

1 A. Marisa Chun (SBN 160351)
mchun@crowell.com
2 Kristin J. Madigan (SBN 233436)
kmadigan@crowell.com
3 Suzanne E. Rode (SBN 253830)
srode@crowell.com
4 CROWELL & MORING LLP
3 Embarcadero Center, 26th Floor
5 San Francisco, California 94111
Telephone: 415.986.2800
6 Facsimile: 415.986.2827

7 Norman J. Hamill (SBN 154272)
norman.hamill@ucop.edu
8 Katharine Essick (SBN 219426)
katharine.essick@ucop.edu
9 UNIVERSITY OF CALIFORNIA
Office of General Counsel
10 1111 Franklin Street, 8th Floor
Oakland, CA 94607-5200
11 Telephone: 510.987.9800
Facsimile: 510.987.9757

12 *Attorneys for Defendants*
13 The Regents of the University of California and
Michael V. Drake
14

15 SUPERIOR COURT OF THE STATE OF CALIFORNIA
16 COUNTY OF ALAMEDA

17 CINDY KIEL, J.D., an Executive Associate
Vice Chancellor at UC Davis, MCKENNA
18 HENDRICKS, a UC Santa Barbara student,
EDGAR DE GRACIA, a UCLA student, and
19 LELAND VANDERPOEL, an employee at the
Fresno satellite extension of the UCSF Medical
20 Education Program, and FRANCES OLSEN,
Professor of Law at UCLA,

21 Plaintiff,

22 v.

23 THE REGENTS OF THE UNIVERSITY OF
24 CALIFORNIA, a Corporation, and MICHAEL
V. DRAKE, in his official capacity as President
25 of the UNIVERSITY OF CALIFORNIA,

26 Defendants.
27
28

Case No. HG20072843

Unlimited Civil Jurisdiction

ASSIGNED FOR ALL PURPOSES TO:
Hon. Richard L. Seabolt
Department 521

**DECLARATION OF DR. HARVEY V.
FINEBERG IN SUPPORT OF
DEFENDANTS' OPPOSITION TO
PLAINTIFFS' MOTION FOR
PRELIMINARY INJUNCTION**

Date: October 14, 2020
Time: 01:30 p.m.
Dept.: 521
Reservation No.: 2206283

Complaint filed: August 27, 2020
Trial: None set

1 I, Dr. Harvey V. Fineberg, declare:

2 1. I provide this declaration in support of Defendants The Regents of the University
3 of California and Michael V. Drake's ("Defendants") Opposition to Plaintiffs' Motion for
4 Preliminary Injunction. I base this declaration on my expertise as outlined below and facts within
5 my personal knowledge, to which I could and would testify competently if called upon to do so.

6 **Professional Background and Experience**

7 2. I am the president of the Gordon and Betty Moore Foundation, which fosters path-
8 breaking scientific discovery, environmental conservation, improvements in patient care and
9 preservation of the special character of the San Francisco Bay Area. I previously held the
10 Presidential Chair for 2014-2015 as visiting professor at the University of California, San
11 Francisco. Prior to that, I served as president of the Institute of Medicine from 2002 to 2014 and
12 as provost of Harvard University from 1997 to 2001, following 13 years as dean of the Harvard
13 School of Public Health.

14 3. Prior to joining the Gordon and Betty Moore Foundation, which is a philanthropic
15 foundation, I devoted most of my academic career to the fields of health policy and medical
16 decision-making. My past research has focused on global health, assessment of medical
17 technology, evaluation and use of vaccines, and dissemination of medical innovations.

18 4. I am a trustee of the Carnegie Endowment for International Peace and the China
19 Medical Board. I previously served on the Board of the William and Flora Hewlett Foundation,
20 the Josiah Macy, Jr. Foundation, and the Association FXB (USA). I am a past chair of the boards
21 of the Carnegie Endowment and the Hewlett Foundation. I helped found and served as president
22 of the Society for Medical Decision Making. I serve on the editorial board of the New England
23 Journal of Medicine and in several advisory capacities, including the foresight committee of the
24 Veolia Environment Institute and the advisory board of the Peterson Center on Healthcare. I
25 chaired the World Health Organization's Committee to Review the International Health
26 Regulations and the 2009 H1N1 Influenza Pandemic. I currently chair the Standing Committee on
27 Emerging Infectious Diseases and 21st Century Health Threats of the National Academies of
28 Sciences, Engineering and Medicine.

1 influenza vaccine, a recommendation in which the California Department of Public Health
2 concurs.

3 11. I have reviewed the Executive Order and understand that it requires UC students,
4 faculty, and staff who will attend classes or work or live on UC premises to receive the influenza
5 vaccine this year. I further understand the Executive Order allows for individuals to decline the
6 influenza vaccine for medical reasons, or because they require a disability or religious
7 accommodation.

8 12. Respiratory infections, including influenza, are more prevalent in the fall and
9 winter months in the U.S. In years with large outbreaks of influenza, excess mortality tends to
10 cluster in these same months. There is no reason to expect COVID-19 to follow a pattern that
11 differs from other respiratory infections transmitted similarly from one person to another.

12 13. The soundest public health strategy to contain the burden of COVID-19 and other
13 potentially serious respiratory infections, such as influenza, involves a layered approach, with
14 multiple interventions, including consistent wearing of masks in the presence of others, avoiding
15 crowded indoor settings, physical distancing, hand hygiene, frequent testing, contact tracing,
16 quarantine of those exposed, isolation of those infected, and when vaccines are available,
17 immunization.

18 14. In the 2019-2020 influenza season, the CDC estimates that approximately 30
19 million Americans contracted influenza. Over the past ten years, the CDC estimates that between
20 3 and 9 percent of the U.S. population was infected each year with influenza.

21 15. Influenza vaccines in use on an annual basis generally demonstrate moderate
22 protective effect, on the order of 45 percent. This means that if an unimmunized population of
23 100,000 would experience 5,000 cases of influenza, that same population, if immunized, would
24 experience 45 percent fewer, or 2,750 cases.

25 16. The University of California includes more than a half million students, staff and
26 faculty. For illustrative purposes, suppose that, left unimmunized, 5 percent or 25,000 individuals
27 in a population of this size, would become infected with influenza in 2020-21. If all were
28 immunized, the number would be reduced to 13,750, assuming 45 percent vaccine effectiveness.

1 Those 11,250 who were spared infection would also pose no threat of transmitting influenza to
2 others in the community.

3 17. Symptoms such as fever, cough and malaise are common in patients infected with
4 SARS-CoV-2 (the virus that causes the disease, COVID-19), influenza virus, and other
5 respiratory pathogens. In a year when COVID-19 is likely to remain the dominant infectious
6 threat, every individual with symptoms of any respiratory disease will raise the question of
7 COVID-19, therefore prompt additional testing, and possibly lead to at least temporary quarantine
8 of contacts. Every measure, including influenza immunization, that has the potential to reduce the
9 number of symptomatic individuals, can reduce the burden on diagnosis and management of
10 suspected cases of COVID-19, and spare others possible infection by influenza and disruption in
11 their lives because of a suspected COVID-19 infection.

12 18. Influenza recurs each year, and different variants of the virus may become
13 prevalent in any year. In a year when the circulating virus is new to many individuals, the number
14 of influenza cases may be substantially greater than in a typical year. If the U.S. experiences a
15 combined surge in COVID-19 and influenza cases this winter, the number of patients may exceed
16 the capacity of physicians and hospitals to provide optimal care for all patients. In this
17 eventuality, every measure taken to reduce the incidence of potentially severe respiratory
18 infection, including through influenza immunization, may prove life-saving.

