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**RUSH TRANSCRIPT: MAYOR DE BLASIO VISITS SENIOR CENTER IN THE SOUTH BRONX TO
PROVIDE RESIDENTS WITH INFORMATION ON LEGIONNAIRES' DISEASE, HOLDS MEDIA
AVAILABILITY**

Mayor Bill de Blasio: Well, good afternoon, everybody. It is such a pleasure to be here with you. And –

[Mayor de Blasio speaks in Spanish]

[Applause]

So it a great pleasure to be with you and have a chance to talk to you about some of the things we're doing. I want to give you an update – and now Eva is going to do her first translation.

[Translator speaks in Spanish]

I want to thank everyone who is a part of making this senior center great – everyone who works here. I want to thank the folks at Neighborhood SHOPP. I want to thank the executive director, Dr. Evelyn Laureano, and program director, Sandra Colon – give them a round of applause.

[Applause]

And I want you – because I – Eva Callo is my translator, but she's also a nurse who works at Lincoln Hospital and has been helping people to have information; and helping to serve so many people. Let's thank Eva for all she does.

[Applause]

Now, it was a pleasure to meet each and every one of you. And the reason I came here today is to give you an update on what's happening with Legionnaires' disease. And I'm joined also by our Commissioner for the Department for the Aging, Donna Corrado, and the head of the Health and Hospitals Corporation, President Ram Raju.

[Translator speaks in Spanish]

Also, I want to give them a chance to get the attention they deserve. The president of the Health and Hospitals Corporation Ram Raju, the Commissioner for the Department of the Aging Donna Corrado, let's give them a round of applause as well.

[Applause]

So, we are confident that the Legionnaires' outbreak is now ending. We now have gone seven days with no new cases.

[Translator speaks in Spanish]

We here still news of people who contracted Legionnaires', but it's news coming from days ago. In other words, some people got it and it was not clear that it was Legionnaires' until recently; and the news hasn't traveled quickly, but in terms of brand new cases it has been a whole week with no new cases.

[Translator speaks in Spanish]

It's important to remember two things, this disease is not a contagious disease. You can't get it from another person. And we know this outbreak – you can't get it from the water supply; you can't get it from regular contact with other people or with water.

[Translator speaks in Spanish]

But if anyone has symptoms of this disease – it's a form of pneumonia. If I said to you pneumonia, that's something everyone's heard about. But Legionnaires' is something that most of us don't have a lot of information about. We haven't experienced it before. But this is a form of pneumonia and we can treat it with antibiotics.

[Translator speaks in Spanish]

And the important thing to recognize is if you or any family member or friend have symptoms – that's so important to get healthcare immediately. Go to a doctor immediately, or an emergency room like Lincoln Hospital immediately.

[Translator speaks in Spanish]

Eva was such a good translator she added to what I said. And she is right. Symptoms include headache, shortness of breath, coughing, flu-like symptoms. Everyone knows what it's like to have the flu. If you think you have those same kind of symptoms, get to a doctor immediately. Don't wait. Don't explain it away just get to a doctor or go to the Lincoln Hospital emergency room.

[Translator speaks in Spanish]

As of today, 79 people who contracted this disease went to the hospital, were cured with antibiotics, and have been released. So the vast majority of people got treatment promptly and were cured very quickly.

[Translator speaks in Spanish]

So we want to keep reminding everyone, until this outbreak is 100 percent over, the most important thing to do is, if you think you have the symptoms, get medical treatment. People who get medical treatment quickly will be okay. People who don't get medical treatment will be taking a risk. There's no reason not to get medical treatment. I much rather people say I'm not sure, but I'm going to get to a doctor anyway – than hesitate and take a risk.

[Translator speaks in Spanish]

And Lincoln Hospital will take anybody, anytime regardless of ability to pay; regardless of documentation status. No questions asked. Lincoln Hospital is available 24 hours a day if you or anyone you know has these symptoms.

[Translator speaks in Spanish]

I also want you to know that this is the largest outbreak of Legionnaires' we have ever experienced in the history of New York City. But even though that's true, we see that this outbreak is ending and we are going to take action to ensure that nothing like this happens again in the future.

[Translator speaks in Spanish]

Our health commissioner has ordered that every building in New York City with the kind of cooling tower that could cause this disease will be cleaned in the next ten days.

[Translator speaks in Spanish]

And on Thursday the City Council will pass a new law that will require every building owner in this city to register their equipment, to inspect it regularly, and clean it regularly. This will be the first large city in America with this kind of [inaudible].

