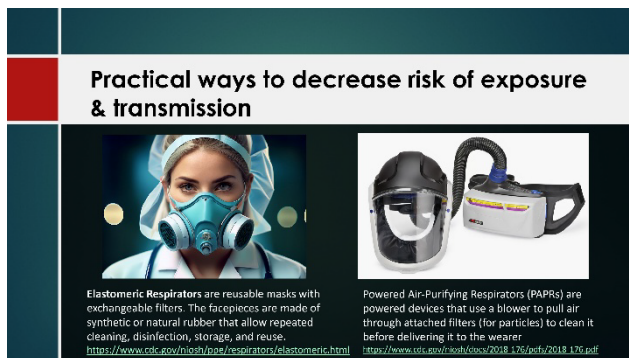


<https://www.clearvuehealth.com/b/autism-mmr-stats/>

(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.long>

(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/>



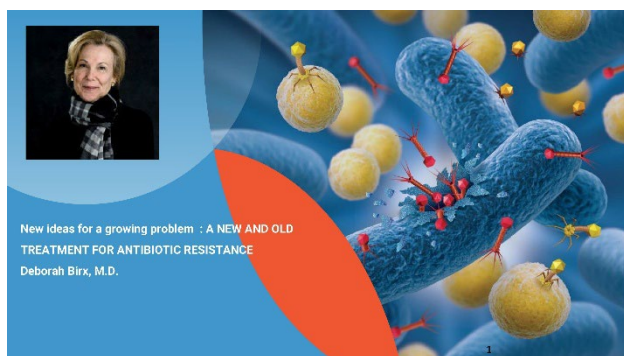
A View from the Frontlines: The Current State of Infection Control in U.S. Healthcare Facilities

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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

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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.

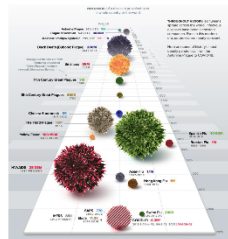
The field now aims to prove efficacy through large phase three superiority trials, which could establish phages as a viable standard of care. Ultimately, phage therapy has the potential not only to treat resistant infections but also to lessen antibiotic use, preserve the microbiome, and improve outcomes in patients with serious bacterial diseases. Health Watch USAsm webinar Aug. 29, 2025. View Presentation Video: <https://youtu.be/CQmpXcliJg8>

When exclusion/elimination may be justified

Modelling suggests we can expect a 'Covid-19 magnitude' pandemic with an 18–26% chance over the next decade, > 2% likelihood per annum

Risk assessment uses multiple factors for assessing severity and controllability

Sources: Madhav et al 2023. Center for Global Development



Source: The Visual Capitalist: <https://www.visualcapitalist.com/history-of-pandemics-deadliest/>

Why elimination should be the default strategy for future severe pandemics

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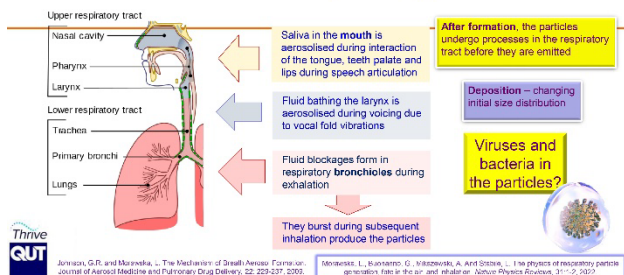
In this presentation, Professor Michael Baker, a key figure in New Zealand's COVID-19 response, discusses the country's elimination strategy against the pandemic. A public health physician and epidemiologist at the University of Otago, Baker highlights that a clear strategy is crucial for effective pandemic 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 USAsm Webinar: Combating Infectious Disease Challenges. View Video: <https://youtu.be/I7DIJA87sl8>