19 19. The Executive Order represents a targeted policy that appears to be designed to
20 reduce the incidence of influenza, protect the capacity of medical care facilities, and ease the
21 burden of diagnosis and management of suspected cases of COVID-19.

22 20. If carried out as written, the Executive Order may reduce the spread of serious or
23 potentially serious disease among the community of coworkers and students who must be near
24 one another on UC campuses and at other UC facilities. As one of a family of measures, influenza
25 immunization is a sensible step for the University to add a layer of health protection to the
26 individual and to the UC community.

27 21. In my opinion, the Executive Order sets forth a prudent public health policy to
28 reduce the disease burden in the coming months on individuals, their families, health care

1 facilities, and the entire UC community from a combination of COVID-19 and influenza. Indeed,
2 failure to adopt this type of mandate would raise questions about the University's exercise of
3 responsibility because influenza vaccine offers direct benefits on the incidence of influenza and
4 indirect benefits to the management of COVID-19 in the UC community.

5 22. By requiring all students, faculty and staff on UC campuses to receive the
6 influenza vaccine, subject to medical exemptions and disability and religious accommodations,
7 rather than have an opt-in policy, the University of California will achieve the full, potential
8 benefit of the policy.

9 23. I have reviewed the First Amended Complaint, Plaintiffs' motion for preliminary
10 injunction, and the declarations of Dr. Peter Gotzche, Associate Professor Peter Doshi, Dr. Tom
11 Jefferson, Dr. Laszlo Boros, and Associate Professor Andrew Noymer.

12 24. Plaintiffs' declarants Dr. Peter Gotzche, Associate Professor Peter Doshi, Dr. Tom
13 Jefferson, Dr. Laszlo Boros, and Associate Professor Andrew Noymer emphasize that
14 randomized controlled trials have failed to show reduced hospitalization among those who are
15 immunized against influenza, while case control studies have indicated this benefit. Randomized
16 trials have the virtue of avoiding both recognized and unrecognized sources of bias, but they may
17 have other limitations, including inadequate size to detect small, though clinically important
18 differences. Regardless of the degree to which influenza immunization reduces hospitalization, a
19 reduction in the incidence of infection and the number of symptomatic patients who require
20 evaluation, will be highly advantageous in this year of COVID-19.

21 25. While no vaccine, including the influenza vaccine, can be guaranteed to be
22 perfectly safe, the influenza vaccine has been widely used for decades, is a well-accepted tool to
23 mitigate influenza, and is recommended by the CDC. Any known risks today are generally
24 outweighed by the well-documented, though moderate, public health benefits of the influenza
25 vaccine.

26 26. I am familiar with the Wolff study referenced and understand it does not apply to
27 the SARS-CoV-2 virus that causes COVID-19. After publication, the author wrote a letter
28 cautioning against interpreting his study as indicating any association between influenza

1 immunization and COVID-19, which I attach here as Exhibit B.

2 27. Other posited adverse effects of influenza vaccine, such as virus interference,
3 autoimmune responses, and miscarriage are speculative. While no medicine or vaccine is free of
4 all side effects, the benefit to risk ratio for influenza vaccine is convincing to the CDC and to the
5 independent panel of experts who serve on the CDC's Advisory Committee on Immunization
6 Practices.

7 28. Given my research experience in the areas of evaluation and use of vaccines and
8 my institutional experience as Dean of Harvard's School of Public Health, Provost at Harvard
9 University and President of the Institute of Medicine, I understand the University of California's
10 reasoned decision to employ the influenza vaccine this year, in light of the ongoing COVID-19
11 pandemic. The value of requiring everyone who will access the UC campus or facilities to receive
12 the influenza vaccine is to mitigate against the risk that UC community members will fall ill from
13 influenza or develop symptoms requiring investigation for COVID-19 and the attendant, potential
14 disruption to fellow students, staff and faculty. For a university community, the difference made
15 by such a policy could be advantageous. The rationale is to protect as many members of the
16 university community as a whole, rather than focusing on any one individual. In other words,
17 UC's influenza vaccine policy is about protecting one's fellow students, employees and faculty
18 members, as well as any one individual.

19 I declare under penalty of perjury under the laws of the State of California that the
20 foregoing is true and correct to the best of my knowledge.

21 Executed in San Francisco, California, on this 29th day of September 2020.

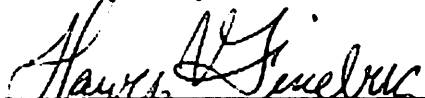
22
23 
24 Dr. Harvey V. Fineberg
25
26
27
28

EXHIBIT A

HARVEY VERNON FINEBERG

Curriculum Vitae

Home Address:

[REDACTED]

H:

[REDACTED]

E:

Business Address:

Gordon and Betty Moore Foundation
1661 Page Mill Road
Palo Alto CA 94304

O

E:

[REDACTED]

Birth date: September 15, 1945 (Pittsburgh, Pennsylvania)

Married to Dr. Mary Elizabeth Wilson

EDUCATION

- | | |
|------|---|
| 1980 | Ph.D. in Public Policy
Harvard University |
| 1972 | M.D.
Harvard Medical School |
| 1972 | Master of Public Policy
Kennedy School of Government
Harvard University |
| 1967 | B.A. (Psychology, <i>magna cum laude</i>)
Harvard University |

AWARDS AND PRIZES

- | | |
|-----------|---|
| 2018 | Honorary Doctor of Law, Harvard University |
| 2016 | Honorary Doctoral Degree, Ben-Gurion University, Israel |
| 2015-2016 | Honorary Vice President for the United States, American Public Health Association |
| 2014 | Distinguished Leadership in Global Health, awarded by Consortium of University Programs in Global Health |
| 2014 | Doctor of Science, <i>Honoris Causa</i> , University of Miami |
| 2013 | Henry G. Friesen International Prize in Health Research, awarded by Friends of Canadian Institutes of Health Research |

- 2012 Doctor of Public Service, *Honoris Causa*, University of North Texas
- 2011 Frank A. Calderone Prize in Public Health, awarded by the Mailman School of Public Health, Columbia University
- 2010 Doctor of Science (Honorary), New England University
- 2009 The Harvard Medal, awarded by the Harvard Alumni Association
- 2008 Stephen Smith Award for Lifetime Achievement in Public Health, awarded by the New York Academy of Medicine
- 2007 Doctor of Science (Honorary), George Washington University
- 2007 Doctor of Science, *Honoris Causa*, University of Arkansas for Medical Sciences
- 2006 Doctor of Medicine, *Honoris Causa*, University of South Florida
- 2005 Recognition of Technical and Political Innovations in Health, La Fundacion Mexicana para la Salud
- 2005 Cooper Lecturer, University of Pittsburgh Medical Center
- 2004 Doctor of Science, *Honoris Causa*, New York Medical College
- 2003 James A. Shannon Lecturer, National Institutes of Health
- 2003 The John M. Eisenberg Award for Practical Application of Medical Decision Making Research., Society for Medical Decision Making
- 2001 W. E. B. Du Bois Medal, awarded by the W. E. B. Du Bois Institute for African and African American Research, Harvard University
- 1998 Distinguished Alumnus Award, Taylor Allderdice High School, Pittsburgh PA
- 1998 Honorary Associate, Mexican Foundation for Health
- 1988 Wade Hampton Frost Lecture Prize, Epidemiology Section, American Public Health Association
- 1988 Joseph W. Mountin Lecture Prize, Centers for Disease Control
- 1987 *Docteur Honoris Causa*, Université de Bordeaux II
- 1967 Phi Beta Kappa
- 1964 Detur Prize Book

