

NEW YORK TIMES BESTSELLING AUTHOR OF
POLITICAL SUICIDE

MICHAEL
PALMER



RESISTANT

A NOVEL

MICHAEL PALMER

RESISTANT

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*Dedicated with love
to my sons, Matthew, Daniel, and Luke*

One of the duties of the State is that of caring for those of its citizens who find themselves the victims of such adverse circumstances as makes them unable to obtain even the necessities for mere existence without the aid of others. That responsibility is recognized by every civilized nation.... To these unfortunate citizens, aid must be extended by government—not as a matter of charity, but a matter of social duty.

—FRANKLIN D. ROOSEVELT, FIRESIDE CHAT, 1938

Throughout the course of human history people have endured uncertainties brought on by illness, poverty, disability, and aging. Economists and sociologists take delight in labeling these inevitabilities as threats to one's economic security, when in truth they are the price each individual must pay to fund their existence.

—LANCASTER R. HILL, *100 Neighbors*, SAWYER RIVER BOOKS, 1998

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PROLOGUE

A heavy pall had settled over Boston's White Memorial Hospital.

Becca Seabury's condition was deteriorating.

The hospital grapevine was operating at warp speed, sending the latest rumors through the wards and offices of the iconic institution, chosen two years in a row as the number-one general hospital in the country. This morning, in all likelihood, the decision would be made—a decision that almost everyone associated with White Memorial, from housekeeping to the laboratories to the administration, was taking personally.

Before long, the team of specialists—orthopedic, medical, and infectious disease, would either choose to continue battling the bacteria that the press and others had begun calling the Dooomsday Germ, or they would opt to capitulate and amputate the teen's right arm just below the shoulder.

In room 837 of the Landrew Building, a group of carefully selected physicians and nurses had been assembled. At the doorway to the room, as well as at every elevator and stairway, security was keeping the media at bay, along with any but essential personnel.

From the day, more than two weeks ago, when Becca was operated on to clean out infection from the site of her elbow repair, she had been front-page news.

FLESH-EATING BACTERIA COMPLICATING CHEERLEADER'S HEALING

The seventeen-year-old, captain of her school's championship team, had shattered her elbow in a spectacular fall during the state finals. The violent injury was chronicled on YouTube and immediately went viral, making Becca something of a household name around the globe. A successful reconstruction by Dr. Chandler Beebe, the chief of orthopedics, followed by several days of IV antibiotics, and the conservative decision was made to wait one more day and discharge.

That was when Becca Seabury's fevers began.

The Landrew Building, less than two years old, was the latest jewel in the expanding crown of White Memorial. The eighth floor featured four negative pressure isolation rooms—airtight spaces except for a gap beneath the door, with a ventilation system that brought more air into the room than allowed out. By the time a nurse escorted Becca's family to the waiting area, there were seven gloves, gowns, and hoods in the spacious room.

Chandler Beebe, six-foot-six, towered over the rest.

Nearly lost among them, motionless on her back, was a pale, fair-skinned young woman, with hair the color of spun gold. Her lips were dry and cracked and the flush in her cheeks looked anything but healthy. An IV with a piggybacked plastic bag of meds was draining into her good arm. The temperature reading on her chart was 102.5 degrees. It had been as high as 104. Her blood pressure was 85/50.

Chandler Beebe, once a guard for the Harvard University basketball team, was generally unflappable. Now, beneath his mask and hood, he was nearly as pale as his patient. It was the smell, he knew, that was getting to him. Despite his years operating in war zones and medical missions to third-world countries, he had never been fully able to accustom himself to the odor of pus and of rotting flesh. Glancing at the monitor, with a nurse holding up Becca's arm, he began unwrapping the gauze he had placed around it eight hours before. Beebe had two teenagers himself, a boy and a girl, both athletes and excellent students, and as brave and well-adjusted as this girl. But he couldn't get his mind around the image of either of them being at the crossroads of decisions like this one.

