

Episode: *Author Interview: "How Should Resources From National Stockpiles Be Managed?"*

Guest: Geoff Hollett, PhD

Host: Tim Hoff

Transcript: Cheryl Green

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[bright theme music]

[00:00:03] TIM HOFF: Welcome to another episode of the Author Interview series from the *American Medical Association Journal of Ethics*. I'm your host, Tim Hoff. This series provides an alternative way to access the interesting and important work being done by Journal contributors each month. Joining me on this episode is Dr Geoff Hollett, a senior science policy analyst at the American Medical Association in Chicago, Illinois, where he covers new and emerging medical technologies. He's here to discuss his article, coauthored with Dr Jennie Jarrett, "*How Should Resources From National Stockpiles Be Managed?*," in the April 2024 issue of the Journal, [Global Medical Supply Chain Security](#). Dr Hollett, thank you so much for being on the podcast. [music fades]

DR GEOFF HOLLETT: Thank you for having me.

[00:00:47] HOFF: So, what's the main ethics point that you and Dr Jarrett are making in this article?

HOLLETT: So, the main point that we're trying to have readers take away from our article is that there are series of decisions that are made every day, every month, every year that have serious, long-lasting implications on who receives what care during emergencies. In our article, we discuss several examples, but one of the most illuminating ones for this is around the monkeypox outbreak that happened in 2022. The vaccine was available in the Strategic National Stockpile; however, it was allowed to expire. Nothing had changed in our understanding of monkeypox risk for an outbreak, but we allowed it to expire. We did not replace it because there was a health, there was a public health emergency at the southern border of the United States, and funds needed to be diverted. And then even once the monkeypox outbreak had occurred, not all of the vaccine was released from the Strategic National Stockpile, because that same vaccine had to be balanced with a national security interest of being stored in case there was a smallpox outbreak or a bioterror attack. So, there's a series of decisions that went into how and why monkeypox vaccinations were available, particularly for a population of men who have sex with men that may not be receiving the same level of care based off these decisions that got made well before any of these outbreaks occurred.

[00:02:29] HOFF: And what's the most important thing for health professions students and trainees specifically to take from this article?

HOLLETT: So, we're hoping that people take away from this article that emergency planning is really hard. [laughs] It's extremely difficult to predict what is going to happen. We're getting a little bit better nowadays in how to interpret large data sets and become a little bit more predictive, but ultimately, the mindset and the flexibility is more important than the actual decisions of what should be stocked, where, and when, right? During the COVID-19 outbreak, programs that were able to quickly switch to remote participation or drive-through vaccination

clinics were more successful than places that tried to have every type of medication, every type of thing stockpiled for long periods of time. Just in a resource-limited environment, that's impossible. But rather sitting down and going through the thought exercise of, how can my institution be prepared in an emergency is incredibly important and useful for emergency preparedness.

[00:03:46] HOFF: And finally, if you could add a point to your article that you didn't have the time or space to fully explore, what would that be?

HOLLETT: Yeah, that's a great question. One of the things that I wish we were able to spend a little bit more time on is that in our article, we reflect a lot on places in which emergency preparedness, particularly around the Strategic National Stockpile, have failed or have not been sufficient. But we really want to reflect on the fact that it's still incredibly important to be prepared for emergencies, and that sort of putting your hands up and saying, you know, "We're never going to be able to predict everything" is not a reason to not engage in the activity, right? Like I mentioned before, there were several issues with monkeypox vaccination availability, but ultimately, the vaccination that was in the Strategic National Stockpile and was released did decrease morbidity and mortality during the monkeypox outbreak. Was it as high as we would've liked it? No. And we can always be doing better. [theme music returns] But ultimately, like I said before, sitting down and going through these activities is incredibly important, even if we're never going to get it perfect.

[00:05:05] HOFF: Dr Hollett, thank you so much for your time on the podcast today and for your and your co-author's contribution to the Journal this month.

HOLLETT: Thank you for having me.

HOFF: To read the full article, as well as the rest of this month's issue for free, visit our site, journalofethics.org. We'll be back soon with more *Ethics Talk* from the *American Medical Association Journal of Ethics*.