Harvey Vernon Fineberg

Page 3

1963

John Harvard Scholarship

POSITIONS HELD

2015- President, Gordon and Betty Moore Foundation

Academic

2014 Presidential Chair Visiting Professor
University of California, San Francisco

2008 Lew Kuan Yew Distinguished Visitor
National University of Singapore

2006 Honorary Professor
Peking Union Medical College

2002- Professor *Emeritus*, Harvard School of Public Health

Jan-Jun 2002 Fellow, Center for Advanced Study in the Behavioral Sciences, Stanford University

1997-2001 Provost, Harvard University

1986 Honorary Professor
Shanghai Medical University

1985 McIlrath Visiting Professor
Royal Prince Alfred Hospital, Sydney

1984-1997 Dean, Harvard School of Public Health

1982-2001 Professor of Health Policy and Management
Harvard School of Public Health

1978-1981 Associate Professor of Health Services
Harvard School of Public Health

1973-1978 Assistant Professor of Health Services
Harvard School of Public Health

1973-1981 Faculty Member
Kennedy School of Government
Harvard University

1975-1978 Director
Graduate Program in Health Policy and Management
Harvard School of Public Health

1975 Mellon Fellow
Aspen Institute for Humanistic Studies

1974-1975 Intermediate Junior Fellow
Society of Fellows
Harvard University

Clinical

1976-1984 Physician
Harvard Street Health Center
Boston, Massachusetts

1974-1976 Physician
East Boston Health Center
East Boston, Massachusetts

1972-1973 Medical Resident
Beth Israel Hospital
Boston, Massachusetts

1972-1973 Clinical Fellow in Medicine
Harvard University

Business

1996-1998 Member, Board of Directors, NovaCare Employee Services

1996-1998 Member, Board of Directors, PrincipalCare (formerly MedAlliance)

1994-1999 Member, Board of Directors, Integra (formerly Apogee)

1994-1996 Member, Board of Directors, MedAlliance (formerly ImageAmerica)

1992-1994 Member, Board of Directors, RehabClinics

Public Service and Non-Profit Organizations

2018-2019 Chair, National Academies of Sciences, Engineering and Medicine Committee on
Reproducibility and Replicability in Science

2018- Co-chair, Sabin-Aspen Vaccine Science and Policy Strategy Group

2017-2019 Member, Council of the American Philosophical Society

2015- President, Gordon and Betty Moore Foundation

2014-2015 Chair, NRC/IOM Planning Committee for workshops on Gain-of-Function Research

2014 Chair, William and Flora Hewlett Foundation Board of Directors

2013-2018 Chair, Carnegie Endowment for International Peace Board of Trustees

2013-2014 Member, UCSF National Leadership Council

2012- Chair, Advisory Committee to the Peterson Institute on Health

2012-2014 Chair, Steering Committee for the Centers of Excellence in the Asia Collaborative for Medical Education

2012-2014 Member, International Advisory Panel for the Saw Swee Hock School of Public Health, Singapore

2010-2011 Chair, Committee to Review the International Health Regulations and the 2009 H1N1 Influenza Pandemic, World Health Organization

2010-2014 Member, Josiah Macy Jr. Foundation Board of Directors

2010-2014 Vice Chair, William and Flora Hewlett Foundation Board of Directors

2009- Member, Carnegie Endowment for International Peace Board of Trustees

2009-2014 Member, Harvard Catalyst External Advisory Board

2009-2010 Chair, International Advisory Committee for Health Services Research Competitive Research Grant, Singapore

2008-2010 Member, External Advisory Group on Research, World Health Organization

2008 Member, International Review Committee, Health Council of the Netherlands

2007-2014 Member of the Board, Institute for Health Metrics and Evaluation, University of Washington, Seattle

2007- Member, China Medical Board

2006-2010 Member, Governing Council for Research on Patient Safety (WHO World Alliance for Patient Safety)

2005-2017 U.S. Delegate for Medicine, Oxford University Press

2004-2005 Member, Advisory Committee, The International Risk Governance Council

2004-2006 Member, Advisory Council, 2022 Foundation Limited

2004-2005 Member, Advisory Committee, Rx for Survival (PBS Documentary Series)

2003-2017 Member, William and Flora Hewlett Foundation Board of Directors

- 2003 Member, American Public Health Association, Medicine and Public Health Initiative Advisory Board
- 2003-2014 Member, Advisory Council, "Sister to Sister – Everyone has a Heart Foundation"
- 2003-2008 Member, Journal of the American Medical Association Oversight Committee
- 2003 Member, Bill and Melinda Gates Foundation Human Capacity for Global Health Steering Committee
- 2003-2008 Member, Advisory Council, Nemours Health and Preventive Services
- 2003 Member, Hong Kong SARS Experts Committee
- 2002-2014 President, Institute of Medicine of the National Academies
- 2002-2012 Chairman, National Advisory Committee to the Robert Wood Johnson Foundation's Health & Society Scholars Program
- 2001- Member, Foresight Committee, Veolia Institute
- 1999-2000 Co-Chair, Committee on HIV Prevention Strategies, Institute of Medicine
- 1998-2001 Member, Board on Global Health, Institute of Medicine
- 1997-1998 Chairman, Committee on Summary Measures of Population Health, Institute of Medicine
- 1996-1999 Member, CDC Foundation Board of Directors
- 1995-1998 Co-Chair, International Health Board, Institute of Medicine
- 1996-2001 Member, Board of Trustees, Carl J. Shapiro Institute for Education and Research at Harvard Medical School and Beth Israel Deaconess Medical Center
- 1994-2003 Member, Board of Visitors, Dimock Health Center, Boston
- 1994-2001 Member, Mayor Thomas Menino's Advisory Committee on AIDS
- 1994-2014 Member, François-Xavier Bagnoud US Foundation Board
- 1993-1998 Member, Membership Committee, Institute of Medicine
- 1993-1995 Chairman, Committee on Risk Characterization, National Research Council
- 1992-1994 Chairman, Committee on the Social and Ethical Impacts of Developments in Biomedicine, National Research Council

- 1991-1993 Honorary Trustee, Longwood Symphony Orchestra, Boston
- 1989-1991 Chairman, Committee to Evaluate the Adverse Consequences of Pertussis and Rubella Vaccines, Institute of Medicine
- 1989-1997 Member, Advisory Committee on AIDS, Centers for Disease Control
- 1989-1992 Member, Technical Advisory Group, Agency for International Development AIDS Program
- 1988-1991 Member, Advisory Committee, AIDS Fellowships Program, National Medical Fellowships, Inc.
- 1987-1988 Member, Committee on the Evaluation of Poliomyelitis Vaccines, Institute of Medicine
- 1986-1997 Member, Board of Directors, American Foundation for AIDS Research
- 1986 Member, Steering Committee on a National Strategy for AIDS, Institute of Medicine
- 1986 Chairman, Grants Review Committee to Establish Centers for Research and Demonstration of Health Promotion and Disease Prevention, Centers for Disease Control
- 1986 Member, New Jersey Cardiac Services Task Force
- 1985-1988 Member, Board of Directors, Life Resources, Inc.
- 1985-1995 Member, Academic Advisory Committee, National Institute for Public Health, Mexico
- 1985-1988 Member, Advisory Committee, Health Policy and Management Program, National Medical Fellowships, Inc.
- 1985-1988 Chairman, Child Health Advisory Panel, Office of Technology Assessment, Congress of the United States
- 1985-1988 Member, Preventive Services Task Force, U.S. Public Health Service
- 1985-1990 Consultant, Agency for Health Care Policy and Research (formerly, National Center for Health Services Research)
- 1983 Chairman, Task Force on Liver Transplantation in Massachusetts
- 1983-1986 Overseer, Newton-Wellesley Hospital
- 1982-1985 Chairman, Health Care Technology Study Section, National Center for Health Services Research