The progressive layers of bandage as they were removed were first damp with bloody drainage, then soaked. The ooze, from eight inches of filleted incision, reeked of untreated bacterial growth. The color of the flesh darkened. Twelve days before, Beebe and a surgical colleague had reopened the incision he had made when he did the initial, meticulous reconstruction. The infection had come on with the speed and ferocity of a Panzer attack. Fever, shaking chills, new swelling, intense pain, dehydration, blood pressure drop. Signs of infection in an enclosed space. There was no choice that day. The incision had to be opened, debrided, irrigated, and drained.

Now, it was time for another decision.

Becca Seabury's antecubital space—the inside of her elbow—looked like ground beef that had been left in the sun. Muscle fibers, tendons, ligaments, all basted in thick, greenish purulence, glistened beneath the portable saucer light overhead. Beebe heard his brilliant chief resident inhale sharply, and vowed to reprimand her for the audible reaction as soon as it was appropriate. In the next moment, he decided not to mention it.

"Becca, it's Dr. Beebe. Can you hear me?"

There was little response except a fitful moan. Beebe, his jaw set, looked across the bed at the chief of infectious disease.

"Sid?" he asked

Sidney Fleishman shrugged and shook his head. "As you can see, she's still toxic. No change in the bug, and no effect from every antibiotic in our arsenal. Her white count has dipped a bit, but there are no other signs that we're winning. We've gotten permission to try one of the most promising experimental drugs that is being tested on strep and MRSA, but this Doomsday G—this *bacteria*—like nothing we've seen. Strep, but not really strep, resistant to methicillin and vancomycin, and carbapenem."

"Conclusion?"

"I think we have some time. Not much, but some—especially with the infection still limited to her elbow."

Beebe inhaled deeply and exhaled slowly. Fleishman, as bright as anyone at White Memorial, was advocating a continued conservative approach with the addition of a new, experimental drug, which was showing effectiveness against methicillin-resistant staph aureus.

How much time do you think? Beebe was about to ask when Jennifer Lowe, Becca's nurse, standing at the foot of the bed, cleared her throat by way of interruption. She had been massaging lotion on Becca's left foot and now had turned her attention to the right one.

"Dr. Beebe, I think you'd better have a look at this," she said. "I didn't see anything here an hour

ago.”

She gently folded back the sheet and gestured to the foot. All five toes were reddened, and swelling extended two inches toward the ankle.

Beebe stepped to his right and inspected this new development—first with his eyes, then with his gloved hands.

“Sid?”

Fleishman studied the foot, then checked for swollen lymph nodes in their patient’s right groin—often a sign of expanding infection.

“Nothing yet,” he said, “but this is clearly new infection, probably seeded from her arm.”

Chandler Beebe ran his tongue across his lips and took one more breath.

“Jennifer, is the OR ready?” he asked.

“It is.”

“Call to tell them we’re bringing Rebecca Seabury down for removal of a septic right arm. I’ll speak to her family. Thank you for your efforts, everyone. My team, go ahead. I’ll meet you in the OR. Oh, and Jennifer, call pathology, please, and tell them we’ll be sending down a specimen.”

The room emptied quickly and silently. These were medical professionals—the best of the best. But every one of them was badly shaken.

Jennifer Lowe, thirty, and a veteran of half a dozen missions to villages in the Congo, bent over her patient. Lowe’s marriage to a physical therapist was just six months away. She was a sparkplug of a woman, the daughter and granddaughter of nurses.

“Be strong, baby,” she whispered. “We’re going to get through this. Just be strong.”

It was at that moment she felt an irritation—an itch—between the middle and ring fingers of her left hand. While she was at work, her modest engagement ring hung on a sturdy chain around her neck. She had eczema, but never bad and never in that particular spot.

Not all that concerned, she moved over to the sink and stripped off her latex gloves. The skin between the fingers was reddened and cracked.

CHAPTER 1

Liberty is worth more than every pearl in the ocean, every ounce of gold ever mined. It is as precious to man as air, as necessary to survival as a beating heart.