Generation of respiratory particles



Understanding and Reducing the Spread of Respiratory Pathogens Through The Air

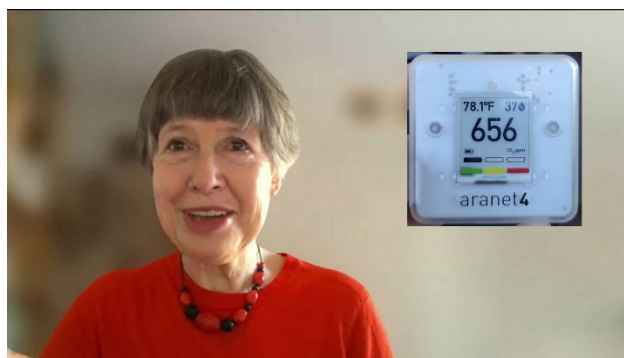
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Dr. Lidia Morawska, PhD, an expert in air quality, discussed the science behind infectious respiratory particles, emphasizing the importance of understanding their generation and spread. All respiratory activities, especially louder ones like singing, 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 USAsm 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 USAsm's 2025 Conference. View Video: https://youtu.be/bmg_G2tEOKU



Matthias Maiwald, MD
Aug. 29, 2028

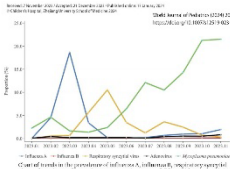


Mycoplasma pneumoniae – Situation in China 2023

What's behind China's mysterious wave of childhood pneumonia?



Current *Mycoplasma pneumoniae* epidemic among children in Shanghai: unusual pneumonia caused by viral pathogen



Increase of respiratory illnesses among children in Beijing, China, during the autumn and winter of 2023

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

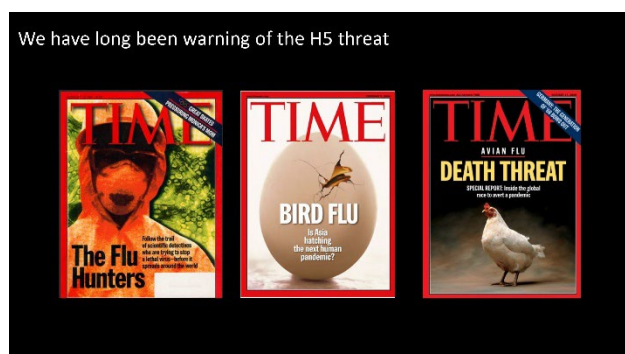
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Dr. Matthias Maiwald presented an in-depth analysis of the trends in respiratory pathogens in Singapore following the lifting of Covid-19 restrictions. Using data from 120,000 clinical samples (mainly pediatric) collected between 2019 and mid-2025, 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 USAsm webinar on Aug. 29, 2025. View Presentation Video: <https://youtu.be/jRwadwS31T0>



Bird Flu, the risks and prevention of a future pandemic

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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 USAsm webinar Aug. 29, 2025. View Video: <https://youtu.be/GyKR462luJQ>

What cats are at risk for bird flu?

- Cats with outdoor access in locations where H5N1 flu virus is infecting birds and mammals
- Cats living on dairy farms, poultry farms, or with backyard flocks
- Exposure to dairy or poultry farmworkers and their clothing



UF Shelter Medicine
UNIVERSITY of FLORIDA

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

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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 USAsm webinar: "Combating Infectious Disease Challenges."

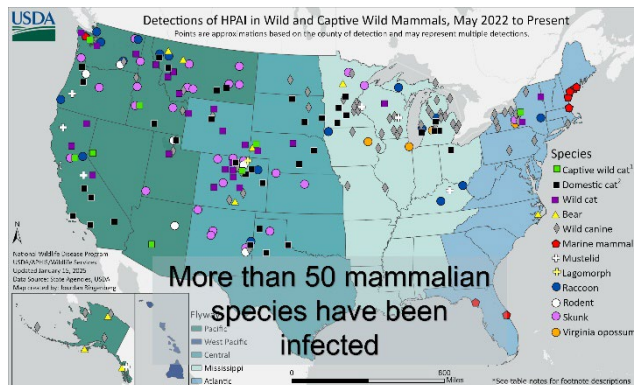
Presentation Summary: The presentation by Dr. Cynda Crawford explores the evolving ecology and impact of highly pathogenic H5N1 avian influenza (bird flu) across the United States. Traditionally, wild waterfowl are the natural hosts of

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 USAsm webinar. Aug. 29, 2025. View Presentation Video: <https://youtu.be/drvk7vSj6LE>



Following H5 Influenza As It Moves Through North American Food Animals

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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 USAsm Webinar Aug. 29, 2025. View Presentation Video: https://youtu.be/SALHVe_aAJ4

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