

It took me three days to find three people racing against the incubation period of a virus that had already killed one. I had to step outside my disease detective training and act more like an actual detective. In the process I had to ask myself, where is the line between public good and individual privacy? And have I crossed it?

In October of 2024, a man in Iowa died of Lassa fever. Rather than using his real name here. I'll call him David. David had been visiting family in West Africa, where Lassa is endemic, and while he was there, he had been staying on his family's farm doing some work. What probably happened, and he almost certainly wasn't aware of it when it did, is he crossed paths with a rat infected with the virus.

Not long after that, he got on a plane back to the US, and a few days after he landed in Iowa, he started to feel sick. David's symptoms, as they do for many lots of patients, started relatively mildly. Fever, cough, cold and flu-like symptoms. But Lassa fever isn't a cold or flu. It's a viral hemorrhagic fever.

And eventually he got worse. He was admitted first to one hospital, and then as he got sicker and sicker, he was transferred to a second hospital, where he died on October 27th. For David's family, who had been at his bedside, his death was the end of one chapter of this story, as they had sat with him and held his hand as he was dying.

If they themselves had been infected with the Lassa virus, the clock of the incubation period was already ticking, and that is where the public health response began. I arrived in Iowa on November 2nd, six days after David died, and the public health response was already in full swing at that point. A major focus of the early investigation was contact tracing and daily symptom checking of people who had potentially been exposed.

Someone with Lassa fever isn't considered to be infectious until they've already started showing symptoms. So, the idea is that if you can get people who have been exposed into quarantine, then even if they do get sick later, not only do they get the care they need faster, but they also aren't going to transmit that infection to anyone else.

And Iowa State and local public health staff had already done so much of this work before we even got there, but there was still work to do because hospital staff had seen three visitors at David's bedside in the day or two before he died. No one knew where they came from or where they went after they left the hospital, but they knew they had been in contact with him when he was very sick.

And we needed to find those people fast. Because while the incubation period can range from just a few days all the way out to 21 days, the average is around 7 to 10. At six days since their last exposure, we were standing right on the edge of that 7 to 10 day window. My assignment was to track those people down.

Now, to start with, I had about the same amount of information as you guys do right now, which is to say, essentially none. But what I did know was the names of the hospitals David had been admitted to. So, I started by requesting security footage. Within about three hours, hospital staff had gotten me video from the lobbies, and I got my first look at my mystery people.

There was a woman wearing a pink top, a tall man, and then a second woman wearing a long black coat. I also got video from the parking lots showing the cars the visitors were driving. And after an initial look at the license plates, I realized that most of them were already accounted for by people we already knew about.

Like, for example, David's girlfriend, except for one, a silver SUV with a license plate that was too blurry to make out. Now, I had some initial success. After looking at the security footage, I realized after checking on one of the license plates and comparing the lobby footage to some photos I could find online, that the woman in the pink top was almost certainly David's mom, who we already knew about, and she was in quarantine, and she wasn't sick.

So that was one person down.

But as I wrapped up my first day in Iowa and moved into my second day, I still felt very acutely that the clock was ticking. Now, I think it's fair to ask at this point, you know, why didn't we just ask David's mom, who was with her in the hospital? Like, wouldn't that have been simpler than this whole investigation that we were embarking upon?

Yes, it would have been. But the issue with that is that this family had just lost their loved one. She had just lost her son. And instead of letting them come together and support each other, we were saying, you have to quarantine. You can't see each other. You can't even have a funeral. So, perhaps understandably, they weren't eager, at least at first, to share with us the names of additional family and friends.

So back to the internet. Looking for more leads. David had many publicly viewable social media profiles, and he had maybe 200 friends on each of them, so accounting for some degree of friend overlap. I would say I conservatively estimate that I looked at maybe a thousand profile pictures, trying to compare them to the security footage to see if I recognize either of these people while I was doing that.

I was also trying to chase down this silver SUV lead. My thinking was that if I could find that car and get a better picture of the license plate, that I could maybe find out who it was registered to and then get an address. And I wasn't going to find that car in the parking lot of the health department.

So not really knowing what else to do at this point. I drove to the addresses of a few of David's known associates to essentially stake them out, to see if I could spot the silver SUV in the driveway or on the street outside. So, I drive over there and I'm sitting in my rental car trying to look inconspicuous.

