

Message

**From:** Alexander, Paul (HHS/ASPA) (VOL) [/O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=BC4EDA8AD333439EB3D296AE0E0F9634-ALEXANDER,]  
**Sent:** 7/3/2020 5:27:35 PM  
**To:** Caputo, Michael (HHS/ASPA) [REDACTED]; Murphy, Ryan (OS/ASPA) [REDACTED]; Traverse, Brad (HHS/ASPA) [REDACTED]; Hall, Bill (HHS/ASPA) [REDACTED]; Oakley, Caitlin B. (OS/ASPA) [REDACTED]; McKeogh, Katherine (OS/ASPA) [REDACTED]  
**Subject:** FLAG: ADDITIONAL: Keep on your radar potential mutations of COVID spike proteins as we develop a vaccine....

NOW Fauci just came on at 1.17 pm on news headlines that COVID is mutated...and expect a dramatic increase in spread....so now its news....yikes....

He just wont stop!!!!!!!!!!!!!!!!!!!!!! He cant keep quiet....and he is not on the same page of the govn....does he think he is the President???

This new mutated strain is strain D614G...I had written about this to you all about a month ago...as turned up on the radar....

Anyway, now Fauci is embarking on the news to scare the world again...we must lock down for 10 years....if he had his way.

We always know that virus has one aim, to live, breath, reproduce...any pathogen...it's a living entity....it needs to replicate so as it sends its offspring (progeny) into the future...so we know to expect this..

But the studies so far are in vitro (means in the lab dish)...it may be more infective but less pathogenic...so we need to see...how it behaves in humans...we don't know yet...all is dish so far.

So the bottom line is if it is more infectiouness now, the issue is who cares? If it is causing more cases in young, my word is who cares...as long as we make sensible decisions, and protect the elderly and nursing homes, we must go on with life...who cares if we test more and get more positive tests...are these test results serious???. Are the results showing serious illness? More hospital???. Or are folk sent home at emergency with no hospital admission?? Do they go to ICU if admitted???. Why???. Is it due to elective surgeries???. What???. Do they die due ot COVID???. If none of the latter happens, then who cares...once we safeguard the elderly, the frail, immune compromised, and nursing homes...who cares...that's my opinion. We have more to fear from seasonal influenza A and B that kills 200 children a year...CDC data (para)...we have more to fear from ebola that is on the US soil that the past President brought here for the first time...that is no joke...we must keep that locked down for ebola came to the US due to President Obama...that has a near full mortality rate.

We have never locked down a well young population...ever...like what we did here...

We know newborns, children, young people, young adults, and ebeb older folk with no conditions...are at very low risk of severe illness or death...it is a clear fact....

Dr. Paul E. Alexander, PhD  
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US Department of Health and Human Services (HHS)  
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**From:** Alexander, Paul (HHS/ASPA) (VOL)

**Sent:** Friday, July 3, 2020 10:28 AM

**To:** Caputo, Michael (HHS/ASPA) [REDACTED]; Murphy, Ryan (OS/ASPA) [REDACTED];  
Traverse, Brad (HHS/ASPA) [REDACTED]; Hall, Bill (HHS/ASPA) [REDACTED]; Oakley, Caitlin B.  
(OS/ASPA) [REDACTED]; McKeogh, Katherine (OS/ASPA) [REDACTED]

**Subject:** Keep on your radar potential mutations of COVID spike proteins as we develop a vaccine....

Viruses mutate as time passes and quickly, near daily...if you take virus and place in a lab petri dish and give it a few hours, it will spontaneously mutate...and often it mutates into milder less severe strains which is good but can into a lethal strain...but it is important if the mutation impacts the vaccine (s) being produced...and so our teams in WARP etc. (and developers/sponsors) MUST keep this on their radar....we are seeing mutations on the glycoprotein that comprises the spike on the viral envelope...those molecular spikes off the virus (the antigen)...this is the key appendage that docks with the ACE 2 receptor on the epithelial surfaces of the respiratory cells and endothelial cells of vascular vessels....the vaccine seeks to provoke antibodies to this antigen and if it is changed (mutated) enroute to vaccine production, then vaccine is worthless...and it happens...this situation is so important to GET THIS RIGHT....

It can be catastrophic if the vaccine does not work for the predominant strain and will be a real failure to the administration...and so the developers cant get this wrong and make a mistake here...

Please drill them in each WARP meeting...ask them about what are they hearing about mutations? How are you dealing with this??? Is the vaccine still based on the predominant strain??? Key issues.

Virus DNA is RNA, very unstable in its copying mechanism...and can mutate spontaneously...

I know you know all of this but writing it as a warning...and for us to let the experts know we know of the key issue and how are they handling it...

We don't want folk developing (accident or deliberate) a non-functional vaccine (s)...

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