

Why BioPort Got a Shot in the Arm

By Timothy W. Maier

Allegations of ethical misconduct surround the start-up company that has become a multimillion-dollar supplier of anthrax vaccine to the Pentagon.



Front man: Crowe talks about the purchase of the vaccine laboratory at a press conference in June 1998.

Coming seemingly from nowhere, the Lansing, Mich.-based biotech company in its first year of existence landed a multimillion-dollar contract for perhaps the greatest weapon ever employed by the military: an anthrax vaccine. But it hasn't come easily. Rocked by allegations of ethical misconduct, financial chaos and dangerously sloppy management practices involving two former Michigan lab directors who were hired by BioPort Corp., the company now finds itself the target of a federal probe.

Republican Rep. Walter Jones Jr. of North Carolina, a member of the House Armed Services Committee, requested the Defense Department's, or DOD's, inspector general to investigate the Pentagon's financial relationship with BioPort. "I believe we have a skunk," Jones tells *Insight*. "I just can't find out where the odor is."

The federal probe comes on the heels of the Pentagon announcing it doubled the sole-source contract to purchase the vaccine, from \$25.7 million to \$49.8 million, in an effort to help stabilize the financially troubled company. Under the new contract, BioPort will provide about 2.3 million fewer doses than previously requested, for a total of about 5.3 million doses. The Pentagon says the expected deliveries still will be enough to administer the vaccine to all those who need it.

But the terms of the deal are raising questions: The Pentagon also agreed to advance BioPort \$18.7 million to cover its debts. BioPort claimed unless the Pentagon paid the up-front

money, military authorities would not have enough vaccine to inoculate all 2.4 million U.S. troops.

Jones calls the \$18.7 million advance disturbing. "Why is the taxpayer doing it, if it is not mandated?" he asks.

In a letter Jones sent to DOD Inspector General Donald Mancuso, he says, "While I understand the need to revisit contracts between the government and its suppliers, I am increasingly concerned about the nature of the relationship between DOD and BioPort Corporation.... [D]espite serious questions regarding the overall viability of BioPort, the federal government has chosen to more than double the value of its existing contract.

"If a company is to be the sole producer of a vaccine for every member of our armed forces, it is imperative that every aspect of the relationship with that company be sound," Jones continued. "Failure to follow that principle jeopardizes the health and safety of the men and women in our military, as well as that of their families."

Jones cited recent congressional testimony from the Government Accounting Office that BioPort is having financial difficulties, along with a DOD audit that indicated "substantial doubt that BioPort will be able to continue performing its contract."

The financial mess BioPort finds itself in also has caught the eye of the state of Michigan. Officials there wonder whether BioPort can make an \$8.7 million payment by Sept. 4, according to a source familiar with the deal that turned the former state-owned lab over to BioPort for a total price tag of about \$24 million.

The advance funds from the Pentagon cannot be used to make the Sept. 4 payment under the terms of the contract signed with the state. BioPort says it has every intention of making its payment deadline as it has on its previous payments. The only technical violation reported against the company is that BioPort has yet to honor product commitments to the state. Part of the state deal called for BioPort to provide rabies vaccine and plasma derivatives. But because BioPort has yet to get Food and Drug Administration, or FDA, approval to run their new lab, they haven't been able to provide the rabies vaccine. Even if BioPort fails to make the Sept. 4 payment, Michigan likely would grant an extension because, as one employee says, "The state doesn't want the bricks back."

Jones also recently contacted Bio-

Port's chief Michigan critic, state Rep. Lingg Brewer, a Democrat. After talking with Brewer, Jones tells *Insight*, he is going to call for hearings to get to the truth behind the BioPort's contracts and contacts.

BioPort was formed last year primarily to purchase the Michigan Biologic Products Institute, or MBPI, from the state of Michigan. For three decades MBPI had been the sole provider of the anthrax vaccine. When Michigan decided to get out of the vaccine business and sought to find a buyer, BioPort was born.