[Translator speaks in Spanish]

We're going to continue to provide information to people – this community. We have gone door to door to businesses, residents, and continue to go to senior centers – wherever people are with the information they need in English y en Espanol. So people will know what they can do if they need help. And whenever you have a question about this disease, you can call 3-1-1 to get answers as to information and also where you can get help.

[Translator speaks in Spanish]

Now, I want to do a test – I'm going to do a quiz – and exam of this room. If you have symptoms and you don't know where else to get care, where do you go?

Audience: Lincoln Hospital

Mayor: I can't hear you.

Audience: Lincoln Hospital!

Thank you. Lincoln Hospital will help you 24 hours a day. We will continue to work in every part of the community until this outbreak is over, and we will work to make sure that we will not ever have an outbreak like this again in this city.

[Translator speaks in Spanish]

[...]

Mayor: Let me just say a few things before we get started. I just want to remind everyone – we'll take topics on this topic only. Wait, excuse me – take questions on this topic only. I am joined by Dr. Ram Raju, the president and CEO of the Health and Hospitals Corporation. I'm very happy with the positive response that the seniors gave at Lincoln Hospital – one of your flagships. We thank you, Ram, and of course, our commissioner for the Department for the Aging, Donna Corrado. Her agency works with this senior center and senior centers all over this city. I just want to say a couple of things in English and a little bit in Spanish, then we'll take questions on this topic.

I want to thank everyone here – neighborhood shops, senior centers. Obviously, it's a wonderful senior center – a very well run one. Thank everyone here who welcomed us today. The purpose of this visit was to give updates to the seniors.

We all know that Legionnaires' tends to affect older people more, and it was important to give these seniors a progress report to remind them of the help that was available if anyone had symptoms; to remind them that it's very important, whenever someone feels they do have the symptoms, to immediately seek medical care – whether that's with your own doctor or the easiest thing one can do in this community – go to the Lincoln Hospital emergency room. Again, symptoms – shortness of breath, headache, flu-like symptoms, things that no one should try and explain away or minimize. The simple thing to do is, if you live in this area of the South Bronx, go and get the medical attention right away.

And by the way, as Dr. Bassett has said in the last few updates, more and more people are heeding that call. We've been very impressed at how quickly people are getting medical care. And it shows in the trajectory of this outbreak and the fact that things are getting better. And, as Dr. Raju and other hospital leaders have found, the reduced number of pneumonia-related cases in our emergency rooms – people are getting care quickly and that is one of the reasons things are turning around.

A couple of other updates for you – another day, and I'm happy to say, where we have no new cases since August 3rd. So a full week, no new cases since August 3rd. We continue, as we said yesterday – we continue to get previously contracted cases that are finally diagnosed as being Legionnaires' reported to us. So the total number plus two today. We have two additional cases that were previous – that were earlier, but have now been diagnosed as Legionnaires'. That takes the grand total –

[phone rings]

Come on, people. Turn off your cells, please.

That takes the grand total to 115 – one-one-five – 115 cases. There are no new deaths reported – thank God – so that number remains at 12. So again, grand total from day one, 115 cases, 12 people passed away, no new cases since August 3rd.

Now, three more people have been discharged from the hospital. So it's now 79 of that 115 have been treated and discharged and are well.

Also have an update – this is a revision of the number of sites in the impacted zone – and again, we'll be happy to talk about any questions about in the zone versus out of the zone – but in the impacted zone, in the area determined by the Department of Health to be the area where this outbreak has been concentrated, yesterday reported 12 total sites where we had a test positive for the bacteria. That number has now been reduced to 11. One of the sites actually proved to be outside the boundaries of this zone. It still did test positive, but separate from this outbreak, so that number is 11 now.

We will still need to update you one more time as the final reports come back from the lab on the various sites that have been tested, because there's still a few tests outstanding. So we're going to have a grand total final number hopefully in the next couple of hours.

So, again, that brings the total number of buildings in the impacted zone that have cooling towers to 38 – from 39 to 38. As we reported to you yesterday, 22 tested negative. Now 11 tested positive. 5 more we're waiting for the test results.

A couple of words in Spanish –

[Mayor de Blasio speaks in Spanish]

With that, we welcome questions.

Dave.

Question: Mayor, it was either you or Dr. Bassett yesterday said basically you still believe that it's going to be probably one, maybe two of the original five towers that were inspected will probably be the one where this all began.

