

The Vatican's Pontifical Council for Culture and the Cura Foundation's Fifth International Vatican Conference

MIND, BODY & SOUL Part I: Investing in the Future

Special Opening Conversation

Anthony S. Fauci, MD, Director, National Institute of Allergy and Infectious Diseases, U.S. National Institutes of Health

Moderator: Sanjay Gupta, MD, Award-Winning Chief Medical Correspondent, CNN Health, Wellness and Medical; Neurosurgeon

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Max Gomez, PhD:

We are honored to have with us, Dr. Anthony Fauci, the director of the National Institute of Allergy and Infectious Diseases. He sits down with CNN's award-winning chief medical correspondent and neurosurgeon, Dr. Sanjay Gupta.

Sanjay Gupta, MD:

For more than a year now, Dr. Anthony Fauci has been helping all of us here in the United States, around the world get through this coronavirus pandemic. His steadfast approach full of evidence and facts has provided a sense of reassurance, but also helped us develop things like vaccines at unprecedented rates, which have obviously been helping countries all over the world. Dr. Anthony Fauci joins us now. Welcome, sir.

Anthony S. Fauci, MD:

Thank you, Sanjay. Good to be with you.

Sanjay Gupta, MD:

I want to ask you a question this morning. I'm not sure we've really talked about, and you and I have had many conversations. Sometimes, Dr. Fauci, science and faith can seem somewhat incompatible. Faith, you're believing in certain things. But with science, you want the evidence, you want the reason, the judgment. Just curious how do you think about science and faith and the inflection points, but also when something is truly novel, as the case with this coronavirus, there isn't a lot of evidence? How much do you have to rely on just your own faith, not necessarily religious faith, but just your system of beliefs?

Anthony S. Fauci, MD:

Well, I think you have to rely on it when you're starting with nothing, Sanjay, almost completely. And it's sort of an interesting dynamic process of as evidence accrues and you get more and more information, then you have that transition from what your instinct and judgment... It's very interesting when you use the word faith and I'm glad you said not necessarily religious faith. It really is a combination of instinct, good judgment, and calling back from experience. That, in some respects, is a non-religious faith issue. That as you get further and further and more solid scientific information becomes available, you pull away a bit from the kind of experience, instinct and get more into what the reality of the evidence that you have.

And that's an interesting thing because it explains a lot about when we're going through a very difficult situation, like the evolution of an outbreak, people who don't appreciate that evolution of understanding and evolution of knowledge, that you're going to change some of your viewpoints. Because the data itself will not necessarily change, but additional data changes the status of your knowledge. And your knowledge may go from minimal and you're acting on "faith" as it were versus the true substantive evidence in data, which really gives you a much greater foundation. So that's the way I look at it.

Sanjay Gupta, MD:

Yeah. I think that's, it's really interesting. And I think when someone like you, you've been in this position for 40 years, you have a lot of preexisting knowledge. And you're going to instinctually, just know things or be able to connect dots maybe in different ways. That is what experience and judgment gives you. But how do you also allow yourself to be surprised, right? Because you're dealing with a virus in this case, a novel coronavirus. But then some piece of data comes out that, that doesn't make sense. How willing are you to accept that sort of new data?

Anthony S. Fauci, MD:

Well, that's a great question, Sanjay, and you must be flexible. I've said this so many times, flexible, open-minded, and humble to know that even though you have 40 years of experience, that when you're dealing with something that is really in the realm of the unknown, you've got to expect the unexpected. I mean, that's some of the dictums that I go by, always expect the unexpected. Particularly when you're dealing with a microorganism, which in many respects from an evolutionary standpoint, has the capability to adapt itself to always survive. And organisms are not static things. And that's the reason why we're seeing the evolution of these variants. If it was a static situation, you would know exactly what it was right from the beginning, but it continues to evolve. I mean, I think one of the real good examples of that is that the dictum of infectious diseases forever, were that respiratory borne viruses tend to have a very small amount of transmission from an asymptomatic people.