The deal hardly made a sound on the national scene but certainly caused quite a stir in Michigan. Did Michigan get ripped off when it sold the lab for \$24 million? That depends on whom you talk to. Brewer puts it this way: "To say we got ripped off is an understatement. First they ripped off the taxpayers of the state of Michigan and now they are ripping off federal taxpayers."

A state source knowledgeable of the deal praised the sale, saying the state sold it for more than twice what it's worth. At the time the lab had been appraised at \$10.5 million. Considering that millions more were needed to be dumped into the lab operations just to get them up to snuff, the state's defenders say the public got out just in time.

Brewer scoffs at that. He saw the potential of the lab to make millions and he thought something was afoot when BioPort turned to former lab directors Robert Myers and Robert van Ravenswaay to help seal the deal. The two state employees initially tried to buy the lab themselves by forming their own company, but withdrew after Brewer called it a "conflict of interest." But then they joined BioPort's team — and Brewer raised the conflict issue again.

"It was a very dicey situation," Brewer tells *Insight*. "The buyers became sellers and the sellers became buyers."

Brewer believed it clearly was a conflict of interest for the state employees who ran the lab to bid on it. He filed an ethics complaint, claiming Myers and van Ravenswaay used "confidential information which they had access to as officials of the public MBPI to win the bid." He accuses the two former state employees of "manipulating the purchase price to a lower than a fair value" in their contract with KPMG Peat Marwick, which established the fair-market value, by failing to acknowledge the federal government's interest in purchasing greater quanti-

Anthrax Vax for Sale



A supervisor monitors air flow in the BioPort laboratories where the anthrax vaccine is produced.

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1990: Faud El-Hibri, BioPort CEO, gets anthrax vaccine for Saudi Arabia, which had been unable to get it from the U.S.

6/96: El-Hibri contacts Dr. Robert Meyers about buying the anthrax-vaccine lab from the state of Michigan.

10/96: \$130 million DOD contract with MBP to vaccinate troops becomes public.

11/96: KPMG Peat Marwick states lab's value at \$10.5 million.

1/97: Myers and Robert van Ravenswaay file incorporation articles under the name of Michigan Biologic Products, or MBP.

1/97: Michigan permits sale of lab and allows state employees to bid on it.

6/97: Michigan state Rep. Gagliardi appoints state Rep. Brewer to study the sale.

10/97: MBP submits its first bid to purchase the lab.

11/97: Myers and van Ravenswaay's purchase offer is withdrawn, ending conflict of interest.

12/97: U.S. Army says it needs more anthrax vaccine. Michigan says it's ready to supply it. Plans made to inoculate all 2.4 million military personnel because of problems with Iraq.

1/98: Michigan reopens bidding for lab.

6/98: BioPort wins bid with \$17 million offer: \$2.5 million paid upfront, with the rest paid through a five-year loan. Total deal was about \$24 million.

6/98: Brewer files lawsuit for documents concerning the bid.

7/98: U.S. circuit court orders documents produced. They show 32 percent of BioPort owned by Myers and van Ravenswaay.

7/98: State Administrative Board approves BioPort sale.

8/98: Michigan Ethics Board orders check of Brewer's complaint filed against Myers and van Ravenswaay for allegedly violating state ethics laws.

6/99: Meyers and van Ravenswaay cleared.

8/99: North Carolina Rep. Jones asks for DOD probe into BioPort's relationship with the Pentagon. Jones asks Brewer for lab sale documents and calls for congressional hearings.

ties of products. Brewer claims the Marwick report is particularly disturbing because Myers and van Ravenswaay had a hand in writing the report as state employees.