- 1982-1985 Member, Committee on Issues and Priorities for New Vaccine Development, Institute of Medicine
- 1982 Consultant, World Health Organization
- 1981-1982 Member, Health Care Technology Study Section, National Center for Health Services Research
- 1980-1983 Trustee, Newton-Wellesley Hospital
- 1980-1981 Consultant, National Center for Health Care Technology
- 1980-1981 Member, Advisory Panel on Strategies for Medical Technology Assessment, Office of Technology Assessment, Congress of the United States
- 1978-1984 Member, Visiting Committee of the Medical Department, Massachusetts Institute of Technology
- 1977-1978 Consultant, Department of Public Welfare, Commonwealth of Massachusetts
- 1976-1977 Member, Committee on CT Scanning, Institute of Medicine
- 1974-1979 Member, Public Health Council, Commonwealth of Massachusetts
- 1972-1973 Medical Consultant to the Governor's Advisory Council on Comprehensive Health Planning in Massachusetts
- 1971-1972 Member, Governor's Advisory Council on Comprehensive Health Planning in Massachusetts
- 1970 Investigator, Program Planning Department, Health Services Administration, New York City

Professional Organizations

- 2013- Member, American Philosophical Society
- 2012- Foreign Fellow, The Academy of Athens
- 2011- Foreign Member, Chinese Academy of Engineering
- 2002-2014 President, Institute of Medicine of the National Academies (now National Academy of Medicine)
- 1999- Fellow, New York Academy of Sciences
- 1996- Member, National Academy of Medicine (Mexico)

- 1997- Fellow, American Association for the Advancement of Science
- 1994- Fellow, American Academy of Arts and Sciences
- 1993-2002 Vice-President, International Council for Global Health Progress
- 1987- Member, American College of Preventive Medicine
- 1984- Member, American Public Health Association
- 1984- Member, American Medical Association
- 1984-2002 Member, Massachusetts Medical Society
- 1982- Member, National Academy of Medicine (formerly, Institute of Medicine)
- 1980-1981 President, Society for Medical Decision Making
- 1979-1980 Trustee, Society for Medical Decision Making
- 1979- Member, Society for Medical Decision Making

Editorial Boards

- 2014- New England Journal of Medicine
- 1994-1997 Preventive Medicine
- 1993-1997 Health and Human Rights
- 1982-1988 Medical Care Review
- 1981-1985 Medical Decision Making

PUBLICATIONS

Journal Articles

1. Fineberg HV, Parker GS, Pearlman LA. CT scanners: distribution and planning status in the United States. *The New England Journal of Medicine* 1977;297:216-8.
2. Fineberg HV, Bauman R, Sosman M. Computerized cranial tomography: effect on diagnostic and therapeutic plans. *Journal of the American Medical Association* 1977;238:224-7.
3. Wittenberg J, Fineberg HV, Black EB, Kirkpatrick RH, Schaffer DL, Ikeda MK, Ferrucci JT, Jr. Clinical efficacy of computed body tomography. *American Journal of Roentgenology* 1978;131:5-14.
4. Fineberg HV, Gabel R, Sosman M. The acquisition and application of new medical knowledge by anesthesiologists: three recent examples. *Anesthesiology* 1978;48:430-6.
5. Fineberg HV. Life, death...and dollars. *The Sciences* 1978;18:30-2.
6. Goitein M, Wittenberg J, Mendionda M, Doucette J, Friedberg C, Ferrucci J Jr., Gunderson L, Linggood R, Shipley WV, Fineberg, HV. The value of CT scanning in radiation therapy planning: a prospective study. *International Journal of Radiation Oncology, Biology, Physics* 1979;5:1787-8.
7. Fineberg HV. Advances in computed tomography. *Proceedings of the IEEE* 1979;67:1272-3.
8. Fineberg HV, Hiatt HH. Evaluation of medical practices: the case for technology assessment. *The New England Journal of Medicine* 1979;301:1086-91.
9. Gorry GA, Kassirer JP, Fineberg HV, Pauker SG, Elstein AS, Pierce JG. Symposium: the role of decision analysis in medical education and practice. *Research in Medical Education* 1979;18:427-37.
10. Wittenberg J, Fineberg HV, Ferrucci JT Jr., Simeone JF, Mueller PR, van Sonnenberg E, Kirkpatrick RH. Clinical efficacy of computed body tomography II. *American Journal of Roentgenology* 1980;134:1111-20.
11. Koplan J, Fineberg HV, Benfari MJ, Rosenberg ML. Value of stool cultures. *The Lancet* 1980;2:413-6.
12. Fineberg HV, Pearlman LA, Gabel RA. The case for abandonment of explosive anesthetic agents. *The New England Journal of Medicine* 1980;303:613-7.
13. Fineberg HV, Wittenberg J. Evaluation of computed tomography in pancreatic cancer. *Bulletin du Cancer* (Paris) 1980;67:390-4.

14. Fineberg HV. Decision trees: construction, uses, and limits. *Bulletin du Cancer* (Paris) 1980;67:395-404.
15. Fineberg HV, Sherman H. Tutorial on the health and social value of computerized medical imaging. *IEEE Transactions on Biomedical Engineering* Feb. 1981;BME-28(2):50-6.
16. Berwick DM, Fineberg HV, Weinstein MC. When doctors meet numbers. *American Journal of Medicine* 1981;71:991-8.
17. Fineberg HV, Pearlman LA. Surgery for peptic ulcer disease in the United States: trends before and after the introduction of cimetidine. *The Lancet* 1981;1:1305-7.
18. Sherman H, Sandberg S, Fineberg HV. Exponential increase in age-specific prevalence of ventricular dysrhythmia among males. *Journal of Chronic Diseases* 1982;35:734-50.
19. Goldman L, Weinberg M, Weisberg M, Olshen R, Cook EF, Sargent RK, Lamas GA, Dennis, C, Wilson C, Deckelbaum L, Fineberg HV, Stiratelli R, the Medical House Staffs at Yale-New Haven Hospital and Brigham and Women's Hospital. A computer-derived protocol to aid in the diagnosis of emergency room patients with acute chest pain. *The New England Journal of Medicine* 1982;307:588-96.
20. Fineberg HV, Pearlman LA. Low-cost medical practices. *Annual Review of Public Health* 1982;3:225-48.
21. Stason WB, Fineberg HV. Implications of alternative strategies to diagnose coronary artery disease. *Circulation* 1982;66(III):80-6.
22. Fineberg HV. Tendenze nella chirurgia dell'ulcera prima e dopo la cimetidina. Simposio Internazionale su "Costi e Benefici nella terapia dell'ulcera peptica." *Farmaci* 1982;6:81-8.
23. Jordan HS, Burke JF, Fineberg HV, Hanley JA. Diffusion of innovations in burn care: selected findings. *Burns* 1983;9(4):271-9.
24. Fineberg HV. Impact of technological investment on the cost of the health care system. *Journal of Neuroradiology* 1983;10:199-204.
25. Reder V, Fineberg HV, Rosoff CB, White LS. Shorter length of stay for simple cholecystectomy: cost-effectiveness of alternative strategies. *Medical Care* 1983;21(7):745-54.
26. Fineberg HV, Wittenberg J, Ferrucci J, Mueller P, Simeone J, Goldman J. The clinical value of body computed tomography over time and technologic change. *American Journal of Roentgenology* 1983; 141:1067-72.
27. Chang RW, Fineberg HV. Risk-benefit considerations in the management of polymyalgia rheumatica. *Medical Decision Making* 1983; 3(4):459-75.
28. Juul S, Pliskin JS, Fineberg HV. Variation and information in white blood cell differential counts. *Medical Decision Making* 1984;4(1):69-80.

