



COMMITTEE ON *DEMOCRATS*  
**ENERGY & COMMERCE**  
RANKING MEMBER FRANK PALLONE, JR.

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**Statement of Ranking Member Frank Pallone, Jr., as prepared for delivery  
House Committee on Energy and Commerce  
Subcommittee on Oversight and Investigations  
Hearing on “Examining the U.S. Public Health Response to the Zika Virus”**

Thank you to all of the witnesses for joining us this morning to discuss the Zika virus and what the federal government is doing to respond to this threat.

Zika represents a serious threat to global health and security, and we must address that threat decisively, both at home and abroad.

It is suspected of causing a multitude of devastating birth defects, most notably microcephaly, a condition in which babies are born with severe brain defects. In adults, the virus has been associated with Guillain-Barré syndrome, which can result in paralysis and even death.

Although scientists are not able to say definitively that Zika is the cause, evidence is mounting each day to support a causal relationship between the virus and these serious health conditions.

The Zika virus is spreading explosively through the Americas, with active local transmission in 31 countries and territories. The Pan American Health Organization predicts that the virus will eventually spread to every country in the Americas except Canada and Chile.

The crisis in Puerto Rico could become particularly severe, as Zika is expected to infect one in five Puerto Ricans. Given the territory’s debt crisis and inability to fund even the most basic public health services, robust assistance from the federal government will be absolutely crucial to contain the virus and protect as many pregnant women as possible.

As spring and summer approach, we must also be prepared to address local transmission of Zika within the continental U.S., particularly in southern states, where the mosquitos that carry the disease are common.

As Dr. Hotez on our second panel has previously noted, local transmission of Zika in the U.S. will likely disproportionately affect poor neighborhoods in these southern states, where

inadequate window screens, standing water, and imperfect waste disposal provide ideal mosquito breeding grounds.

Addressing Zika will require a multidimensional public health response. It must include accelerating research, development, and procurement of vaccines and diagnostics, providing emergency assistance to states and the U.S. territories, and enhancing our surveillance capacity to track the Zika virus in people and in mosquitos. The Administration has requested emergency funding to address each of these components, and I look forward to hearing more about the details of this request today.

Unfortunately, the Republican Chairs of the House Appropriations Committee have declined to fund the Administration's request, and have instead called upon the agencies to divert unobligated Ebola funds. I believe this decision is short-sighted, and would increase health risks both at home and abroad.

As our witnesses will make clear today, Ebola remains and will continue to remain a threat to human health for the foreseeable future. It could reemerge at any point. As we have seen, it can cause outbreaks that decimate economies, trigger widespread panic, and result in a tragic loss of human life.

NIH is using its Ebola funds to conduct essential ongoing research, including the development of an Ebola vaccine, and CDC is continuing to conduct its global efforts to combat the Ebola virus on the ground. Shortchanging these efforts would damage our ability to effectively respond to both Zika and Ebola, as well as to any future threats.

The remaining Ebola funds are largely committed to the Global Health Security Agenda, a multi-year effort to keep Americans safe by strengthening the capacity of developing countries to prevent, detect, and respond to emerging epidemics.

Let's not forget how Ebola managed to spiral out of control. To build an effective global system for containing infectious disease, we must make sure that the poorest and most vulnerable countries have the surveillance capacity to identify outbreaks and respond swiftly.

Fighting Zika will not be easy. Like Ebola, it thrives in impoverished communities, and its heaviest burden falls on vulnerable populations least able to respond. The disease is difficult to track, as most people infected with Zika experience no symptoms. And the research agenda is extensive, given how little we know about the disease.

But I am confident that our federal agencies are up to the task, as long as Congress does its part and provides the necessary resources. I hope that all my colleagues on both sides of the aisle recognize the importance of these investments, and that we will be able to work together in a bipartisan manner to address the Zika threat in the coming weeks.

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