Critics of the deal also questioned whether it was wise to turn the lab over to Myers and van Ravenswaay because, when they ran the lab for the state, they had received warning letters from the FDA criticizing them for poor management practices. Neither Myers or van Ravenswaay were available for comment to *Insight*. However, responding to the criticism, BioPort alleged that the Michigan Legislature had failed to give them the resources to upgrade the facility and instead let the lab slip into total disrepair. The state didn't want to invest millions into the lab. "That's one of the reasons why the state got rid of it," says BioPort spokeswoman Kelly Rossman-McKinney. "Blemishes? Yeah, we got blemishes. But we are doing our damndest to make a good product because we believe the threat is real."

Nevertheless, the Michigan Ethics Board launched its probe in 1998. But months later the board found that nothing illegal occurred. "We didn't get any standing," says a frustrated Brewer. "We were very disappointed."

Both Myers and van Ravenswaay were helped out by the state Legislature passing Public Act 522 in 1997, which not only authorized the sale of the lab but allowed state employees to bid on it. The law was passed about a year after Myers and van Ravenswaay were approached by BioPort. Similarly, a state circuit-court ruling also agreed with the board's finding.

The deal sailed through. Michigan was promised royalties for five years on commercial sales, which the governor's office projects to be about \$1 million a year. BioPort beat out its closest competitor, Gruppo Marcucci, which actually offered more money up front but not as much in the long term. Marcucci made some members on the commission nervous because it is an Italian company — and the state wanted to award the contract to a U.S. company, according to sources close to the deal.

"Marcucci had slightly more cash but they had one problem," says an inside source. "Federal law prohibits the sale of a sole supplier of the anthrax vaccine to foreign firms. We didn't think it was real smart handing the keys overseas."

But BioPort's chief executive officer, Faud El-Hibri raised a few eyebrows on the commission as well. In

GRAPHIC BY CHARLES R. HAZARD

1990, El-Hibri helped facilitate the purchase of anthrax vaccine for Saudi Arabia, which had not been able to obtain it from the U.S. government. According to one commissioner, "We were nervous, certainly, and wondering if he would be selling the vaccine to the Iraqis."

El-Hibri's Middle Eastern connections also apparently triggered some concern — and at times became a headache for BioPort's public-relations team. "My life would be easier if he didn't have a Middle Eastern descent," says Rossman-McKinney. "Unfortunately people leap to dramatic conclusions."

At the time of the BioPort bid, El-Hibri was a German citizen of Lebanese heritage. He previously had been the biotech director of Proton Products Ltd. in the United Kingdom, which marketed two bio-defense vaccines for botulinum type A and anthrax. In 1996, El-Hibri, upon learning of the pending sale of the Michigan lab, joined forces with Myers, who had formed Michigan Biologic Products, a company trying to acquire the lab. BioPort was incorporated May 12, 1998. At the time of the bid, El-Hibri had applied for U.S. citizenship, and the commission became less concerned with his foreign ties. After contacting the U.S. Embassy in Germany and having the deal basically blessed by the Pentagon, the commission became convinced El-Hibri was one of the good guys.

What strikes both Jones and Brewer odd is the lack of national-security or intelligence agencies involved in the bid process. The only checking Michigan did was to call the U.S. embassies in Germany and Italy to check on the two top bidders. Both companies checked out.

"The only time national security was mentioned was they told me I was violating national security for asking questions," Brewer says.

When BioPort is asked about national security, they point to their top gun, retired admiral William J. Crowe Jr., the former chairman of the Joint Chiefs of Staff, ambassador to Britain and chairman of the president's foreign-intelligence advisory board. Crowe is a member of BioPort's board and an icon of the defense establishment. He has known El-Hibri for more than a decade.

Crowe, who served in the Reagan, Bush and Clinton administrations,

Admiral Crowe's active relationship with BioPort has raised a series of questions about whether he has played any role in securing the sole Department of Defense contract for the vaccine.