—LANCASTER R. HILL, *A Secret Worth Keeping*, SAWYER RIVER BOOKS, 1937, P. 12

“Two-oh-six ... two-oh-seven ... two-oh-eight...”

“Come on, Big Lou. It hurts so good. Say it!”

“Okay, okay,” Lou Welcome groaned. “Two-oh-nine ... It hurts so good ... Two-ten ... It hurts so good ... Oh, it just frigging hurts! My ... stomach’s ... gonna ... tear ... open ... Two-twelve...”

Lou was doing sit-ups on the carpet between the beds in room 177 of what had to be one of the bargain rooms at the venerable Chattahoochee Lodge. Cap Duncan, shirtless and already in his running shorts, was kneeling by Lou’s feet, holding down his ankles. Cap’s shaved pate was glistening. His grin, as usual, was like a star going nova. He had done three hundred crunches before Lou was even out of the sack, and looked like he could easily have ripped off three hundred more.

Every inch a man’s man.

Lou’s best friend, and for ten years his AA sponsor, was a fifty-two-year-old Bahamian, with a physique that looked like it had been chiseled by one of Michelangelo’s descendants. He had earned his nickname, Cap’n Crunch, from his days as a professional boxer, specifically from the sound noses made when he hit them.

It was April 14—a Thursday. Lou’s trip to Georgia had been ordered by Walter Filstrup, the bombastic head of the Washington, D.C., Physician Wellness Office (PWO), a position that made the psychiatrist Lou’s boss.

Filstrup’s sweet wife, Marjory, a polar opposite of her husband, was in the ICU of a Maryland hospital with an irregular heartbeat that had not responded to electrical cardioversion. But as one of two candidates for the presidency of the National Federation of Physician Health Programs, Filstrup was scheduled to address the annual meeting, being held this year at the lodge in the mountains north of Atlanta.

Wife in ICU versus speech in Georgia. *Let ... me ... think.*

Not surprisingly to Lou, Filstrup had actually wrestled mightily with the choice. It wasn’t until Marjory had an allergic reaction to one of the cardiac meds that the man turned his speech over to Lou along with his conference registration, and an expense account that would cover all Lou’s meals providing he only ate one a day.

Whoopee.

“You’re slowing down, Welcome,” Cap said. “You’re not going to get to three hundred that way.”

“I’m not going to get ... to three hundred *any* way.”

Cap, his competitive fire seldom dimmed, delighted in saying that most people’s workout was h

warm-up. Lou, nine years younger, and at six feet, an inch or so taller, never had any problem believing that. Their connection began the day Lou was checked into Harbor House, a sober halfway house in one of the grittier sections of D.C. Cap, given name Hank, was working as a group leader there while he cajoled one bank after another trying to scrape together enough bread for his own training center. Twelve months after that, Lou was living on his own, the Stick and Move Gym had become a reality, and the two friends, one black as a moonless night, and the other a blue-eyed rock jaw with the determination of a Rottweiler and roots that may have gone back to the Pilgrims, were sparring three times a week.

A year or so after that, following a zillion recovery meetings and the development of a new, infinitely mellower philosophy of living, the suspension of Lou's medical license was lifted, and Lou was back in the game.

"Okay, then," Cap said, "do what you can. It's no crime to lower your expectations. Only not to far."

"Does everything ... we do together ... have to be ... some sort of competition? Two-twenty . . . two-twenty-one..."

"I assume we're going to have breakfast after our run and I don't believe in competitive eating, that helps any."

"Of course. It would be the one area I could kick your butt."

The Chattahoochee Lodge had been built in the twenties for hunters and had been enlarged and renovated in 1957, the same year Elvis purchased Graceland. A sprawling, rustic complex, the main building was perched in the mountainous forest, high above the banks of the fast-flowing Chattahoochee River. As ecotourism boomed in the early 1990s, the place became a major destination for leisure travelers, birders, hikers, and convention goers, with rooms often booked a year in advance.