And we know that influenza and other types of infections have a small fraction of maybe 24 hours before a person gets symptomatic, that they can transmit it. We never would have imagined, and it was unique, that we were dealing with a virus where one-third to 40% of the people never get any symptoms. And 50 to 60% of the people who will get infected, get

infected from someone with no symptoms. That was completely unprecedented. Totally. And that's the reason why when scientists were saying, it's not really a major driver of asymptomatic infection. And now you find out that it is at least half of the infections are transmitted.

The reason why that's important, it impacts everything that you've been sort of like, going ... A, it impacts the ability to do identification isolation contact tracing. It impacts the profound need to wear masks. When you say, well, I don't worry. If I don't feel sick, why should I wear a mask? Now we know that you could be spreading the virus. So that's what I mean by using your experience, using your knowledge, but always, always keep an open mind that you're going to find out data they're going to have you change some of the things that may have been foundations of what you've done for years.

Sanjay Gupta, MD:

I'm curious, I don't know how you would frame this, but if 100% is all of the knowledge that exists about a particular thing in this case the virus. Where are we right now? I mean, how much do we know about this virus? How much do you think is still left to learn?

Anthony S. Fauci, MD:

Oh, I think that there's a substantial amount, not only about the virus, what the virus can do, but the pathogenesis of the disease, the thing that... If I have the opportunity sometime to be able to slow down and get in the lab to look at things I want to find out, how could it possibly be that the same virus that's killed 570,000 people in this country is a virus in which more than half the people don't ever get any symptoms? I mean, you could say, well, they're young, they're healthy, but that's not an adequate explanation. There's something there, something that we don't know about, about the pathogenesis.

The other thing that we don't know about is the ability. How extensive is the ability of this virus, if you don't really suppress it completely, to develop new variants? And every single week, Sanjay, that goes by, we get hit with another challenge. First it was the 614, the orig. No, first it was the Wuhan strain. Then we said, oh, wait a minute. We have a 614 now. Okay. So that's one variant. And then all of a sudden, the 351 in South Africa, and then the 117 in England, and now the 617 in India. It's like, it's a wily opponent. It's a wily opponent.

Sanjay Gupta, MD:

How worried should we be in the rest of the world about what's happening in India? Is that a cautionary tale?

Anthony S. Fauci, MD:

Well, it's a cautionary tale from so many standpoints. I've seen this with HIV in a less dramatic way, where individual countries say, "It will never come here. We don't have the conditions for that to happen." When India had that first blip and then it went back down, and then we saw doing the ceremonial feasts at the Ganges river. When I saw that on TV, when you showed that a week or so ago, Sanjay, my heart sank. I said, oh my goodness, that is going to turn out to be something not good. And that's exactly what happened.

Sanjay Gupta, MD:

I'm curious, Dr. Fauci, in the minute or so we have remaining, going back to just this inflection point between science and faith. There's a lot of vaccine hesitancy in the world. We see around a quarter, 20 to 25% in the United States. To some extent, people need to believe based on the evidence, and the facts, and the data that this is a good thing to do. That it's going to help them, protect them and make them less likely to transmit the virus. What do you say to people right now? Maybe even friends of yours. I don't know. Who are vaccine hesitant.

Anthony S. Fauci, MD:

Well, you've got to connect them with people they trust. The thing that we're finding out that it depends you have, who is the audience and who is the messenger. You've got to match the messenger with the audience. And I think if you do that, you're going to overcome a lot of the hesitancy. When you go into the trenches and you have someone who's a deeply religious person who will listen to their clergy, that's different than me with a suit, going into an area, telling people to do something.

Sanjay Gupta, MD:

I think most people would listen to you though, Dr. Fauci. I'm just putting it out there. And thank you very much for your time. One of my great aspirations, dreams is that we get to spend some time together in person in the next several months. So hopefully we get to do that.

Anthony S. Fauci, MD:

I not only hope, I'm going to make sure it happens.

Sanjay Gupta, MD:

Dr. Fauci, thank you for your time.

Anthony S. Fauci, MD:

Thank you, Sanjay. Good to be with you.

Sanjay Gupta, MD:

You too.