January 23,2021

Dr. Chris Farnitano MD Contra Costa County Public Health Department Health Officer

Dear Dr. Farnitano and Contra Costa County Supervisors,

We write this letter in follow up to our previous letter dated December 10, 2020. In that letter we asked several questions regarding the following issues: PCR testing, and how the county was accounting for false positives? Hospital census data including ICU capacity and how that was being interpreted vs previous years? What data do you have that supports closures of businesses and outdoor dining of restaurants? Why is Contra Costa County still preventing our schools from opening?

Those questions were asked over a month ago and to date no private or public answer has been received. Supervisor John Gioa dismissed our questions as "not reflective of accurate, current thinking." Today, we stand by our letter and its questions. During the last month, data continues to accumulate supporting our position that lockdowns imposed by the Contra Costa County are doing more harm than good. Contra Costa residents are suffering immensely.

PCR testing has proven to be seriously flawed when used to track disease prevalence, and the number of false positive tests has contributed to fear, panic and unnecessary quarantine of many. The peer review of the original Corman-Drosten PCR paper points out the serious flaws and conflicts of interest in the original article describing the PCR test (Peter Borger Et al., 11/27/2020). This paper is the basis for the PCR test used in the United States. On January 21, 2021 the World Health Organization published direction on the interpretation of a positive PCR test. They now caution about calling a test "positive" without symptoms, a confirmatory test, and physician oversight. They also cite the serious problems with high cycle thresholds leading to a high number of false positives. In short, they agree with what we argued last month.

With this information, your COVID positive case numbers are highly suspect and using this data to determine which tier the population falls into has been, and continues to be, completely unreliable and arbitrary. Our recommendation is to move forward quickly with rapid antigen testing. These tests are less expensive, and more appropriately sensitive to detect people with active, contagious disease. As an example, the country of Austria recently halted PCR testing and realized a pronounced decrease in test positivity rate from 12% down to 0.4% when they switched to an antigen-based lateral flow test. The UK government estimated the false positive rate for this test to be approximately 0.32% under optimal conditions. This test is also felt by many to better reflect true potential infectiousness and onward transmission.

Our local hospitals have done an excellent job preparing for this seasonal increase in COVID cases. They continue to have the resources to care for this surge, and with improved therapeutics, the death rates continue to fall. Unfortunately, many hospitals' census remains high due to significant barriers to discharge COVID positive patients. Home oxygen resources continue to be limited and this therapy alone continues to keep people in the hospital for extra days. Many patients and their families fear returning to skilled nursing facilities because of the widespread outbreaks at these locations. The county only had 9 months to anticipate these important potential shortcomings of public health care....

Recently an article in SFGATE called into question shutting down restaurants' outdoor dining. The article indicated that this action may be contributing to *increased* Covid cases by driving diners indoors. UCSF Professor Monica Gandhi MD was quoted "I would say that closing outdoor dining certainly did not help and likely hindered efforts to avoid a surge." To date, we are still not aware of any data indicating outdoor dining or business activity to be a significant mode of viral transmission, yet our restaurants/businesses remain closed.

Gyms, and salons have also been forced closed without data to support this action. As with restaurants, salons are highly regulated businesses that comply with hygiene and cleanliness policies set by the county. By closing salons, are we to believe no one is getting their haircut? This business has been driven to "speakeasy" locations of garages and back rooms which are now completely unregulated. This action could potentially contribute to increased viral transmission. Gyms have made significant modifications at great expense to decrease the possibility of viral spread and still remain limited in their ability to open. To date we are not aware of any contact tracing in our county that has indicated salons or gyms as a significant source of viral spread.

School closure is without question harming our children more than it is protecting our society from COVID. The data is overwhelming in support of opening schools and the county needs to lower barriers to open all schools immediately. 30 UCSF physicians have called for California to open schools by February 1st. Anything other than lowering barriers for schools reopening is an outwardly destructive action by our public health department.

Our point is that these specific actions taken by the county to close businesses and schools are -at best-- on shaky theoretical scientific grounds to be helpful in decreasing COVID transmission. They have had no effect in preventing transmission and may have actually increased viral transmission. There is no debate on their negative impact, but on only how destructive they have been to our society. Our children have been irreparably harmed and thousands of familial livelihoods have been negatively impacted. The loss of life continues both from a virus and, for the healthy, from the ill-conceived lockdown measures taken to control its spread. Our original questions remain unanswered. As the county Health Officer, we respectfully request your scientific data to justify these ongoing measures.

Respectfully,

Pete Mazolewski MD, FACS, Brian Hopkins MD Michael deBoisblanc MD, FACS

Contra Costa County residents, fathers and physicians