Mayor: Correct.

Question: Do you feel that way today? Especially about the Opera Hotel.

Mayor: Yes.

Question: On that one specifically. And is it [inaudible] cases that we've seen there? And have you also – I don't know if you've gotten the note about the owner of the –

Mayor: Well, let's do the first one first. The Department of Health obviously has been tracking this situation now over several weeks. And when they come to their initial conclusions, it's based on a lot of different pieces of information. I want to give you a quick review of that. Obviously, I don't have all of the information that Dr. Bassett has, but I've talked to her several times – and Ram, feel free to jump in with any clarifications. The first thing to say, we said yesterday, we said Saturday – until the final tests come back from the state lab, where literally you'll be able to see detailed information – and Ram can break this down for you – what specifically happened, patient by patient, site by site, and then you can do matching. Until all of that comes back, we can't give you 100 percent definitive answers, but what we do know is, one, we have a simple mapping of where the cases occurred – in this case, represented by the residence of each patient. Again, we're not going to give you patient names and addresses – we're going to give you broad information. But we mapped and showed publicly the broad map of where those patients lived and how that correlates to the sites that tested positive. And then, maybe, Ram, again, I'll say it in layman's terms, and I'll have you interpret the temporal, spatial analysis, which is literally – you know, Mary Bassett's talked a lot about the Disease Detectives. They're taking a lot of information in. When were things reported? Where did they occur? They're talking to patients about where they were physically. They're blending all that information trying to see what it tells them. It keeps coming back in particular to the original five sites, and especially to that one site, but we will give – there's going to be a real intensive after-action report on what happened here, obviously, because we've never seen an outbreak like this before, so there's a lot of lessons that'll be learned. Final judgments will come when all tests are coming back. Why don't you speak?

Dr. Ramanathan Raju, President and CEO, Health and Hospitals Corporation: Yes. I think, mayor, you said it all well. We take –

Mayor: Well, why don't tell them what a temporal spatial analysis is.

Dr. Raju: Temporal spatial analysis is we take the number of patients who are infected and then we chart them, plot them around it, and then we plot all the positive towers, and then we make a determination – if most of the patients are around a tower, then we make a deduction that's probably that is one of the things. That's what we are doing now. But as mayor said very clearly, we have to wait for final analysis to complete before really able to say this positively, but it looks definitely like there is a concentration, again, around one positive tower, and that is [inaudible].

Question: The other part of my question is, as you probably have heard, the owner is pretty bent out of shape with the city and says the city hasn't helped them. He wants to know the numbers and the names of the people.

Mayor: Well, that's not appropriate.

Question: What do you – what do you tell –

Mayor: It's just not appropriate to give out patient information. We're not going to do that. So let's be clear – I'm sorry he's upset, but the bottom line is from what we know – we know that this site tested positive – no

one's contesting that. From everything we know, this was one of the major contributing sites. Now, when we do our after-action report, we're going to go over everything. Were inspection done? Was cleaning done previously? Was it done properly? To be fair to any building owner, they contract with someone – maybe it's their own maintenance staff or maybe it's an outside firm. We have to go back and test those records and see if things were done properly. But what we can safely say here is something has happened here that we've never seen before – and we've got to get down to the bottom of it, and I would think anyone who owns any of these buildings first concern would be for the health and welfare of their fellow New Yorkers – and that should be the focus – helping us figure out what we have to learn to get to the bottom of this. But clearly, what the city did was identified immediately this was one of the sites – it was one of the very first sites identified. And it was cleaned immediately. That was our obligation – to find it and clean it and we did that.

Question: Mayor, one of the things that the owner of the hotel said was that it's been a frustrating experience and they've only been able to talk to low-level people in your administration. I mean, is that what happened?

Mayor: I don't – honestly, with all due respect to the folks at the hotel, I don't know why a such great concern for the owner of a hotel when we're talking about a disease outbreak that's affected so many people. That's our concern. I don't know who he's spoken to. I know one of my senior folks spoke to him yesterday. We'd be happy to have any number of people speak to him. But let's put the horse before the cart here. We care about the people who've been affected by this disease and their families, and we want to make sure no one else catches this disease. That's where our focus should be.

Question: And I guess just to continue with this just for now –

Mayor: If that's what you guys want to talk about. I find it really interesting that the hotel owner's feelings were more important to you than what are we doing to stop a disease, but feel free.

