Edited by Jennifer Sills

Investigate the origins of COVID-19

On 30 December 2019, the Program for Monitoring Emerging Diseases notified the world about a pneumonia of unknown cause in Wuhan, China (1). Since then, scientists have made remarkable progress in understanding the causative agent, severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), its transmission, pathogenesis, and mitigation by vaccines, therapeutics. and non-pharmaceutical interventions. Yet more investigation is still needed to determine the origin of the pandemic. Theories of accidental release from a lab and zoonotic spillover both remain viable. Knowing how COVID-19 emerged is critical for informing global strategies to mitigate the risk of future outbreaks.

In May 2020, the World Health Assembly requested that the World Health Organization (WHO) director-general work closely with partners to determine the origins of SARS-CoV-2 (2). In November, the Terms of Reference for a China-WHO joint study were released (3). The information, data, and samples for the study's first phase were collected and summarized by the Chinese half of the team; the rest of the team built on this analysis. Although there were no findings in clear support of either a natural spillover or a lab accident, the team assessed a zoonotic spillover from an intermediate host as "likely to very likely," and a laboratory incident as "extremely unlikely" [(4), p. 9]. Furthermore, the two theories were not given balanced consideration. Only 4 of the 313 pages of the report and its annexes addressed the possibility of a laboratory accident (4). Notably, WHO Director-General Tedros Ghebreyesus commented that the report's consideration of evidence supporting a laboratory accident was insufficient and offered to provide additional resources to fully evaluate the possibility (5).

As scientists with relevant expertise, we agree with the WHO director-general (5), the United States and 13 other countries (6), and the European Union (7) that greater clarity about the origins of this pandemic is necessary and feasible to achieve. We must take hypotheses about both natural and laboratory spillovers seriously until we have sufficient data. A proper investigation should be transparent, objective, data-driven,

inclusive of broad expertise, subject to independent oversight, and responsibly managed to minimize the impact of conflicts of interest. Public health agencies and research laboratories alike need to open their records to the public. Investigators should document the veracity and provenance of data from which analyses are conducted and conclusions drawn, so that analyses are reproducible by independent experts.

Finally, in this time of unfortunate anti-Asian sentiment in some countries, we note that at the beginning of the pandemic, it was Chinese doctors, scientists, journalists, and citizens who shared with the world crucial information about the spread of the virus—often at great personal cost (8, 9). We should show the same determination in promoting a dispassionate science-based discourse on this difficult but important issue.

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Ban veterinary use of diclofenac in Europe

In Europe, vulture recovery has been an important conservation success story (1). This success may now be jeopardized by the use of diclofenac in Europe's pastoral landscapes. Although diclofenac had already caused a rapid and catastrophic 95% decline in Asian vulture populations (2), the non-steroidal anti-inflammatory drug was approved for veterinary use in Spain in 2013 (3). Although measures for the safe disposal of carcasses of livestock treated with diclofenac are supposed to prevent avian scavengers from feeding on contaminated carrion (4), a Spanish cinereous vulture (Aegypius monachus) was found dead,

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