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The prize: This former state facility was sold to BioPort in 1998.

declined *Insight's* repeated attempts to be interviewed for this story. But his ties to Clinton are no secret. Outspoken against the Persian Gulf War policy, he endorsed Clinton during the 1992 election, prompting criticism from Republicans. Four years later, El-Hibri turned to Crowe to help acquire the lab. In his June testimony before the House Government Reform subcommittee on National Security, Veterans Affairs and International Relations, El-Hibri says, "Admiral Crowe's background would be important in ensur-

ing that we did everything correctly in establishing a company that would best serve DOD's needs."

BioPort has a five-member board of directors, chaired by El-Hibri. The other members are Crowe, Myron W. Solter, Myers and van Ravenswaay. The stock is split, with 80 percent of the shares voting and 20 percent non-voting. The nonvoting shares were awarded to each of the 200-plus employees. Reportedly, only half of the employees have received the anthrax-vaccine shot.

Three companies holding voting equity in BioPort are Intervac LLC and Intervac Management LLC, which are Maryland companies, and MBPI, a Michigan corporation. Intervac LLC is the controlling shareholder and is owned by Crowe, El-Hibri, El-Hibri's wife, Nancy, and I and F Holdings N.V., a Netherlands-Antilles investment company owned by El-Hibri's father, Ibrahim El-Hibri. Crowe and El-Hibri are controlling members of Intervac LLC. Crowe's active relationship with BioPort has raised a series of questions about whether the admiral played any role in securing the DOD contract or pushed for what appeared to be the sudden desire to order more than 2 million soldiers to receive only the anthrax shot — even though they are at risk from many other bioweapons as well.

Rossman-McKinney says Crowe never gave a political donation, and Crowe's longtime spokesman Jay Coupe claims Crowe never put a penny into either Intervac or BioPort. "Admiral Crowe never had any conversation with any member of the administration or Department of Defense in advance of the decision to inoculate the troops," Coupe says. "He was not involved in any way whatsoever.

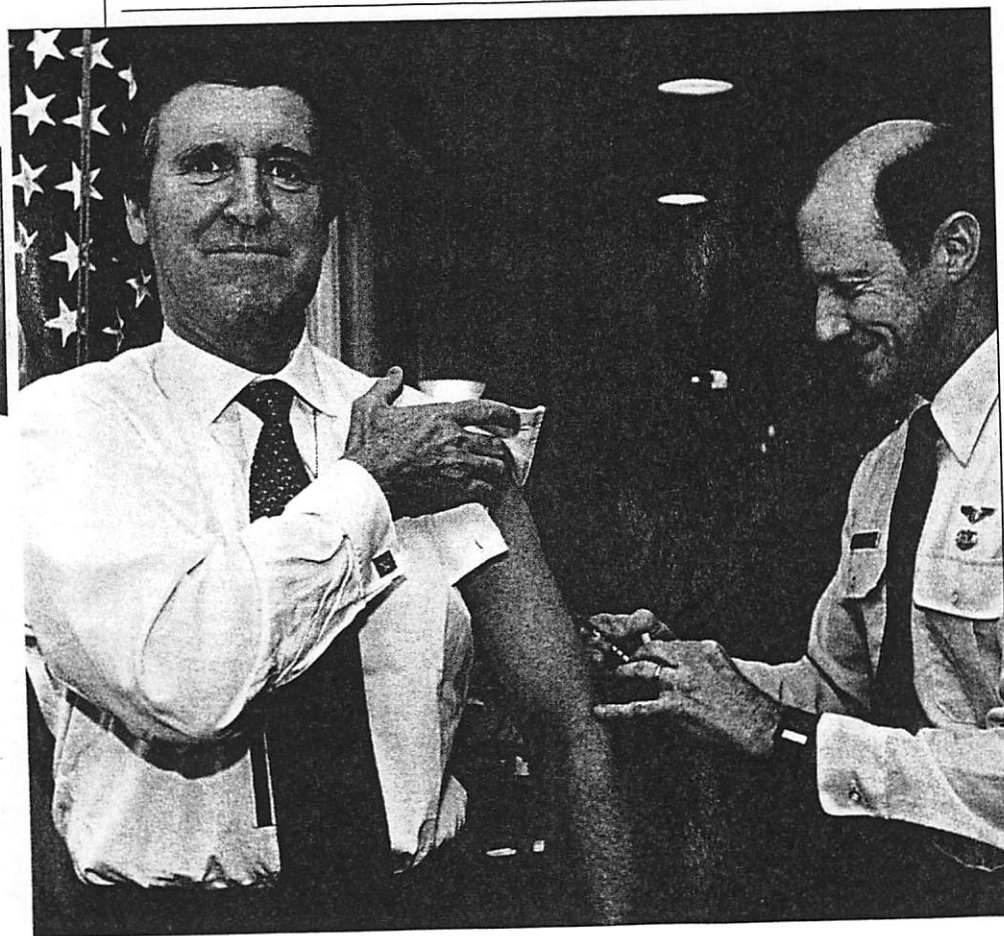
He never spoke to the secretary of defense. He never spoke to the national-security adviser nor anyone else in the government on the issue.... And Admiral Crowe has agreed, along with the board of directors, not to take a dime for five years."

