

Congress of the United States
Washington, DC 20510

June 4, 2019

Robert R. Redfield, MD
Director
Centers for Disease Control and Prevention
1600 Clifton Road
Atlanta, Georgia 30329

Dear Director Redfield:

Our staff has reached out to your staff to request a briefing on the Centers for Disease Control and Prevention (CDC) guidelines for adenovirus outbreaks. Last fall, our Maryland community saw the tragic passing of Olivia Paregol, a student at the University of Maryland (UMD) campus who died from complications related to adenovirus 7. Ms. Paregol had a weakened immune system from Crohn's disease. The large social gatherings present at universities may increase the spread of communicable diseases, which necessitates further guidance to healthcare providers in order to best protect immunocompromised individuals on campus. We are concerned that the guidelines did not protect Ms. Paregol, and that they leave immunocompromised people like her at risk of serious illness or death.

As you may be aware, the *Washington Post* has covered the circumstances around Ms. Paregol's care and has highlighted actions taken by UMD health officials based on CDC guidelines. In response to the *Washington Post* story, the University stated that its "approach to reporting, testing, cleaning, and communicating about the virus was coordinated with health officials, and exceeded CDC guidelines."¹

While adenoviruses are common viruses that may cause a range of cold-like symptoms like sore throat, pneumonia, and pink eye, there are strains of adenoviruses that are especially virulent and dangerous to people with compromised immune systems. The CDC has even acknowledged that one type of adenovirus, adenovirus 7, has been associated with more severe outcomes like severe illness and death, than other adenovirus types, particularly in people with weakened immune systems.² Despite causing severe illness and even death in some individuals, adenovirus 7 is not a nationally notifiable disease in the United States, and as such, clinicians are not required to test for or report cases to health departments or the CDC. Recommending prompt adenovirus testing, especially for those with compromised immune systems, may help to prevent another tragedy.

We are concerned that the current CDC guidelines for adenovirus outbreaks do not account for immunocompromised individuals, and would like the Agency to answer the following questions in writing at a briefing to be held before June 14, 2019:

¹ https://www.washingtonpost.com/news/national/wp/2019/05/16/feature/university-of-maryland-mold-adenovirus/?utm_term=.2c62b9b73dd6&wpisrc=al_special_report_alert-local--alert-national&wpmk=1

² <https://www.cdc.gov/adenovirus/outbreaks.html>

1. What are the current CDC guidelines for medical facilities and university-based health centers during adenovirus outbreaks?
2. How soon does outreach and education begin once an adenovirus outbreak is suspected?
3. CDC acknowledges that adenovirus 7 has been associated with more severe outcomes, particularly in people with weakened immune systems. Does the CDC have specific recommendations for immunocompromised individuals and their healthcare practitioners when there is a suspected or confirmed outbreak of adenovirus?
4. If not, why does the CDC not have specific recommendations related to immunocompromised individuals during an adenovirus outbreak?
5. Given the unique situation faced by immunocompromised individuals living on college campuses, does the CDC have any specific guidelines to inform university-based health center medical staff how to best educate and work with this special population, in order to mitigate possible infection risks?

Thank you for your prompt attention to this serious issue. We look forward to receiving your response.

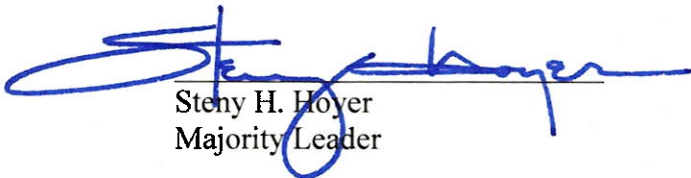
Sincerely,



Benjamin L. Cardin
United States Senator



Chris Van Hollen
United States Senator



Steny H. Hoyer
Majority Leader