And of course, I don't spot the SUV that way. And while I learned a lot about David's life from his Facebook pages, I did not find within them the two people that I was looking for. But I was still working with the security footage, too. And I had kind of zoomed in and enhanced to the extent possible, the images, and I was circulating them to a few people in the community who had indicated they were willing to help us.

Like, for example, we had a pastor and a police officer, to see if they if they could recognize either of these people. And one of them did he recognize the man definitively said, I know who that is. And he had a name and an address. So that was two down. And I only had one person left to find the woman in the black coat.

But how was I supposed to find her? I had basically reached the end of my very limited detective abilities at this point. And I'll remind you, we're now on day seven after her last exposure. Average lasts the incubation period 7 to 10 days. As I wrapped up my second day in Iowa, I felt like we were running out of time.

But that's when I got lucky. A tip had come in essentially from another community contact with a potential name for the woman in the black coat. I'll say that the name we were given was Agnes, not her real name. But that was just a name. Not too useful by itself. I mean, I needed to physically find this woman and make sure she was okay.

But I had learned that if you have a name and access to the internet, you can find all sorts of things. So, I looked into it a little bit, and I got three potential addresses associated with that name. And there was nothing left to do at that point except start knocking on doors. The first two addresses I went to were dead ends, but I pulled up outside the third and I saw a silver SUV parked out front.

I walked up to the door, and I knocked, and a young man answered. Now I was looking for an older woman. So, I just asked, you know, is Agnes here? And he goes, yeah, that's my mother-in-law. I said, okay, can I talk to her? And he is kind of side eyeing me a little bit, but he was just like, yeah, okay, I guess.

And he called downstairs. And this woman comes out of the basement, and she walks about halfway up the stairs looking at me, and she stops. Now, up until this point, I had only known her as an image on a computer screen, but I recognized her immediately. That was the woman in the black coat. In three days, I had gone from nothing. No leads, no information, no nothing...to standing in this woman's living room, having a face to face conversation with her. And most importantly, she was healthy. She wasn't sick. We had not been too late. But I felt like I had to make absolutely sure that it was her. So, I asked her if she would look at a photo for me.

I pulled out my laptop and pulled up one of the surveillance images, and I said, is that you? And the horror on this woman's face as she looked at that picture, I realized I had no idea how to explain to her why I was standing in her house with literal surveillance footage of her on my laptop. And as she looked at me, I had to ask myself, am I the bad guy?

I'm a nice person, okay? But how do I tell her that? How do you say to someone no, no, no. I know that. To all outward appearances, I look like a stalker right now. And I'm standing in your living room. But if you got to know me, I think you would really like me. Genuinely. All I wanted to do was make sure that these three people were okay.

But in the process, I had to learn what kind of car they drove, where they lived, their children's names, their grandchildren's names, where they worked, where they went to church. And I didn't have some secret repository of information. I mean, it's amazing what you can find on the internet if you're motivated. And I think you can make the argument like we did, that the goal of protecting the public from infection with a viral hemorrhagic fever justified my actions.

I mean, there's not a lot of good information out there about the risk of person-to-person loss of transmission in a situation like this. And I think if you ask a lot of people, they would say, yes, some amount of infringement on privacy is okay in the face of something so scary. But I also invite you to consider how much you would hate it if I did that to you.

If I showed up at your house and my mask and my gloves with your name and your photo on my laptop, and I said, yeah, I know I haven't really respected your privacy, but it's okay because my intentions are good, so my actions must be justified.

For as tragically, as this story started, I think it ended positively. First off, there were no secondary cases. No one else got sick. But second, once we had identified these people and gotten them into quarantine, the state and local health department staff provided so much support and also honestly, just treated them with so much respect that I think it went a long way towards showing, not just saying, but actually showing that our intentions were good.

I don't think I was the bad guy in this story, but in Agnes's eyes, for at least a minute, I definitely was. That hurt a little bit, honestly. But I think it also was a good reminder to me, and one that I'll pass along to you all now that there is a line somewhere in there between the public good and individual privacy and agency.

And we might have to walk right up to it in our work. The people we serve, who we are genuinely trying to help, are counting on us to know where that line is. So, I think we have to ask ourselves, how far should we go to protect the health of the public? Thank you.