



560 W. Lake St. 312.440.4300  
Sixth Floor Fax: 312.440.0559  
Chicago, IL USA Toll-free: 888.243.3368  
60661-6600 agd.org

April 23, 2023

The Honorable Mariannette Miller-Meeks, M.D.  
Member of Congress  
Energy & Commerce Committee, Veterans' Affairs,  
Select Subcommittee on the Coronavirus Crisis  
Washington, DC 20515

Sent via Email to: [CDC.Reform@mail.house.gov](mailto:CDC.Reform@mail.house.gov)

Dear Representative Miller-Meeks, M.D.:

On behalf of our 40,000 members, the Academy of General Dentistry (AGD) is writing in response to your request for information (RFI) to reform and improve the Centers for Disease Control and Prevention (CDC). The COVID-19 response made evident the many weaknesses in the country's preparedness for pandemics. The U.S. endured demonstrably poor COVID-19 outcomes compared with many other nations<sup>1</sup> and the U.S. health authorities must learn from the multiple deficiencies in our COVID-19 response.

Dentistry has a long and successful history in leading in infection control as it did during the HIV/AIDS crisis. Dentists know how to limit transmission of disease via aerosol generating procedures and were successful in limiting COVID transmission.<sup>2</sup> Unnecessary regulatory and legislative burdens impede dentistry's successful history of infection control.

#### **AGD COMMENTS ON THE CDC'S PANDEMIC RESPONSE AND POTENTIAL FOR IMPROVEMENT:**

Medical scientists well versed in data about viral infections and pandemics, with knowledge of fundamental biology, should provide the Executive branch with recommendations as to the best ways to mitigate disease and death. The most vulnerable populations must be targeted for extra protection and true fatality rates should be calculated.

#### *PPE/Strategic National Stockpile*

When allowed to re-open dental offices, dentists had a very difficult time obtaining the personal protective equipment (PPE) needed to safely treat their patients. The dental community must be added to medical community needs to sufficiently supply PPE in appropriate stocks. Personal protective equipment and patient protective equipment are critical to a rapid national pandemic response. Stocks in the Strategic National Stockpile must be in abundant supply at all times. PPE and other essential medical devices must be ready to be deployed at a moment's notice, available for use, and not past their expiration dates. Although the Senate Homeland Security Committee report referenced below found that drug shortages pose a national security risk, medical devices including

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<sup>1</sup> Johns Hopkins University of Medicine, Coronavirus Resource Center Mortality Center. [Mortality Analyses - Johns Hopkins Coronavirus Resource Center \(jhu.edu\)](#)

<sup>2</sup> Araujo, M, et. al. [COVID-19 Among Dentists in the United States, A 6-month Longitudinal Report of Accumulative Prevalence and Incidence](#). JADA 2021;152(6):425-433.

PPE should also be considered in the same context since the scarcity of PPE created a national security risk during the COVID-19 pandemic.

The Senate Homeland Security Committee issued a report on the U.S. drug supply chain and found that drug shortages pose a health and national security risk.<sup>3</sup> Many active pharmaceutical ingredients (API) are not currently available in the United States. Congress should consider initiatives to strengthen our national medical/dental supply chain.

**Mission Creep:**

The CDC's original mission in 1946 was "Surveillance, detection, and prevention of communicable diseases." The agency's current mission statement is "CDC works 24/7 to protect America from health, safety and security threats, both foreign and in the U.S. Whether diseases start at home or abroad, are chronic or acute, curable or preventable, human error or deliberate attack, CDC fights disease and supports communities and citizens to do the same."<sup>4</sup>

*Testing*

Initially, the Centers for Disease Control and Prevention (CDC) lagged by several weeks in providing an antigen test to determine positivity for SARS-CoV-2. While Germany had a test that was functional, the U.S. lost several weeks in rolling out a test designed to identify positivity of the SARS-CoV-2 virus. This was an unfortunate occurrence and must not be repeated in the future. Validated testing must be available to the public almost immediately.