Mark Zaid, a Washington attorney who represents several soldiers refusing to get the inoculation, doesn't buy the argument that Crowe is not going to benefit from the deal. "How much does he make after five years?" Zaid asks. "Millions. I could care less if Crowe was involved. But, morally, it smells."

A Dose of Reality

Millions of U.S. military personnel are queuing up for new mandatory anthrax vaccinations, but scores are choosing resignation — or court-martial — instead.

By Timothy W. Maier



They call themselves the “walking dead” — not a comforting thought, considering they are members of the U.S. Army, Navy, Air Force, Marines and National Guard. But some feel nearly dead — or that they might become medically disabled in the long run — after being ordered to receive anthrax vaccinations in the new campaign to vaccinate 2.4 million enlisted and career personnel.

Critics point to the unknown impact

Sleeve rolled up: Demonstrating solidarity, Cohen gets an anthrax inoculation this summer at the Pentagon.

of inoculations with a serum never used on such a massive scale, the Pentagon’s refusal to consider long-run side effects, the impact on differing immune systems and the ability of an enemy to alter the biological agents of anthrax to strains unaffected by the vaccine. As a result, scores of enlisted personnel have accepted courts martial and jail terms

rather than receive the shots, and a disturbing number of highly trained reserve pilots have decided to resign — specifically citing the risk.

A number of those vaccinated already have been injured, and their stories are troubling. From 1990 to July 1, 1999, 215 reports of adverse events involving civilians and soldiers were reported to VAERS, the Communicating Vaccine Adverse Event Reporting System of the Food and Drug Administration, or FDA. Of these, five patients were hospitalized for severe injection-site reactions, one experienced an allergic reaction, another suffered a case of aseptic meningitis and two were diagnosed with Guillain-Barré syndrome — putting them in wheelchairs — and another with bipolar disorder. One patient experienced the onset of lupus and has not recovered.

Since the FDA posted the VAERS results, the Anthrax Vaccine Expert Committee, an independent review team comprising civilian doctors, met Aug. 10 to review 157 VAERS reports concerning only soldiers observed March 1998 to August 1999. Of those, 15 soldiers were hospitalized for events ranging from injection-site injuries to multiple sclerosis and diabetes. Again, the review team declared that only systemic reactions such as cold sweats, chills, aches, rashes, itching, chest tightness and allergic lung reaction might be related to the vaccine. All other pathologies were disregarded.

But tell that to the walking dead. Air Force Capt. Michelle L. Piel, a pilot, told the House Government Reform subcommittee on National Security, Veterans Affairs and International Relations in July about her fatigue, dizziness and immune disorders. “There is no way that I know of to prove that the anthrax vaccine causes any of this,” she claims. “All I can tell you is that I became uncharacteristically ill after I started taking the anthrax shots. It has taken 12

doctors and eight months for me to finally find any reason for my symptoms."

