



CDC is “in the ICU right now” former officials say

Senior officials say HHS Secretary Robert F Kennedy Jr is eviscerating the CDC. Washington Correspondent Susan Jaffe reports.

For the **officials’ resignation letters** see <https://www.medpagetoday.com/infectiousdisease/publichealth/117197>

For more on the **ACIP** see **World Report** *Lancet* 2025; **405**: e28

For the **Wyden–Alsobrooks investigation** see https://www.finance.senate.gov/imo/media/doc/rfk_report_203_days.pdf

For more on **Kennedy’s nomination** see **World Report** *Lancet* 2025; **405**: 684–85

The US Centers for Disease Control and Prevention (CDC) implosion was months in the making, senior officials told *The Lancet* after they resigned in protest following the dismissal of CDC Director Susan Monarez by Health and Human Services (HHS) Secretary Robert F Kennedy Jr. They describe a gutted agency so damaged that it might not be able to fulfil its core mission to protect Americans from public health threats.

According to an article Monarez wrote for *The Wall Street Journal*, she was fired for refusing to be part “of a deliberate effort to weaken America’s public health system and vaccine protections”. She was asked to resign or face termination if she did not “preapprove,” as she put it, vaccine recommendations from the CDC’s Advisory Committee on Immunization Practices (ACIP), whose members Kennedy had abruptly replaced with some vaccine sceptics. The reconstituted committee could issue those recommendations at its Sept 18 meeting. “Once trusted experts are removed and advisory bodies are stacked, the results are predetermined”, she wrote. “That isn’t reform. It is sabotage.”

During a combative hearing held by the Senate Finance Committee

on Sept 5, Kennedy was asked if he told Monarez she had to resign if she refused to approve changes in vaccine recommendations. He said, “No, I told her that she had to resign because I asked her, are you a trustworthy person, and she said no.”

Kennedy strongly defended his CDC actions as “absolutely necessary adjustments to restore the agency to its role as the world’s gold standard public health agency with the central mission of protecting Americans from infectious disease”. However, an investigation released by the committee’s senior Democrat, Oregon Senator Ron Wyden and Maryland Democrat Angela Alsobrooks describes dozens of changes by Kennedy that may endanger public health.

Kennedy did little to assuage the concerns of Democratic members as well as some of the Republicans who approved his nomination as secretary by President Donald Trump just 7 months ago.

When asked by Wyden if Monarez was lying about what happened, Kennedy replied, “Yes, sir”. Monarez could not be reached for comment but her lawyers responded to *The Lancet* on her behalf: “We certainly dismiss Secretary Kennedy’s claims as false and, at times, patently ridiculous. Dr Monarez stands by what she said in her *Wall Street Journal* op-ed, and continues to support the vision she outlined at her confirmation hearing that science will control her decisions.”

The former CDC leaders, who are also physicians, say the CDC has been severely diminished. “It’s in the ICU right now”, said Demetre Daskalakis, former Director of the CDC’s National Center for Immunization and Respiratory Diseases, who was

hired in 2021 by Trump’s first-term CDC Director Robert Redfield. “That doesn’t mean that it’s gone, but it’s pretty sick.”

The CDC has lost roughly 2000 employees due to lay-offs, resignations, and buy-outs, on top of programme closures and funding cuts that have adversely affected some operations. For example, “we’re not getting specimens from around the world to be able to help design new vaccines”, Daskalakis said. CDC is receiving nearly 60% fewer COVID-19 sequences used to plan next year’s vaccine, and “if there’s a new variant, we’re not going to see or hear about it until it lands on our shores”.

As an example, Daskalakis said his programme’s scientists played no role in developing some of the recommendations Monarez may have been asked to preapprove. Normally, an item is put on the committee’s meeting agenda after his programme staff had discussed it. “CDC scientists responsible for RSV learned that RSV was on the agenda when the Federal Register notice came out”, he said, referring to a daily publication containing government announcements.

HHS spokesman Andrew Nixon declined to provide copies of the ACIP recommendations Monarez said she was asked to preapprove. He also would not confirm whether Jim O’Neill, a former biotechnology executive who is the HHS Deputy Director and CDC’s new Acting Director, will support the recommendations. It’s likely he will: “What we’re doing at @CDCgov is common sense and overdue”, O’Neill wrote in a Sept 5 post on the social media platform X. “That doesn’t mean the DC establishment will like it.”