Lou, board-certified in both internal and emergency medicine, had never particularly enjoyed medical conferences of any kind, so it was a godsend when he whined about the impending trip to Cap and learned that his friend's only living relative was an aging aunt, living just outside of Atlanta. Working full-time in the ER at Eisenhower Memorial Hospital, and part-time with the PWO, Lou had more than enough in his small war chest for another ticket south. The quite reasonable rent for his second-floor, two-bedroom apartment down the street from the gym and just above Dimitri's Pizzeria helped make a loan to his sponsor even more painless.

Proof that the idea was a solid one was that Cap haggled surprisingly little over the bartering agreement Lou proposed—two months of weekly sessions in the ring for him, plus an additional four lessons for his precocious fourteen-year-old daughter, Emily. Cap would get the window seat.

Having to put up with Filstrup notwithstanding, Lou loved his job at the PWO. The pay was lousy but for him the irony of going from being a client to being an associate director was huge. The organization provided support and monitoring services for doctors with mental illness, physical illness, substance abuse, sexual boundary violations, and behavioral problems. Most new PWO contracts required the troubled physician to enter some sort of treatment program or inpatient rehab followed by regular meetings with their assigned PWO associate director, along with frequent random urine screens for alcohol and other drugs of abuse.

Lou was hardly averse to counseling and psychotherapy for certain docs, but he strongly believed

that, physician or not, addiction was a medical illness and not a moral issue. Walter Filstrup disagreed.

When Filstrup finally handed over his carefully typed speech and the conference program, the trip got even better. Not only would Lou and Cap have time for some training runs together in the mountains, but while Cap was visiting his aunt, Lou would be able to take a conference-sponsored guided tour of the Centers for Disease Control—the CDC.

More irony.

Lou had spent nearly ten months of his life in Atlanta and had never even been close to the world-renowned institute. The last time he was in the city, nine years before, was for the one-year reunion of his treatment group at the Templeton Drug Rehab Center.

It was time to complete some circles.

CHAPTER 2

One man can dream, a handful can plan, thousands can strike, but just a hundred, properly placed and effectively utilized, can reshape the world.

—LANCASTER HILL, *100 Neighbors*, SAWYER RIVER BOOKS, 1939, P. III

His name was Douglas Charles Bacon, but to the seven others participating in the videoconference, he was N-38. *N* for *Neighbor*.

The Society of One Hundred Neighbors, conceived in secret during the early 1940s, arose from political philosopher Lancaster Hill's treatise, *100 Neighbors*. Hill's masterpiece, and several volumes that followed it, were written in response to Franklin Roosevelt's economic and social legislation known collectively as the New Deal. Initially, there were only a dozen Neighbors, strategically placed throughout the country. But within a year, the one-hundred-member limit prescribed by Hill had been reached. One hundred neighbors. No more, and no less.

Bacon was a jovial, round-bellied Southerner, with a mind for numbers and an encyclopedic knowledge of Scotch. He was still a crack shot with a Remington, even after the hunting accident that had left him with a permanent limp and only two toes on his left foot. As the chosen director of the society, he was an ex-officio member of all seven of their current APs—Action Projects. From when he had been told just two days ago, AP-Janus, the most ambitious, far-reaching undertaking in the group's history, was in trouble. Bacon took a sip of Macallan 18, one of his favorites, and smiled thinly. No one who knew him had ever seen him lose his cool. Perhaps Scotch was the reason.

N-80, Dr. Carlton Reeves, was a professor of surgery at Michigan. When Bacon first learned of the Janus bacteria, he had assigned Reeves to look into it further. Later, when the stunning possibilities had become clear, he had made the physician the coordinator of the AP and helped him to form his team. It was Reeves who had convened this advisory committee videoconference.

The members of the Society of One Hundred Neighbors blended with those around them effectively as chameleons in a jungle. They wore business suits and ties to work, flannel shirts and uniforms or lab coats, and often carried briefcases. They lived in cities or towns in nearly every state and whatever their talents, were uniformly respected for the quiet skill they brought to their jobs. Beneath their varied positions and appearances, the members of One Hundred Neighbors were joined by a singleness of purpose.