The Pentagon says to look at the statistics. As of Aug. 11, 323,496 military personnel have taken the first of six mandated shots; only 200 refused. "There is no widespread fear," insists Department of Defense spokesman Jim Turner, who takes issue that there has been a backlash of complaints or side effects related to the shot.

Are all the complaints reported? Piel says she doubts it. "The chief flight surgeon did not agree that I'd had a reaction to the vaccine. When I asked what he considered reportable, he gave me examples such as difficulty breathing, rashes, sweating, fever, nodules and anaphylactic shock. All of these are classic allergic reactions. My case did not fall into those criteria."

So far, all the injections came from stockpiles prepared by the sole-source and now-defunct producing laboratory, the Michigan Biological Products Institute, or MBPI, then owned by the state of Michigan. But MBPI, which had been experiencing funding and quality-control problems, has been sold to a biotech start-up, BioPort Corp., controlled by the former chairman of the Joint Chiefs of Staff, retired admiral William J. Crowe Jr., and Faud El-Hibri — a biologist of Middle Eastern origin who has facilitated sales of anthrax vaccine to Saudi Arabia — and former employees of MBPI (see related story, p. 13). Moreover, BioPort has not produced any vaccine because the corporation still is waiting for FDA approval of its new lab. This situation doesn't sit too well with the Reserve Officers Asso-

ciation, which favors the mandatory inoculation as long as fresh vaccine is used.

Turner sent *Insight* a summary of medical studies — all suggesting the anthrax vaccine is safe and effective since the FDA licensed it in 1970. One of these, the so-called Licensure study, produced when the vaccine was up for approval before the FDA, shows that systemic reactions, such as malaise or chills, were reported in four individuals or fewer than six per 10,000 doses of the vaccine. Another, the Brachman study, involving mill workers, shows that systemic reactions occurred in fewer than two per 1,000; a Fort Detrick study involving 999 male laboratory workers who were followed up for 25 years shows that none of the men developed any unusual diseases or unexplained symptoms.

Critics say those studies are flawed, noting that the Fort Detrick study did not even support a control group. Meryl Nass, a member of Physicians for Social Responsibility, or PSR, and a physician at Parkview Hospital in Brunswick, Maine, says she doubts the vaccine will work. While a controlled trial that would subject humans to inhalation of anthrax is unethical, scientists have forced monkeys and guinea pigs to inhale anthrax with contradictory results. A Fort Detrick experiment using guinea pigs showed nine of the 27 strains tested killed 50 percent of the vaccinated guinea pigs. In a second study, 26 of 33 strains tested killed half of the animals.

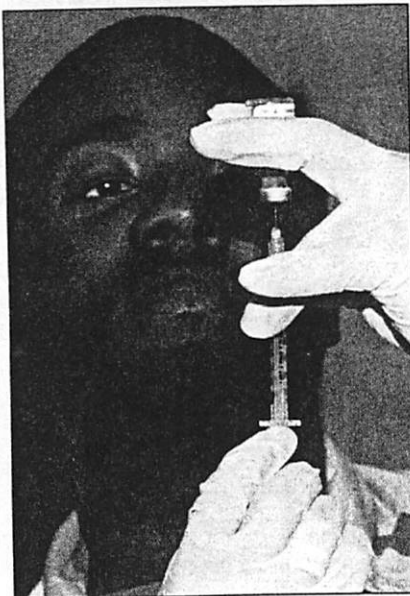
Such studies prompted the Senate Veterans Affairs Committee in 1995 to declare the vaccine should be consid-

ered "investigational when used as a protection against biologic warfare." Nass also points to a series of studies suggesting reaction rates are much higher than the Pentagon has led troops to believe. A Korean study shows rates of all reactions from minor to severe were 40 percent in men and 70 percent in women. The ongoing Tripler Army Medical Center study of 600 service members resulted in 20 percent of vaccinated soldiers developing a systemic reaction after at least one of the first three injections. At Dover Air Force Base, 20 to 25 pilots have been identified with symptoms similar to those present in people with the so-called gulf-war illness, with 50 percent reduction in function.

