Opening Statement of the Honorable Fred Upton
Subcommittee on Oversight and Investigations
Hearing on “U.S. Public Health Preparedness for Seasonal Influenza: Has the Response Improved?”
November 19, 2015

(As Prepared for Delivery)

Continuing our longstanding efforts on flu preparedness, today’s discussion follows up our hearing last February that focused on a very harsh flu season with a mismatched vaccine that had an overall effectiveness of only 19 percent. Although the official statistics for last flu season are not available yet, in such a severe flu season, we would see up to 50,000 deaths, more than 400,000 hospitalizations, and an economic burden of about $87 billion. I, like others on this subcommittee, expressed my belief at that February hearing that we can – and must – do better in addressing this major public health threat to protect folks in Michigan and across the country.

Earlier this year, the World Health Organization (WHO) warned that flu strains have grown increasingly complex, and have been distributed broadly across the globe. This diversity and geographic distribution is unprecedented since the advent of modern tools for flu virus detection and analysis. Last year’s poorly matched seasonal flu vaccine and the bird flu H5 viruses that killed millions of birds in the Midwestern U.S. earlier this year are the most recent examples of this complexity. The WHO cautioned that the consequences of so many flu viruses emerging are “unpredictable” and “potentially ominous.”

Since the February hearing, our committee has been conducting bipartisan oversight into how to improve the U.S. public health response on seasonal flu and the adequacy of HHS efforts in monitoring the impacts of the bird flu outbreak. I am pleased to learn that Secretary Burwell and HHS leadership have made the response to seasonal flu vaccine mismatch a greater priority, and that HHS has been working throughout the year on various actions to improve seasonal flu preparedness. I look forward to discussing the details about these actions, and how they are expected to improve the response.

Flu is a major public health challenge. The actions from HHS and its agencies are a good start. We recognize, however, that much work needs to be done. We will also be asking questions to make sure our preparedness efforts are addressing all potential problems and gaps. Our discussion today is aimed at being constructive, and detailing ways we can work with HHS to improve our flu response to save thousands of lives.

I appreciate the hard work and dedication of the folks at HHS, the CDC, the FDA, BARDA, and the NIH on flu preparedness. I look forward to today’s testimony, and continuing the work to improve the U.S. flu response. Our collective efforts are about keeping Americans healthy during the flu season. From babies who are six-months old to the elderly, and everyone in between, folks in Michigan and across the country should have the peace of mind and faith that their flu shot will keep them healthy. Our bipartisan work continues.

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