They were all, by the most widely accepted definitions, terrorists.

The goal of the organization, a straight line from Lancaster Hill, was quite simple. By any means they were pledged to eliminate the suffocating government programs of entitlement that had brought America lurching to the brink of bankruptcy.

Bacon took the brief oath as director in 1993, taking over from the woman whose failing health had led her to relinquish leadership of the society. It was the year Bill Clinton had begun his first term.

president, and also the year Islamic fundamentalists bombed the World Trade Center. Bacon, registered Democrat and universally revered investment banker, had squelched efforts to put him on short list for a post in the Clinton cabinet. Too much visibility and too little mobility.

His office was in the North Tower of the WTC. However, he was away at the time of the lethal bombing. His vacation was hardly a coincidence, given that he had financed mastermind Ram Yousef and had chosen the day of the truck bomb explosion. The goal of the Neighbors at that time was the erosion of the public's confidence in the head of the House Armed Services Committee that would lead to his resignation.

“Are we ready, Eighty?” Bacon asked. “I’m certain Nine will be here shortly, so we might as well begin.”

Bacon’s face, like those of the others, was electronically distorted. The bottom of the massive screen displayed small boxes containing the encrypted video feed of each attendee, while the center area was reserved for a larger display of whoever was speaking. Bacon’s feed was the only one to run in the upper-left corner of everyone’s display.

The director held fiat over all board decisions. The advisory committee was there to help plan new AP or to deal with decisions involving a member. Bacon would be a Neighbor until he could no longer do the job, after which his number would be given over to his replacement. Lancaster Hill had wisely laid out the blueprint of succession seventy-five years before:

Any Neighbor who no longer serves the cause because of an illness, shall be retired by the board, and their number reassigned to their replacement.

Except for health issues, no one ever left the society of their own volition. Members were sometimes dismissed when they lost their positions, or their influence otherwise waned, but they were always quickly replaced. Rarely, a member insisted on disengaging himself, or was found to be a security risk. In those instances, there were specialists in elimination who were kept on retainer at the advisory committee’s discretion.

The final screen lit up as Selma Morrow, N-9, activated her camera. She was chief of strategy and operations for Phelps and Snowdon, considered one of the strongest hedge funds in the country. Selma held the same position on the society advisory committee, and as such was a consultant to every AP. Selma, a personal favorite of Bacon’s, Nine would be his nominee to succeed him when the time came. For the moment, though, succession was not the issue.

The Janus strain was.

“Good to see you all,” Eighty said, “at least as much as I *can* see you. I wouldn’t call you all together unless you needed to hear this update regarding AP-Janus. To review, the Janus bacteria came to our attention some time ago thanks to N-Seventy-one, who stumbled on the germ accidentally while investigating another bacteria. The complete microbiology of Janus is too complex to go into here, but basically, most bacteria are divided into two major groups depending on whether or not their cell walls accept Gram staining—a process invented in the late nineteenth century, and still widely used today. Gram positive bacteria appear purple under a microscope, and Gram negative, once they are counterstained with the red dye safranin, appear pink.”

“Excuse me,” Twenty-six, a specialist in mass psychology, asked, “but you said most bacteria are either Gram positive or Gram negative. Most but not all?”

“Precisely.”

“But the Janus bacteria is neither?”

“Right again. Even though nearly all bacteria are either Gram positive or Gram negative, a few, relative to the probably tens of millions of different species, are Gram intermediate—neither purple nor pink. There are even some that are Gram variable, staining either positive or negative depending on the age of the germ at the time it is removed from its culture medium for staining. But Janus is different. Janus has the genetic makeup that enables it to change from positive to negative and back again. Other properties of the germ are constantly in flux as well.”

“Like a shape-shifter,” Ninety-seven said. “That’s why it’s resistant to all antibiotics.”

Ninety-seven was a mechanical engineer and mathematician, just six years past earning a doctorate Ph.D. at MIT. The youngest of the Neighbors, her adult-adjusted IQ had been measured at 182.