Question: I guess what he was saying was he felt as though they couldn't get basic information from the Department of Health. Then someone leaked to the New York Times that [inaudible] –

Mayor: No. That's – let's be clear. Again, I'm – forgive me, guys, but you've really got to pay attention to what's important and stop following these smaller stories. This map has been given out to you guys for days. It's pretty clear what the map says. The information was becoming increasingly available. It is a matter of public information. It's our obligation – if we didn't give out information, you guys would rightfully say why aren't you telling us where the sites are and what conclusions you're coming to. So I'm sorry – I'm not going to allow you to do a double standard here. We erred on the side of transparency and disclosure – and that's the bottom line. And that's much more important than the feelings of this individual.

Question: Mayor, at every press conference I can remember you've thanked people for their leadership, you've talked about how people are cooperating. You called us into your office a couple of weeks ago to complain that the governor's office was not cooperating with the city. So I'm wondering why you think it's an invalid question to ask whether the governor [inaudible] –

Mayor: Oh, I didn't say it was invalid. I just said I wasn't going to answer it right now. We're focused on this crisis. And what you should know is that city and state officials are talking constantly and working together. That's what matters.

Question: But why – why won't you answer the question?

Mayor: Again, it's my choice which answer I want to give. My answer right now is we're focused on this outbreak – not personalities, not politics.

Question: In terms of the City Council legislation, I know you said before you don't have an exact count of how many cooling towers there are in the city. What is the plan to actually find all of these towers and account for them?

Mayor: Well, the commissioner's order is the first point. The commissioner's order makes abundantly clear that now, in the next nine days, that every building owner has to identify and register and clean their tower. So that, to me, is going to be the first wave – I mean, it's obvious – that's the first wave of activity. We have had tremendous cooperation from building owners. We don't have – have not heard of a single report of a building owner resisting at any point the – resisting cleaning their tower or inspecting their tower. It's – again, as I said yesterday, it's in their interest to get down to the bottom of this and make sure it doesn't exist in their building. And obviously, it's in their interest to be able to say we found nothing or our tower is clean and that's certified. So I expect tremendous cooperation from building owners and managers. That will now proceed over the next nine days. And of course, with that, we're going to get a beginning count. The legislation will obviously mandate not just for existing cooling towers, but any new cooling towers that they must be registered before they go online. That's another important reform.

Question: Mayor, is there a – like, a division here between the city's handling of the impact zone and then the state is doing outside of the impact zone. Is there some sort of division of labor?

Mayor: It's a good question. I appreciate that question. Again, the two governments are talking constantly – and I mean constantly. Dr. Zucker and Dr. Bassett are talking all the time. Their staffs are talking all the time. My staff and the governor's staff are talking all the time. It's very important to realize that in the midst of a challenge that affects our people, the two governments have a great deal of ability to get together on the practical work that needs to be done, and that is happening right now. We have put our focus on the impacted area – and I want to explain this again, and I really want people to hear it, and I appreciate that you've done your homework on this disease – right now, in cities all over the country and in New York City, there is a presence of Legionnaires' in buildings and it's having no impact, and we're not hearing about it, and there's no reason to even know it's there. This is the first time we've seen anything like this in terms of a concentrated outbreak. As Mary Bassett has, you know, said repeatedly, it's a form of pneumonia, and pneumonia is a common part of our society – and Ram, you'll jump in and clarify anything that you think would be additional information. So when the commissioner's order is fully implemented, you will hear about additional locations that have Legionella and have been addressed. And I think in many, many, if not most of those cases, there will be no impact felt by anybody. And that's been true for years and years in this city. Again, this is the only place – where we're standing right now is the only neighborhood that's ever seen a sustained outbreak like this – for the first time in 40 years that we've known about Legionella. So, I think the bottom line there is our focus has been finishing the work in this affected area. As you know and the reporting has indicated, even if you go back in the last year, there's been other places in this city where there were smaller incidents, but nothing comparable to this. We deal with each and every one of those, obviously, but the focus here is to once and for all get to the bottom of what happened here, and make sure that every last piece of the equation is addressed. Meanwhile, the state has brought in resources, which we appreciate. They're going in areas around, outside the impact zone – and that's good. That's additional information for us. They're doing additional cleanings. That's all to the good. But the real impact in terms of citywide reach will be that the commissioner's order over the next nine days will require every single cooling tower in all five boroughs to have been cleaned. Then the legislation will set up a protocol for the rest of time for every one of those cleaning towers, but that's the progression.

