Impact assessment I pulled together and shared with my leaders. I utilized the attack rate of 20% that was experienced on the Diamond Princess so that I could begin to help people get their head around what is perceived to be a mild outbreak means. I purposely used an actual event (and actual attack rate) for comparison so as not to be perceived as fear mongering. I sense confusion among very smart people (politicians, physicians, public health leaders) who hear that more than 80% of those who are infected have mild disease and that overall case fatality rates are on the order of 0.5%. And they then equate these stats to a mild outbreak. They really don't consider attack rates and the impact of the 20% with something other than mild illness means.

A more reasonable attack rate to plan for is around 40%, so just double everything in the attached reports You all can look at these projections and envision what will happen to our healthcare system if we don't take aggressive actions to slow community transmission now. This is not the time to get fancy or creative with NPIs and try to finesse things (ala carte implementation). We should learn from China and the other best practice nations already fighting this disease. We know what works; we just need the will to do it. We should be treating this like we treat stroke and acute coronary syndromes where time = tissue. In this case time = transmission.

From: (b)(6) (b)((b)
To: "Brian Benson", Duane"
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Sent: Thursday March 5 2020 7:52:21AM
Subject: RE: Red Dawn Raging Start March 4

Hi Brian,
No coronavirus RNA viruses don't incorporate their genomes into the host DNA
Yes, potential hit and run disease is pulmonary fibrosis, which can occur as a result of acute lung injury months to years later
No, there is absolutely no evidence that this virus is bioengineered.
(b)(

From: Brian Benson (b)(6)
Sent: Thursday, March 5, 2020 12:08 AM

To: Caneva, Duane (b)(6)
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Subject: Re: Red Dawn Raging Start March 4

Duane, thanks for including me in the conversation.

I've been reading what I can on PubMed and in the news, but can't find many answers, thus I'll asks this group. First, being that some viruses are capable of inserting their DNA into hosts genome, is there any evidence that this RNA virus can do that? I have nothing to support this, but I ask to anticipate any late term effects, i.e. Cancer, cardiomyopathy, diabetes, auto immune diseases or other post viral syndromes. Secondly, are there any restriction sites in this strain that are not present in others of the same family, suggesting this is engineered? Lastly, what's gong on in North Korea?

Folks, those of you that know me understand I'm glad to help in any way I can. Please let me know

On Mar 4, 2020, at 10:24 PM, Caneva, Duane (b)(6) wrote:

Please use this thread as of evening of 04 March.

Duane C. Caneva, MD, MS
Chief Medical Officer
Department of Homeland Security
(b)(6) (o)