Where lies the truth? It simply may not be known. Today no long-term studies exist of the anthrax vaccine. As some of the dissenters see it, maybe you'll get sick, maybe you won't. Dover Air Force Reserve pilot Hans Reigle, who submitted his resignation, says, "They're asking us to put a gun to your head as a matter of faith and pull the trigger. Hopefully there is more than one empty chamber."

Turner says to look at the alternative: "We fight as a team. If you don't have the anthrax shot, your team is degraded. You're not combat-ready. We make it mandatory for a variety of reasons. One is to save people's lives. No. 2 is to maintain an effective fighting force. And three, it takes weapons away from our enemies. It is a verified threat. If you vaccinate our people, you take the weapons out of their hands."

The military takes away choice, but House Government Reform subcom-



What's Good for the Goose?

To counter the critics, the Pentagon public-relations shop shows films of military leaders taking antianthrax inoculations. Even Defense Secretary William Cohen happily has rolled up his sleeve in front of the cameras, smiling as the stuff goes in. President Clinton himself is believed to have been vaccinated for anthrax, although no one will confirm the fact, claiming it's classified. Retired admiral William J. Crowe Jr. has taken three of the six required shots — and he is the former chairman of the Joint Chiefs of Staff and a director of BioPort, which bought the producing laboratory, the Michigan Biological Products Institute, from the state of Michigan in 1998.

While Crowe declined repeated requests for interviews, his chief spokesman, Jay Coupe, says, "Do you think the admiral would subject himself or the military to a shot if he didn't believe it was safe?"

Coupe downplays the critics, saying that they're mostly "just reservists." He adds, "Do you think they have the intelligence of the secretary of defense, who has taken the shot, or Admiral Crowe, who has 50 years of military service? Let me put it another way. Who do you think would have more access to more information? The secretary of defense or a pilot? You should look at the motives — some of these pilots may not want to be deployed."

—TWM

mittee on Veterans Affairs Chairman Christopher Shays of Connecticut characterizes it as a profoundly personal choice. "After military service, the uniform comes off but the anthrax vaccine stays with you for life. It's just not the commitment many dedicated men and women made to their country when they volunteered for military service."

At the center of the debate is broken trust, he says. "Radiation testing, Agent Orange, the reckless use of experimental drugs and the mysterious Gulf War illnesses have made military men and women understandably distrustful of the Pentagon on medical matters," Shays says.

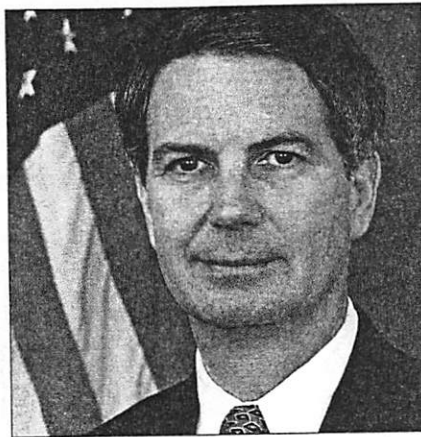
This private dogfight has evolved into ugly personal attacks. Because of Nass' ties to PSR, he is considered an antiwar protester and a member of the no-nuke club and therefore politically motivated to distort the facts. Likewise, Crowe, who is a director of BioPort, has been questioned about his profit motives. BioPort has made no secret that to make long-term profits, the company must be able to market the vaccine to foreign countries and not just the military — which raises concern among soldiers who fear that the wrong country could get the code and build a strain to defeat the vaccine.