29. Fineberg HV, Scadden D, Goldman L. Care of patients with a low probability of acute myocardial infarction: cost-effectiveness of alternatives to coronary-care- unit admission. *The New England Journal of Medicine* 1984;310:1301-7.
30. Fineberg HV. Irresistible medical technologies: weighing the costs and benefits. *Technology Review* 1984;87(8):17-8.
31. Read JL, Quinn RJ, Berwick DM, Fineberg HV, Weinstein MC. Preferences for health outcomes: comparison of assessment methods. *Medical Decision Making* 1984;4(3):315-29.
32. Louis TA, Fineberg HV, Mosteller F. Findings for public health from meta- analyses. *Annual Review of Public Health* 1985;6:1-20.
33. Goldman L, Fineberg HV. Must all rule-out myocardial infarction patients be admitted to intensive care unit? *Consultant* 1985;25:35-45.
34. Fineberg HV, Funkhouser AR, Marks H. Variation in medical practice: a review of the literature. *Ind Health Care* (Cambridge, MA) 1985;2:143-68.
35. Fineberg HV. Technology assessment: motivation, capability, and future directions. *Medical Care* 1985;23:663-71.
36. Barry MJ, Cleary PD, Fineberg HV. Screening for HIV infection: risks, benefits, and the burden of proof. *Law, Medicine and Health Care* 1986;14(5-6):259-67.
37. Fineberg HV. Clinical evaluation: how does it influence medical practice? *Bulletin du Cancer* (Paris) 1987;74:333-46.
38. Fineberg HV. Evaluation of medical technology in developing countries and industrialized countries. *Salud Publica de Mexico* 1986;28:328-34. [Spanish]
39. Fineberg HV. Theoretical models for assessing the value of diagnostic tests. *INSERM* 1987;79-92.
40. Cleary PD, Barry MJ, Mayer KH, Brandt AM, Gostin L, Fineberg HV. Compulsory premarital screening for the human immunodeficiency virus. *Journal of the American Medical Association* 1987;258(13):1757-62.
41. Fineberg HV, Wilson ME. Special report - the politics of AIDS. Why mandatory testing is a bad idea. *The World & I* 1987 (November); 29-33.
42. Laffel GL, Fineberg HV, Braunwald E. A cost-effectiveness model for coronary thrombolysis/reperfusion therapy. *American Journal of Cardiology* 1987;10(5):79B-90B.
43. Fineberg HV. Education to prevent AIDS: prospects and obstacles. *Science* 1988;239:592-6.
44. Fineberg HV. The social dimensions of AIDS. *Scientific American* 1988;259(4): 128-34.

45. DeGruttola V, Fineberg HV. Estimating prevalence of HIV infection: considerations in the design and analysis of a national seroprevalence survey. *Journal of Acquired Immune Deficiency Syndromes* 1989;2(5):472-80.
46. Fineberg HV. Strategies for prevention of diseases. *Salud Publica de Mexico* 1989;31:124-6. [Spanish]
47. Makadon HJ, Seage GR, Thorpe KE, Fineberg HV. Paying the medical cost of the HIV epidemic: a review of policy options. *Journal of Acquired Immune Deficiency Syndromes* 1990;3(2):123-33.
48. Fineberg HV. Screening for HIV infection and public health policy. *Law, Medicine and Health Care* 1990;18(1-2):29-32.
49. Fineberg HV. The impact of AIDS on the health care system. *Salud Publica de Mexico* 1990;32(1):80-83. [Spanish]
50. Wilson ME, von Reyn CF, Fineberg HV. Infections in HIV-infected travelers: risks and prevention. *Annals of Internal Medicine* 1991;114(7):582-92.
51. Siegel JE, Weinstein MC, Fineberg HV. Bleach programs for preventing AIDS among IV drug users: modeling the impact of HIV prevalence. *American Journal of Public Health* 1991;81(10):1273-9.
52. Howson CP, Katz M, Johnston RB Jr., Fineberg HV. Chronic arthritis after rubella vaccination. *Clinical Infectious Diseases* 1992;15:307-12.
53. Howson CP, Fineberg HV. Adverse events following pertussis and rubella vaccines. *Journal of the American Medical Association* 1992;267(3):393-7.
54. Heymann SJ, Brewer TF, Fineberg HV, Wilson ME. How safe is safe enough? new infections and the U.S. blood supply. *Annals of Internal Medicine* 1992;117(7):612-4.
55. Howson CP, Fineberg HV. The ricochet of magic bullets: summary of the Institute of Medicine report, adverse effects of pertussis and rubella vaccines. *Pediatrics* 1992;89:318-24.
56. Cowan LD, Griffin MR, Howson CP, Katz M, Johnston RB Jr., Shaywitz BA, Fineberg HV. Acute encephalopathy and chronic neurological damage after pertussis vaccine. *Vaccine* 1993;11:1371-9.
57. Fineberg HV. Ethical Dilemmas in Health and Development. *Journal of Seizon and Life Sciences* 1993;4(1):13-21.
58. Mann JM, Gostin L, Gruskin S, Brennan T, Lazzarini Z, Fineberg HV. Health and human rights. *Health and Human Rights* Fall 1994;1(1):7-23.
59. Fineberg HV, Green G, Ware JH, Anderson BL. Changing public health training needs: professional education and the paradigm of public health. *Annual Review of Public Health* 1994;15:237-58.

60. Colditz GA, Brewer TF, Berkey CS, Wilson ME, Burdick E, Fineberg HV, Mosteller F. Efficacy of BCG vaccine in the prevention of tuberculosis: meta-analysis of the published literature. *Journal of the American Medical Association* 1994;271(9):698-702.
61. Wilson ME, Fineberg HV, Colditz GA. Geographic latitude and the efficacy of Bacillus Calmette-Guérin vaccine. *Clinical Infectious Diseases* 1995;20:982-91.
62. Colditz GA, Berkey CS, Mosteller F, Brewer TF, Wilson ME, Burdick E, Fineberg HV. The efficacy of bacillus calmette-guérin vaccination of newborns and infants in the prevention of tuberculosis: meta-analyses of the published literature. *Pediatrics* 1995;96(1 Pt 1):29-35.
63. Brewer TF, Heymann SJ, Colditz GA, Wilson ME, Auerbach K, Kane D, Fineberg HV. Evaluation of tuberculosis control policies using computer simulation. *Journal of the American Medical Association* 1996; 276:1898-903.
64. Litvak E, Siegel JE, Pauker SG, Lallemand M, Fineberg HV, Weinstein MC. Whose Blood is Safer?: The effect of the stage of the epidemic on screening for HIV. *Medical Decision Making* Oct-Dec 1997;(17)4.
65. Bach FH, Fishman JA, Daniels N, Proimos J, Anderson B, Carpenter CB, Forrow L, Robson SC, Fineberg HV. Uncertainty in xenotransplantation: Individual benefit versus collective risk. *Nature Medicine* 1998;4(2):141-4.
66. Ross RH, Fineberg HV. Medical Students' Evaluations of Curriculum Innovations at Ten North American Medical Schools. *Academic Medicine* 1998;73(3):258-65.
67. Howson CP, Fineberg HV, Bloom BR. The pursuit of global health: the relevance of engagement for developed countries. *The Lancet* 1998;351:586-90.
68. Heymann SJ, Brewer TF, Wilson ME, Fineberg HV. The need for global action against multidrug-resistant tuberculosis. *Journal of the American Medical Association* 1999;281(22):2138-40.
69. Heymann SJ, Brewer TF, Wilson ME, Colditz GA, Fineberg HV. Pediatric tuberculosis in the United States: What needs to be done to decrease morbidity and mortality. *Pediatrics* 2000;106(1):e1-7.
70. Brewer TF, Heymann SJ, Krumplitsch SM, Wilson ME, Colditz GA, Fineberg HV. Strategies to decrease tuberculosis in US homeless populations: A computer simulation model. *Journal of the American Medical Association* 2001;286(7):834-42.
71. Harrison SC, Alberts B, Ehrenfeld E, Enquist L, Fineberg H, McKnight SL, Moss B, O'Donnell M, Ploegh H, Schmid SL, Walter KP, Theriot J. Discovery of antivirals against smallpox. *Proc. Natl. Acad. Sci. USA*. 2004;Early Edition/pnas.0403600101