Question: So the state, if they find a Legionella-infected [inaudible] outside of the impact zone, the state is handling the clean-up – it's being cleaned up immediately – [inaudible] –

Mayor: To be clear, I think we can safely say they're work is primarily – I don't want to speak for them, you can check with them – but primarily – and Ram, feel free to add – in the Bronx, outside the impacted zone. Neither they nor we are sending teams around the other four boroughs yet. So I think there is a complimentary effort in the sense of we're in the zone, they're working around the outside of the zone, all to the good. As we go into the next phase, we obviously – as I said yesterday, if we see any building that is not being addressed, we will do it ourselves. And if the state has resources to help us, we would welcome that. But the two staffs are constantly comparing notes now on what they find, and we're coming up with a clear, unified list. You have anything you want to add?

Dr. Raju: No, I – just want to – just want to add that, you know, as the outbreak is – is, you know, tapering, now are in the preventive mode of finding other boroughs, where there's towers, check them out, and make sure they're clean. That's what we are trying to do. So we are moving from a phase of managing outbreaks, which is continue to taper – we have still been concentrating on that – but at the same time, you're also trying to make sure the preventive measure, which is being implemented.

Question: One more question –

Question: Mr. – Mr. Mayor, you said to the seniors in the other room – I think I've got this right – 'We're confident the Legionnaires' outbreak is now ending.' How high is your confidence about that, and what's it based on? What data are you – what's the lead piece of data that you're looking at?

Mayor: I'll start and Ram may want to follow-on. I want to also give you one very important reflection – and I hope all of you, I think, want to know what the people are thinking, and the mood of the people here in the area affected. Oh, I – I don't – what would you say? 40 or 50 seniors in that room? One gentleman asked a question – it was, 'was there some kind of inoculation you could take for this?' and the answer is no. We explained that to him. But other than that, every single – literally every single senior I talked to understood that things were being addressed. I didn't see any sense of fear or concern. I saw a high level of understanding of what the situation was and what to do if you had symptoms. So I actually think we should remember something – the people are often ahead of all of us – the media, the government – the people often get the point a lot quicker. I think the people have heard the public outreach over these last few weeks. They understand the situation is being addressed. And they understand what to do if they themselves confront the symptoms. On the question of our confidence, it's – we went into a lot of detail on this yesterday. Based on the fact that it's now been a week-plus since we've had a new case, based on the fact that we continually see more evidence that the original sites were the cause – and they were cleaned on July 30, which means that that incubation period is now running out – we have good reason to believe that this is tapering off. No one is saying – a couple different things – no one's saying there couldn't be a new site, because Legionella is in the atmosphere – and Ram is going to talk about this – I want you to give a little more sense of sort of how this exists in our world and around our city. So of course a new site could develop, but that's true anywhere. Based on this as a concentrated outbreak, all the signs we have that this is tapering off. We will get the test results back from the state, particularly on those original five sites, and that's going to tell us a lot – if we can confirm our thesis of where this came from or if we get some additional information. And again, as we go around the city with the commissioner's order, I'm not going to be surprised if I'm giving you updates that Legionella was found in other parts of the city and addressed immediately and there was no health impact whatsoever. So that's why – that's why we're confident, but it's also important to understand – it can be in a site, but not affect people. Why don't you explain that a little more?

Dr. Raju: Sure. You know, Legionella is in the air, it is in the water, it is in other places, but people don't get sick – not that everybody – it's been there for many, many, many years, right? Now and then there's an outbreak comes in, suddenly the cluster of patients happens, then we investigate why it happened, where it came from, and try to remedy that. So this is a third most common cause of pneumonia in this country. This is not something unusual bacteria, like Ebola. This is a real common bacteria, which we deal almost on a regular basis in our emergency department. To go back to what you said – based on – I'm a – I'm a scientific guy. Based on the eli-curve, the data – based on the data, what we see, right – and what we see on the front-lines – in our emergency departments – less number of patient pneumonia. At the height, Lincoln Hospital, which rarely took care of a greater number of patients with Legionella, who came to Lincoln, which is – was like a hospital, which take a lot of patients – at the height of this outbreak, we had, like, 30 patients in the hospital, and 12 of them were in the ICU. Today, we have two patients in the ICU. So what is based on what we see in the frontline – what the data shows, right? We're basically saying, okay, it is tapering off, right? That's what we're trying to say. So I think we need to put it in the right context.