Tech. Sgt. Bill Mangieri is the first nuclear biological chemical warfare instructor from the 105th Air Wing in Newburgh, N.Y., publicly to refuse the shot. "I reviewed the studies and I don't believe the vaccine will work," he

says. "We don't need to get in the business of the inoculation race. The wrong people get it and they can change the code."

Republican Rep. Walter Jones Jr. of North Carolina, a member of the Armed Services Committee who has called for an investigation into Bio-

'They're asking us to put a gun to your head as a matter of faith and pull the trigger. Hopefully there is more than one empty chamber.'



Jones: "I'm not your problem ... the military is your problem."

Port's financial ties to the Pentagon, charges the military has done a poor job of educating its servicemen and women and now appears to be playing catch-up to avoid a mutiny. Jones has introduced a bill, HR2543, the American Military Health Protection Act, calling for the inoculation to be voluntary. His colleague, New York Republican Rep. Benjamin Gilman of New York, chairman of the International Relations Committee, has introduced another bill, HR2548, the Vaccination Moratorium Act, which would halt all vaccinations until a long-term study by the National Institutes of Health can be completed.

To ameliorate Jones' fears, Cohen wants Jones to meet with the Pentagon's anthrax experts. To that suggestion, Jones says, he replied, "I'm not your problem. The military is your problem."

"At Travis Air Force Base alone, 32 pilots in the 301st Airlift Squadron have resigned or are planning to resign because of the vaccine," Jones tells *Insight*. "That is more than a 50 percent attrition rate. The Air Force estimates it costs \$6 million to train a pilot. If that holds true, the United States is losing over \$190 million worth of training and over 450 years of combined experience in the cockpit."

The *Sun* of Baltimore recently reported that 25 F-16 pilots of the 35 pilots in the 122nd Fighter Wing of the Indiana National Guard are refusing the vaccination — resulting in the

(continued on page 20)

Pentagon Says Yes, State Says No

In December 1997 the Pentagon announced all 2.4 million active-duty military personnel and reservists would be inoculated against anthrax. President Clinton warned Americans that a terrorist attack likely would occur after the United States bombed a suspected pharmaceutical terrorist facility in Sudan.

Defense Department spokesman Jim Turner dispels allegations that the Pentagon jumped too fast into the vaccination business. First, he says, look at the alternative: Death is the predictable outcome of inhaling anthrax. While not contagious, the inhalation of anthrax spores causes severe respiratory distress, followed by shock and then coma. "Detection is very difficult," Turner says. "It's highly unlikely you know you are attacked because the symptoms are flulike. About the time the symptoms start showing, you're dead."

There was no overnight decision, he

insists. It took at least "one or two years of thought" behind this undertaking. "It's a vaccine that has been safe and effective for 30 years. It would be unconscionable for us not to do it." Perhaps, but what is the most likely target a terrorist would strike? A military base or a U.S. embassy, asks Washington attorney Mark Zaid.

Certainly history suggests that an embassy is subject to a terrorist attack, so it would follow logically that the State Department would mandate the anthrax vaccine to those in at-risk countries. But State doesn't do that. Zaid points out that State's policy is to make compliance strictly voluntary, just as it is in Britain. "The Pentagon says it is unconscionable not to do it," he says. "Well, how immoral are those British people? They stopped their program. There is no program in France and no such program with the Israelis. They rely on protective gear. The State Depart-

ment is at risk. Why aren't they doing it?"

When *Insight* asked the State Department to respond, spokesman Philip Reeker said, "The Department doesn't mandate any vaccines. We provide them with information to make their own decision."

When told of their remarks, Rep. Walter Jones Jr., a member of the House Armed Services Committee, immediately fired off a letter to Secretary of State Madeleine Albright requesting copies of all documents, files, memoranda, electronic communication and faxes pertaining to the State Department's decision. "This inconsistency between departments is baffling — and wrong," Jones wrote. "Since State Department employees are more widely dispersed, and thus more widely exposed to a potential anthrax threat, the logic of your voluntary anthrax program underscores the illogic of the DOD position." — TWM