72. Fineberg, HV. An economic analysis of eating and physical activity behaviors: exploring effective strategies to combat obesity. *American Journal of Preventive Medicine*. 2004, 27 (3S):172-4.
73. Fineberg HV: Science and medicine in the 21st century: Opportunities for rehabilitation medicine. *Am J Phys Med Rehabil*. 2005;84:928-31.
74. Fineberg HV. The predicament of American health care. *Bulletin of the American Academy of Arts and Sciences* 2005, 48(3):8-10.
75. Fineberg HV. Preparing for avian influenza: Lessons from the “Swine Flu Affair.” *Journal of Infectious Diseases* 2008;197:S14-8.
76. Fineberg HV. Public health and medicine: Where the twain shall meet. *American Journal of Preventive Medicine* 2011;41 (4S3): S149-51.
77. Fineberg HV. Neo-evolution: Is *Homo sapiens* ready? *British Medical Journal* 2011;343:d7649 (24-31 December 2011, 1322-3).
78. Fineberg HV. From shared decision making to patient-centered decision making. *Israel Journal of Health Policy Research* 2012;1:6.
79. Fineberg HV. A successful and sustainable health system—how to get there from here (Shattuck Lecture). *The New England Journal of Medicine* 2012;366:1020-7.
80. Fineberg HV. The paradox of disease prevention: celebrated in principle, resisted in practice. *Journal of the American Medical Association* 2013;310:85-90.
81. Fineberg HV. Toward a new social compact for health research. *Journal of the American Medical Association* 2013;310:1923-1924.
82. Fineberg HV. Pandemic preparedness and response: lessons from the H1N1 influenza of 2009. *New England Journal of Medicine* 2014;370:1335-1342.
83. Madhavan G, Phelps CE, Colwell, RR, Rappuoli R, and Fineberg HV. In plain view: Transparent systems approach for enhancing health policy decisions. *The Bridge*, National Academy of Engineering, Summer 2016;5-10.
84. Phelps C, Madhavan G, Rappuoli R, Colwell R, Fineberg H. Beyond cost-effectiveness: Using systems analysis for infectious disease preparedness. *Vaccine* 2017;35:A46-A49.

Editorials

1. Fineberg HV. Computerized tomography: dilemma of health care technology. *Pediatrics* 1977;59:147-9.

2. Fineberg HV. Evaluation of computed tomography: achievement and challenge. *American Journal of Roentgenology* 1978;131:1-4.
3. Fineberg HV. Medical technology policies and computed tomography. *Annals of Internal Medicine* 1979;90:114-5.
4. Wittenberg J, Fineberg HV. Evaluating efficacy. *American Journal of Roentgenology* 1980;134:1277-9.
5. Fineberg HV. Medical decision making and the future of medical practice. *Medical Decision Making* 1981;1:4-6.
6. Stason WB, Fineberg HV. Coronary artery disease: what is a reasonable diagnostic strategy? *Annals of Internal Medicine* 1981;95:385-6.
7. Fineberg HV. Doctors and decision analysis. *Medical Decision Making* 1984;4(3):267-70.
8. Fineberg HV. Future directions for research. *Medical Decision Making* 1985;5(1):35-8.
9. Fineberg HV. A way to tackle AIDS education. *The New York Times* July 13, 1986.
10. Fineberg HV. Introduction to the invitational conference on applications of analytic methods to mental health: practice, policy, research. *Medical Care* 1987;25(12):S53-4.
11. Fineberg HV. Commentary. *American Journal of Preventive Medicine* 1995;11(6 Suppl):4-5.
12. Fineberg HV, Wilson ME. Social vulnerability and death by infection. *New England Journal of Medicine* 1996;334:859-60.
12. Bach FH, Fineberg HV. Call for moratorium on xenotransplants. *Nature* 1998;391:326.
13. Alberts B, Fineberg HV. Harnessing new science is vital for biodefense and global health. *Proc. Natl. Acad. Sci. USA*. 2004;Early Edition/pnas.0404433101.
14. Fineberg HV. Health reform in Mexico: a work in progress. *Lancet* 2006;368:1755-6.
15. Fineberg HV, Wilson ME. Epidemic science in real time. *Science* 2009;324:987.
16. Fineberg H. The need to get the right health statistics and to get the health statistics right. *Annals of the American Academy of Political and Social Science* 2010;631:28-9.
17. Fineberg HV, Hunter DJ. A global view of health—An unfolding series. *New England Journal of Medicine* 2013;368:78-79.
18. Fineberg HV. Public health in a time of government austerity. *American Journal of Public Health* 2013;103:47-49.

19. Parker L, Fineberg HV. Building strategies and leadership for change: the obesity epidemic in Latino children. *American Journal of Preventive Medicine* 2013;44(3S3):S292-293.
20. Fineberg HV. The state of health in the United States. *Journal of the American Medical Association* 2013;310:585-586.
21. Hunter DJ, Fineberg HV. Convergence to common purpose in global health. *New England Journal of Medicine* 2014;370:1753-1755.
22. Dzau VJ, Fineberg HV. Restore the US Lead in Biomedical Research. *Journal of the American Medical Association* 2015;313:143-144.
23. Fineberg HV. Wider Attention for Gain of Function Research. *Science* 2015;347:929.
24. Fineberg HV. Chan Zuckerberg Science is a model for big donors. *The Chronicle of Philanthropy*, September 26, 2016.
25. Fineberg HV. Retrospective: David Hamburg (1925-2019), Renowned physician-psychiatrist and humanitarian. *Science* 2019;364:940.

Book Chapters

1. Weinstein MC, Fineberg HV. "Cost-effectiveness analysis for medical practices: appropriate laboratory utilization." In *Logic and Economics of Clinical Laboratory Use*, edited by ES Benson and M Rubin. Amsterdam: Elsevier North Holland, 1978. pp. 3-32.
2. Fineberg HV. "Assessing the diagnostic contribution of imaging tests: computed tomography and ultrasound of the pancreas." In *Evaluation of Efficacy of Medical Action*, edited by A Alperovitch, FT deDombal, and F. Gremy. Amsterdam: North-Holland Publishing Company, 1979, pp. 49-164.
3. Fineberg HV. "Gastric freezing: a study of diffusion of a medical innovation." In *Medical Technology and the Health Care System: A Study of the Diffusion of Equipment-Embodied Technology*. Washington, D.C.: National Academy of Sciences, 1979, pp. 173-200.
4. Fineberg HV. "Clinical chemistries: the high cost of low-cost diagnostic tests." In *Medical Technology: The Culprit Behind Health Care Costs?*, edited by S Altman and R Blendon. Washington, D.C.: DHEW Publication No. (PHS)79-3216, 1979, pp. 144-165.
5. Fineberg HV, Wittenberg J, Ferrucci JT Jr. "Cost-effectiveness." In *Alimentary Tract Imaging*, Vol. 3, edited by A Margulis and HJ Burhenne. C.V. Mosby Co., 1979, pp. 68-71.
6. Wittenberg J, Fineberg HV, Ferrucci JT Jr. "The clinical efficacy of computed body tomography in 461 patients." In *Abdominal Computerized Tomography*, edited by JL Lamarque and JM Bruel. Amsterdam: Excerpta Medica, 1979, pp. 348-352.
7. Frazier HS, Fineberg HV. "Health policy and the need to know." In *The Social Context of Medical Research*, edited by H Wechsler, et al. Ballinger Publishing Co., 1981, pp. 145-161.