Mayor: Can you – I don't know if you have this answer, I don't want to put you on the spot – it's the third most typical cause of pneumonia – do you know what number one or number two are?

Dr. Raju: It – it depends on the – the various communities. It depends on what is in Bronx, maybe different [inaudible] –

Mayor: But just to give it some kind of sense of what [inaudible] –

Dr. Raju: You know, [inaudible] is one. Staphylococcus is another one, which is a common pneumonia. It's depending on the various places, right? There are sometimes we get the bad bacteria, like [inaudible] bacteria comes in. So there are a lot of bacterias which cause pneumonia. And then there is a group of pneumonia which are caused by viruses – that is a big number. So we – we get all this different [inaudible]. It also depends on the area. Some part of this, it is more common, and some parts other pneumonia is more common.

Mayor: Someone who hasn't gone yet – yes.

Question: Do you agree with the governor's proposal that there has to be a statewide protocol for this going forward?

Mayor: I think it would be important after this experience for there to be both national and state guidelines. I think we certainly would've benefited from that in the past. We would've benefited from our own health department having guidelines. So, you know, one of the things I'm trying to say here – and again, I have worked for the federal government, and I've worked closely with the state government for many years – sometimes it's important to say, you know what, this is new information, and all three levels of government did not see previously a reason to address this differently, but now we have all the evidence we need, and we're going to pass the strongest law in the country this week. And from everything we can tell, there's no other major city in America that has a law like it. I suspect you will see other cities start to do the same thing, but I think state rules would be helpful, and I think federal rules would be helpful.

Question: You're saying that the state and the city worked together on this. How come [inaudible]?

Mayor: Again, the – I want you guys to try to not dwell on the superficial, with all due respect. The professionals are talking all the time. I mentioned to you – I was, Saturday, watching a conversation on the phone with Dr. Zucker and Dr. Bassett. They're talking all the time. The staffs are talking all the time. Sometimes it takes a while to get coordinated. That's normal. Different focal points, there's been a division of labor that's being increasingly worked out. I think you're going to see more and more common information. You saw the release yesterday – the joint release between the two health departments. I think you will see increased coordination. The difference here – and it's very important to recognize – between this scenario and the Ebola scenario a lot of you reported on is we got a lot of warning on the Ebola scenario. We were all prepping and training – I talked about at the time, FDNY had gone through the drills, exactly what they ended up doing with Dr. Specter, they'd been drilling for weeks. The different agencies had all been coordinating – city, state, federal – knowing that New York City might be the kind of place that would end up with it. This outbreak came with no warning and we were literally well into the outbreak until enough evidence even presented itself to know that the outbreak had reached that kind of level. So I think it's fair to say that sometimes it takes the different levels of government a while to figure out the best way to work together, but that's happening now.

Question: I covered this, the Legionnaires' outbreak this weekend, and I was in the Bronx, and I can honestly say, like, nine out of ten people still don't know. And there is that huge language barrier.

Mayor: Yes.

Question: Do you think the – what are trying to do to overcome that barrier, because a lot of people don't watch the news, they don't read the papers, and they don't have internet?

Mayor: Well, let's be clear – and this is a bigger question of what government can do – we don't pretend that we can walk into everyone's living room and have a chat with them. We have to do what we can with the tools

we have. We've been going door to door in apartment buildings. We've been going to stores. We've been doing robocalls, town hall meetings, telephone town hall meetings, obviously working with elected officials, community leaders, clergy. That, to me, reaches a lot of people. But I agree with you – there's a certain number of people who don't have internet, aren't reading the papers, aren't going to get the information as quickly. That being said, we have some evidence that the message has gotten through – exactly what Dr. Raju said. Clearly, a lot of people got to care quickly. We saw a spike in people coming for care, and that helped us to turn the situation around. We now see fewer and fewer people who need care – that's a very, very good sign. But I think public information in an outbreak like this is something we have to do constantly. We're doing a course in English and Spanish. And we're going to keep doing it until this is entirely resolved here in this community. I think we also have learned a lot from this experience about a new way of reaching deeper into communities, and that's going to become the template going forward.