Dental offices should be able to administer tests to help identify asymptomatic individuals. This protects dental staff, as well as the general public, providing for earlier notification of an infected individual, and allowing for quicker treatment and quarantining.

*Randomized Trials*

The AGD is not aware of the CDC conducting a single cluster randomized trial to determine appropriate social distancing protocols, community masking effectiveness, off-label use of therapeutics for treatment of SARS-Cov-2, or other important issues during the three-year pandemic.

**Good Guidance Practices:**

The CDC did not adhere to good guidance practices during the COVID-19 pandemic as compared to the Food and Drug Administration's (FDA) good guidance practices (GGPs) to develop, issue, and use guidance.

Recommendations and guidance from national agencies such as the CDC, the National Institutes of Allergy and Infectious Diseases (NIAID), the National Institute of Occupational Safety and Health (NIOSH) and the Occupational Safety and Health Administration (OSHA) were often in conflict with each other, particularly on masking recommendations and guidance.<sup>5</sup>

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<sup>3</sup> U.S. Senate Homeland Security & Governmental Affairs. Short Supply: The Health and National Security Risks of Drug Shortages. March 2023. [Drug-Shortages-HSGAC-Majority-Staff-Report-2023-03-22.pdf \(senate.gov\)](https://www.senate.gov/imo/media/doc/Drug-Shortages-HSGAC-Majority-Staff-Report-2023-03-22.pdf)

<sup>4</sup> CDC Mission, Role and Pledge <https://www.cdc.gov/about/organization/mission.htm>

<sup>5</sup> Academy of General Dentistry. August 26, 2020. Communication to CDC's Mr. Hannan about mask guidance. [https://www.agd.org/docs/default-source/advocacy-papers/cdc-letter-8\\_27\\_20-final.pdf?sfvrsn=f122cea5\\_0](https://www.agd.org/docs/default-source/advocacy-papers/cdc-letter-8_27_20-final.pdf?sfvrsn=f122cea5_0)

**Many state dental practice acts adhere to CDC guidance. It is therefore critical and imperative that the CDC's guidance be based on the most stringently executed and reputable science.**

Rear Admiral Timothy Ricks provided exemplary leadership during the COVID-19 pandemic by dispensing timely information and coordinating efforts within the dental community. A central point-person for the dental community must be available to review and disseminate information that is both accurate and appropriate. This individual should also be available for input to identify shortcomings in recommendations and guidance, thus making timely adjustments possible.

**Data and Surveillance:**

The public relies on the CDC for accurate, reliable information, particularly during a once in a century pandemic. The CDC must examine how to best collect data in a timely manner with over 3000 partners in federal, state, and local governments.

**CDC Authorization:**

In general, the authorization of the CDC should be an explicit act of Congress as well as Congress providing rigorous oversight to the agency. As many dentists are small business owners, we must be held accountable for our finances/budgets. CDC programs and centers, institutes, and offices, if appropriate, should all be authorized by Congress. We hope that Congress can resume a regular appropriations process in the future and that monies are allocated for an agreed upon specific purpose than being allocated from a general appropriations fund.

The AGD appreciates the chance to provide information to the House Energy & Commerce Committee as it seeks to reform the CDC. If you have any questions please contact Dan Buksa, JD, CAE Associate Executive Director of Public Affairs at 312-440-4328 or via e-mail at [Daniel.buksa@agd.org](mailto:Daniel.buksa@agd.org).

Sincerely,



Hans P. Guter, DDS, FAGD  
AGD President  
HPG/jk



Myron (Mike) Bromberg, DDS  
AGD Chair, Legislative & Governmental Affairs Council  
AGD Congressional Liaison

A handwritten signature in black ink that reads "Darren Greenwell DMD". The signature is fluid and cursive, with the letters "D", "G", and "D" being notably larger and more stylized than the other letters.

Darren S. Greenwell, DMD, MAGD  
AGD Dental Practice Chair

Cc: Colleen Lawler, CAE, IOM  
Executive Director  
Academy of General Dentistry