8. Fineberg HV, Pearlman LA "Benefit-and-cost analysis of medical interventions: the case of cimetidine and peptic ulcer disease." In *The Implications of Cost- Effectiveness Analysis of Medical Technology*. Background Paper #2: Case Studies of Medical Technologies, Office of Technology Assessment, United States Congress, 1981.
9. Fineberg HV. "Surgery for peptic ulcer disease in the United States: trends before and after the introduction of cimetidine." In *Proceedings of A Cost-Benefit Symposium*. Smith Kline and French Company, Amsterdam, March 1981.
10. Fineberg HV. "Ulcer disease: Epidemiology, diagnosis, and treatment." In *Cost-Benefit and Cost-Effectiveness Analysis in Policymaking: Cimetidine as a Model*. Proceedings of an International Symposium, Tarpon Springs, Florida, November 22-24, 1981, pp. 81-87.
11. Fineberg HV. "Cost-effectiveness of medical technology: the physician's responsibility." In *The Quality of Care in Anesthesia*, edited by BL Grundy and JS Gravenstein. Springfield, IL: Charles C. Thomas Publishing, 1982, pp. 177-184.
12. Fineberg HV, Wittenberg J. "Cost-effectiveness." In *Alimentary Tract Radiology*, Vol. 2, 3rd Edition, edited by AR Margulis and HJ Burhenne. St Louis: C.V. Mosby Co., 1983, pp. 2447-2457.
13. Fineberg HV. "Discussion of paper by Jonsson - A review of the macroeconomic evaluation of cimetidine." In *Economic and Medical Evaluation of Health Care Technologies*, edited by AJ Culyer and B Horisberger. Berlin: Springer-Verlag, 1983, pp. 262-269.
14. Goldman L, Fineberg HV. "The cost-effectiveness of coronary care units." In *Acute Coronary Care: Principles and Practice*, edited by RM Cahill and GS Wagner. Boston: Martinus Nijhoff Publishing, 1985, pp. 369-374.
15. Fineberg HV, Lawthers-Higgins A. "The case study as a tool for medical technology assessment." In *Assessing Medical Technologies*. Washington, D.C.: National Academy Press, 1985, pp. 97-101.
16. Fineberg HV. "Effects of clinical evaluation on the diffusion of medical technology." In *Assessing Medical Technologies*. Washington, D.C.: National Academy Press, 1985, pp. 176-210.
17. Fineberg HV, Funkhouser AR, Marks H. "Variation in medical practice: a review of the literature." In *Industry and Health Care: Health Cost Management and Medical Practice Patterns*, Vol. 2, edited by R Egdahl and D Chapman Walsh. Cambridge, MA: Ballinger Publishing Company, 1985, pp. 143-168.
18. Fineberg HV. "Public health and private rights: health, social and ethical perspectives." In *AIDS Impact on Public Policy*, edited by R Hummel, W Levy, M Rampolla, and S Cohorost. New York: Proceedings of the AIDS International Symposium, Plenum Press, 1986, pp. 17-23.

19. Fineberg HV. "Evaluation of diagnostic tests and the role of diagnosis in therapeutic trials." In *Methods in Clinical Trials in Neurology: Vascular and Degenerative Brain Disease*, edited by R Capildeo and JM Orgogozo. London: The MacMillan Press Ltd, 1988, pp. 57-82.
20. Luthe MA, Fineberg HV. "Clinical efficacy: 5000 MRI cases between 0.15 and 0.6 tesla." In *Magnetic Resonance Imaging*, Vol. 1, 2nd Edition, edited by CL Partain, RR Price, JA Patton, AE James Jr., and MV Kulkarni. Philadelphia: W.B. Saunders, 1988, pp. 883-898.
21. Fineberg HV. "Is AIDS a special case for health services research?" In *Health Services Research Methodology: A Focus on AIDS*, edited by L Sechrest, H Freeman, and A Mulley. Proceedings of the National Center for Health Services Research and Health Care Technology Assessment Conference, Tucson, Arizona, June 4-6, 1988 pp. 1-4.
22. Weinstein MC, Graham JD, Siegel JE, Fineberg HV. "Cost-effectiveness analysis of AIDS prevention programs: concepts, compliance, and illustrations." In *AIDS, Sexual Behavior, and IV Drug Use*, edited by CF Turner, HG Muller, and LE Moses. Washington, D.C.: National Academy Press, 1989, pp. 471-499.
23. Fineberg HV. "Application of Health Services Research on HIV infection to the Formulation of Health Policy." In *New Perspectives on HIV-Related Illnesses: Progress in Health Services Research*, edited by WN LeVee. Proceedings of the National Center for Health Services Research and Health Care Technology Assessment Conference, Miami, Florida, May 17-19, 1989, pp. 13-17.
24. Fineberg HV. "Technology Assessment and Policy Making." In *On Health Care Technologies Assessment*. Proceedings of the Symposium on Health Care Technologies Assessment, Quebec City, May 25 and 26, 1989, pp. 13-18.
25. Fineberg HV. "The Quest for Causality in Health Services Research." In *Research Methodology: Strengthening Causal Interpretations of Nonexperimental Data*, edited by L Sechrest, E Perrin, and J Bunker. Proceedings of the National Center for Health Services Research and Health Care Technology Assessment Conference, Tucson, Arizona, May 1990, pp. 215-220.
26. Fineberg HV. "Modern Challenges in Medical Care." In *Kampo Medicine: Tradition Guiding Innovation*. Report of the 100th Anniversary International Kampo Symposium, Tokyo, Japan, April, 1993, pp. 12-15.
27. Fineberg HV. "Ethical Approaches to Health and Development." *Ethical Dilemmas in Health and Development*, edited by K Aoki. Tokyo: Japan Scientific Societies Press, 1994, pp. 3-17.
28. Fineberg HV. "Crossing Boundaries." In *Health Systems in an Era of Globalization: Challenges and opportunities for North America*, edited by P. Freeman, O. Gómez-Dantés, and J. Frenk. Washington, DC: National Academy of Sciences, 1995, pp.55-58.
29. Fineberg HV. "Health Reform in the United States." In *Environment, Health and Medical Care for the 21st Century*, edited by Eiji Yano. Report of the First Teikyo-Harvard Symposium, Tokyo, Japan, 1995, pp.20-34.