Question: Do you think that contributed to the outbreak? Is that why –

Mayor: The outbreak came because of a bacteria. That's the truth – and one that had never manifested in this fashion before. I have said before that this is a community that has more than its fair share of health problems. We know this. It's a very poor community – it's one of the poorest communities in the country. A lot of people have not gotten the healthcare they deserved over not just years, in some cases decades of their lives. Yes, language barrier adds an additional complication. I think the fact is this happened for a natural reason, obviously. Our ability going forward will be improved by this experience to make sure that we get in very deeply into the community to get information to people so that we have the best chance of getting them the care they need. But let's face it, I said this is a disease that does discriminate. It has a bigger impact on older people. It has a bigger impact on people with preexisting healthcare conditions. And that's exactly what happened – it found the most vulnerable.

Okay. Yes.

Question: Maybe this is a question for the doctor – you know, the mayor has said that this is an unprecedented and new situation the city's never seen before. Epidemiologically, can you talk about your quest to find out why this is happening and why this is so unprecedented?

Dr. Raju: Again, it's a lot of speculation. We can speculate, which I don't want to do. But the fact of the matter is, as I said, the bacteria and the human being exist together. Right? Suddenly something changes in the [inaudible]. So that immediately starts infecting a lot of people. We figure this out – we take care of it. Right? That is what the spikes come in, you know. We're all fine and everything then suddenly there's a spike. Then people get affected. Then we get rid of it. Then we clean that up. So this is something which has been seen repeatedly in any kind of infection in the world. It is not only here – everywhere. But, as the mayor said, when these kind of spikes come in, the most vulnerable – medically-vulnerable people get affected because they don't have enough resistance as much as younger person. That's what we're seeing here. So, what we're seeing here is nothing unusual epidemiologically, but the fact of the matter is that 12 people died, and it's a big concern to us because there are 12 families. Just yesterday, mayor said and the commissioner said. So, we take it very, very seriously. We really want to make sure that we get to the root of this and clean this up. We believe it worked – so –

Mayor: I just want to – I think the question is without speculating any examples or ideas on how something that has been so common could turn into something this big? What types of things might cause that?

Dr. Raju: You know, part of it could be, again, we have to find out what the reason is. The bacteria changes – the bacteria changes is [background chatter] – the genetic code of the bacteria sometimes changes. It's a slight change in it. So if we have antibiotics – antibodies to that particular variety. But when it changes a little bit we don't have enough antibodies. Then it kind of spikes. So, a lot of times what happens – the bacteria is the same it kind of changes genetically a little bit. So we need to find out, but that is one of the causes why a bacteria which has been perfectly fine suddenly gets more virulent.

Mayor: Hold on, Hold on, Hold on. Come on. Come on. Don't insult his intelligence or mine. He just said he's not going to speculate so why would you ask a question like that? Let's be serious. This is an outbreak of a disease. Can we be serious please and try to inform people? Last question. Yes, sir.

Question: Mayor, you said the outbreak had already progressed before the city recognized it. And I think you said, previously, the outbreak actually started on July 12th was the date?

Mayor: I don't know if Ram has the breakout of the progression. Again, there's going to be –

Question: What happened?

Mayor: Let me finish please. There's going to be a very extensive after-action report. And the fact is people contracted this before there was any way to know they contracted it. Then the signs started to manifest. As we've said many times – from time to time, we would get cases, but they would be isolated and people would recover. Something different happened here. And we've got to get down to the bottom of that. But it took days for that even to be evident to begin with. Once we saw a pattern, that's when all of the testing of the buildings began. That's when the disease detectives started interviewing people. We can get you that exact tick-tock.

Question: July 12th...

Mayor: Again, we can – I'm not going to speak about the details. I don't have them in front of me. The health department will go back with them and get you that exact progression. But the fact is it did not announce itself. We have had people with Legionnaires' disease before who recovered fine. Something different happened here and we've got to get down to the bottom of what it was.

Question: I had spoken to an AC tech once, and he speculated that one cooling tower could have infected the others. Have you guys – is that possible – that one cooling tower could have kind of been ground zero and infected...?

Mayor: Again, we're not going to speculate – if you have a medical explanation of if that's either conceivable.

Dr. Raju: It all depends on how close they are to each other. So I cannot really tell you whether they infected each other.

Mayor: This is the last one, go ahead.

Question: Have the regular antibiotics been working?

Dr. Raju: Yes, that's right. We have a very powerful good antibiotic. That's why people are getting better.

Mayor: Right, that's why we have 79 people who have been discharged from the hospital, obviously. For the vast majority of people who have contracted this, they have been treated and discharged with no ongoing impact. So the antibiotics are working.

Thanks, everyone.

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