Dan Jernigan, Deb Houry, and Demetre Daskalakis outside CDC headquarters

Elijah Nouvelage/Getty Images

Debra Houry, the former CDC Chief Medical Officer, worked for a decade at CDC and also resigned after Monarez's dismissal. Once Kennedy took the helm, she said she was excluded from decision-making discussions in which she would normally participate. She learned about new COVID-19 vaccine guidance after Kennedy announced it on X. In a 53-second video posted on May 27, Kennedy said CDC would no longer recommend the vaccine for healthy pregnant women and healthy children.

She also was not consulted before a staff review of thimerosal on the CDC website was replaced by unvetted information from an outside source. (On Sept 3, HHS agreed to restore more than 100 health-related websites and resources to settle a federal lawsuit.) And although Houry has provided briefings for previous HHS secretaries during the Biden and first Trump administrations, she had not briefed Kennedy. The first time she met him was when he visited the CDC headquarters in Atlanta on Aug 11, 3 days after a gunman shot through 180 windows, and killed a police officer at the scene.

For Houry, "the final straw" was Monarez's sudden dismissal. "I was excited to have a leader above me who believed in scientific integrity. And when she was unable to make changes and be successful, I knew that I could not continue."

Daskalakis, Houry, and Daniel Jernigan, a 31-year veteran of CDC and Director of the National Center for Emerging and Zoonotic Infectious Diseases, resigned on Aug 28, a day after Monarez was fired. Another senior official, Jennifer Layden, who came to CDC in 2020, resigned on Aug 26. As Director of the Office of Public Health Data, Surveillance, and Technology, Layden led the data surveillance and the data modernisation effort for CDC but "over the last 6 to 9 months, it was very challenging to continue the work". She lost 30% of her staff and was "not able to hire new staff and

move forward with projects that are critical for our data systems. There was the hope that with the director coming in, we would have some more stability".

An HHS spokeswoman did not respond to specific comments by the former senior CDC officials. Instead, she reaffirmed Kennedy's determination: "Social media noise, coordinated attacks from special interest groups, and the gripes of disgruntled former employees will not deter him from advancing President Trump's mandate to Make America Healthy Again".

For the foreseeable future, the CDC is unlikely to reverse course. Trump has said he has confidence in Kennedy, despite a growing number of members of Congress, medical and public health associations, and more than a thousand former and current HHS employees who have called for Kennedy's resignation or dismissal. In a *New York Times* op-ed, nine former CDC directors predicted that "the loss of Dr Monarez and other top leaders will make it far more difficult for the CDC to do what it has done for about 80 years: work around the clock to protect Americans from threats to their lives and health".

They also called for a multifaceted response to CDC's retreat. "Congress must exercise its oversight authority over Health and Human Services", they wrote. "State and local governments must fill funding gaps where they can", and philanthropy, the private sector, medical groups, and individual physicians must step up.

That response is not a substitute for CDC, said Tom Frieden, who directed the CDC during the Obama administration and is now President and CEO of Resolve to Save Lives. "It's a stop-gap measure to help protect Americans now. States, the private sector, and civil society cannot replace CDC's expertise in disease tracking and response, lab networks, and vaccine recommendations—but they can support actions now to limit the damage being done."

Several states, all led by Democratic governors, have overruled last month's Food and Drug Administration decision limiting the COVID-19 vaccine to people older than 65 years and those with health conditions considered high risk. In these states, most adults and children will have access to the vaccine, regardless of their age or health. COVID-19 vaccine recommendations from the American College of Obstetricians and Gynecologists, the American Academy of Pediatrics, and the American Academy of Family Physicians also diverge from the FDA and Kennedy policies.

New York Governor Kathy Hochul issued an executive order on Sept 4 declaring a statewide disaster emergency in response to what she called "the Trump Administration's misguided attack on immunization and healthcare". The order allows pharmacists to prescribe and administer the COVID-19 vaccine to adults and children aged 3 years or older. It is still unclear if insurance plans will pay for it but Massachusetts Governor Maura Healey ordered insurers in her state to do so. Federal law requires insurers to cover ACIP-recommended vaccines, but those recommendations are finalised only after the CDC Director approves them. However, a KFF report notes that the HHS Secretary can overrule the ACIP and the director.

California, Oregon, Washington, and Hawaii have formed the West Coast Health Alliance to coordinate their expected vaccine guidance. The patchwork of state vaccine rules could create some of the same access problems patients encounter when seeking abortions or gender-affirming care, said Jennifer Kates, Senior Vice President and Director of the Global Health & HIV Policy Program at KFF. "It means that who is able to get a free COVID vaccine or access it in a pharmacy will very much depend on where one lives."

Susan Jaffe

For the KFF report see <https://www.kff.org/covid-19/how-hhs-fda-and-cdc-can-influence-u-s-vaccine-policy/>