30. Fineberg HV. "Conclusion." In *Cancer, AIDS, and Quality of Life*, edited by Jay A. Levy, Claude Jasmin, and Gabriel Bez. New York: Plenum Press, 1997, pp. 189-192.
31. Report of the Committee on Summary Measures of Population Health: Fineberg HV (chair), Akhter M, Daniels N, Fryback D, Jamison D, Munding M, Sipes-Metzler PR. *Summarizing Population Health: Directions for the Development and Application of Population Metrics*, edited by Marilyn J. Field and Marthe R. Gold. Washington DC: National Academy Press, 1998.
32. Mann JM, Gostin L, Gruskin S, Brennan T, Lazzarini Z, Fineberg HV. "Health and Human Rights." In *Health and Human Rights*, edited by Jonathan M. Mann, Sofia Gruskin, Michael A. Grodin, and George J. Annas. New York: Routledge, 1999, pp. 7-20.
33. Fineberg HV. Foreword to *Decision Making in Health and Medicine: Integrating Evidence and Values*, by Myriam Hunink and Paul Glasziou (with Joanna Siegel, Jane Weeks, Joseph Pliskin, Arthur Elstein, and Milton Weinstein). Cambridge, UK: Cambridge University Press, 2001.
34. Fineberg HV and Fineberg DE. Foreword to *Medicine and Compassion: A Tibetan Lama's Guidance for Caregivers*, by Chokyi Nyima Rinpoche with David R. Shlim. Boston: Wisdom Publications, 2004.
35. Fineberg, HV. "Masterful Mentor." In *Guardian of the Presidency: The Legacy of Richard E. Neustadt*, edited by Matthew J. Dickinson and Elizabeth A. Neustadt. Washington, D.C.: Brookings Institution Press, 2007, pp. 110-120.
36. Fineberg, H. "The New Roles of the Academy of Medicine." In *First-Contact Medicine in Ibero-America*, Proceedings of the XVII ALANAN Meeting (2008), Mexico City, 2010, pp. 117-122.
37. Fineberg, HV. "Dialing Back the Weight of the Nation." Afterword to *The Weight of the Nation: To Win, We Have to Lose*, by John Hoffman and Judith A. Salerno, with Alexandra Moss, Foreword by Kelly D. Brownell. New York: St Martin's Press, 2012.
38. Fineberg, HV. Foreword to *The American Health Care Paradox: Why Spending More Is Getting US Less*, by Elizabeth H. Bradley and Lauren A. Taylor. New York: PublicAffairs, 2013.
39. Fineberg, HV. "Three Great Tasks for Health." United Health Foundation. *America's Health Rankings: A Call to Action for Individuals and Their Communities, 2013 Edition*, 4-7. <http://cdnfiles.americashealthrankings.org/SiteFiles/Reports/AnnualReport2013-r.pdf>.
40. Fineberg, HV. Foreword to *Decision Making in Health and Medicine* (2nd edition) by Myriam Hunink and Paul Glasziou (with Joanna Siegel, Jane Weeks, Joseph Pliskin, Arthur Elstein, and Milton Weinstein). Cambridge, UK: Cambridge University Press, 2017.

Books

1. Neustadt R, Fineberg HV. *The Swine Flu Affair: Decision Making on a Slippery Disease*. Washington, D.C.: U.S. Department of Health, Education and Welfare, 1978.
2. Weinstein MC, Fineberg HV. *Clinical Decision Analysis*. Philadelphia: W.B. Saunders, 1980.
3. Neustadt R, Fineberg HV. *The Epidemic That Never Was: Policy Making in the Swine Flu Scare*. New York: Vintage Books, 1983.
4. Howson C, Howe C, Fineberg HV (editors). *Adverse Effects of Pertussis and Rubella Vaccines*. Washington, D.C.: National Academy Press, 1991.
5. Sepulveda J, Fineberg HV, Mann J (editors). *AIDS Prevention through Education: A World View*. New York: Oxford University Press, 1992.
6. Bulger RE, Bobby EM, Fineberg HV (editors). *Society's Choices: Social and Ethical Decision Making in Biomedicine*. Washington, D.C.: National Academy Press, 1995.
7. Stern PC, Fineberg HV (editors). *Understanding Risk: Informing Decisions in a Democratic Society*. Washington, D.C.: National Academy Press, 1996.
8. Ross RH, Fineberg HV. *Innovators in Physician Education: The Process and Pattern of Reform in North American Medical Schools*. New York: Springer Publishing Company, Inc., 1996.
9. Ruiz MS, Gable AR, Kaplan EH, Stoto MA, Fineberg HV and Trussell J (editors). *No Time to Lose: Getting More from HIV Prevention*. Washington, D.C.: National Academy Press, 2001.
10. Jasmin C, Fineberg HV, Lajous L, Wiesel E (editors). *Global Health Equity: Medical Progress and Quality in the XXIst Century*. Paris, France: Regimedia, 2002.
11. Hunter D, Fineberg HV (editors). *Readings in Global Health*. New York: Oxford University Press, 2015.

Case Studies

Editor and co-author of case materials published in the Public Management Series by the Kennedy School of Government. Representative case studies include:

- "Decentralization of New York City Health Services"
- "Hypertension in New York City"
- "Beth Israel Hospital Ambulatory Care"
- "Harvard Community Health Plan: Origins and Growth"
- "Financing Neighborhood Health Centers"
- "Professional Standards Review Organization"
- "Fluoridation in Greenfield"

EXHIBIT B



Since January 2020 Elsevier has created a COVID-19 resource centre with free information in English and Mandarin on the novel coronavirus COVID-19. The COVID-19 resource centre is hosted on Elsevier Connect, the company's public news and information website.

Elsevier hereby grants permission to make all its COVID-19-related research that is available on the COVID-19 resource centre - including this research content - immediately available in PubMed Central and other publicly funded repositories, such as the WHO COVID database with rights for unrestricted research re-use and analyses in any form or by any means with acknowledgement of the original source. These permissions are granted for free by Elsevier for as long as the COVID-19 resource centre remains active.



Contents lists available at ScienceDirect

Vaccine

journal homepage: www.elsevier.com/locate/vaccine

Letter to the Editor



On 10 January 2020, Greg Wolff published a study examining if seasonal influenza vaccination was associated with an increased odds of becoming infected with a respiratory virus other than influenza, a phenomenon known as virus interference <https://www.sciencedirect.com/science/article/pii/S0264410X19313647>).

Influenza vaccination data and viral respiratory laboratory results were obtained for the 20172018 influenza season. While the study found no association with influenza vaccination and overall risk of becoming infected with other respiratory viruses (slight decrease in odds was observed), when examining the association with influenza vaccination and the risk of becoming infected with specific viruses at the individual level, there were two viruses that showed significantly increased odds (endemic coronavirus and human metapneumovirus).

Coronavirus results in this study represented the four endemic, regularly circulating strains of coronavirus (229E, NL63, OC43, and HKU1) during the 20172018 influenza season, not novel coronavirus (COVID-19). The four circulating strains of coronavirus have existed in the general population for years, first identified in the mid-1960s. At the time of the study, and even at the time of initial electronic publication, COVID-19 was not yet in existence.

Established levels of immunity in the general population for the four circulating strains of coronavirus at the time of the study

when compared to lack of immunity for the novel COVID-19 strain make any sort of correlation between vaccination and COVID-19 invalid.

Therefore, the results of this study cannot and should not be interpreted to represent any sort of relationship or association of influenza vaccination receipt and COVID-19 illness. Results from this study DO NOT support the anti-vaccination viewpoint of avoiding seasonal influenza vaccination, and in fact should be interpreted in the opposite manner, since significant protection against influenza was associated with vaccination receipt, and a slight decrease in the odds of infection from other respiratory viruses was also noted.

Results from this study should not be applied to or interpreted with COVID-19 in any way.

Greg G. Wolff

Armed Forces Health Surveillance Branch Air Force Satellite,
2510 5th Street, Bldg 840, Wright-Patterson AFB, OH 45433,

United States

E-mail address: gregory.wolff.3@us.af.mil