“Actually,” Eighty replied, “it seems the Gram positive form is sensitive to some antibiotics, but the Gram negative is totally resistant to all—all, that is, except one—a sequence, actually. Almost by accident, Seventy-one stumbled on a combination of chemicals that, administered in a particular order, completely eradicated the Janus strain. It was tried on infections induced in pigs, then monkeys and finally in several humans. The sequence eradicated every one of their infections—like magic.”

“No side effects?”

“None in the past three years that we can see. But now a problem has arisen.”

“You mean a challenge,” Bacon corrected.

“Of course. A challenge. The Janus strain is working as we hoped. In that regard, it is clear to everyone in the government that we are capable of delivering on our threat.”

The name of the demon germ had been carefully chosen. Janus, the two-faced Roman god of duality—beginning and end; comedy and tragedy; birth and death; health and sickness. There was something unsettling about the name, which was just what the advisory committee wanted. Something creepy.

Bacon approved of the way the head of AP-Janus was going about his explanation. Unfortunately, the director knew what was coming next.

“But the situation has changed,” he said, completing Eighty’s thread. “Our treatment is no longer effective.”

Taking another sip of Scotch, Bacon worked to keep his emotions in check. After years of probing and experimenting, of whittling away at obstacles and taking baby steps toward the ultimate goal—specifically a threat Congress and the president could not dismiss—they finally had the technology to complete the mission, to fulfill the dream. There had to be a way to overcome this setback.

“Precisely,” Eighty said. “The *challenge*, as you so aptly put it, is that the Janus strain is simply too good.”

“Too good?” Forty-four asked.

Forty-four was a highly decorated retired admiral, now a U.S. senator from Rhode Island. His responsibility was to keep his identity a secret, while brokering the bargain with the government that was at the heart of the Janus project. Nine was assisting him, and until this unexpected development

they had been close—extremely close—to pulling it off. The spawn of Roosevelt’s New Deal was on the verge of being erased, and Lancaster Hill’s vision was about to become reality.

America would no longer be held hostage by its government, and the country would begin to flourish, freed at last from the financial shackles of entitlements. Social Security, Medicare, and Medicaid would become anachronistic symbols of America’s parasitic, destructive social welfare policies. The staggering national debt would shrink like a bank of spring snow. Only those who could afford it would ever be admitted to a hospital.

“First of all,” Eighty said, “the spread of infection has gone beyond our predications. Then, when we tried to pull back while the powers in Washington were considering our offer, we discovered that Janus had become resistant to our treatment.”

“Explain yourself,” Forty-four said.

“Nine is keeping track of all of the reported cases of infection.”

“I’ll patch it onto the screen,” the head of strategy and logistics said.

A map of America appeared on the screen. There were red dots in most of the states—each dot according to the map’s key, representing an infection with the media-dubbed Doomsday Germ.

“This map is from twenty months ago,” Nine said. “Every one of these infections were placed by one of the people we enlisted to assist us with this aspect of AP-Janus. They are all reliable, and fully support our philosophy and goals. Now, here is a map from nine months ago. We expected some contagion, and that is what we are seeing here. At this point, Health and Human Services Secretary Goodings asked us to pull back and have our people treat the infection with our system of antibiotics until she could meet with the president. That’s when the trouble began.”

A new map replaced the old and immediately Bacon felt his chest tighten. Instead of seeing red dots in fifteen states, there were dots in every state, and the numbers in the original states had quadrupled.

“I thought the bacteria needed a deep wound to spread,” he said.

“That was what we thought as well,” Eighty replied. “Not only has Janus become resistant to our treatment, but it is spreading in unexpected ways. It’s quite remarkable, in fact. Our scientists have never seen so profound an adaptation take place so quickly.”

“Forty-four, what is the current status of our negotiations with the secretary?” Bacon asked the senator.

“They’re panicked about the fact that word is leaking out. We knew they were stalling until the microbiologists could come up with an effective treatment, but as far as we can tell, they haven’t gotten there. The deadline we gave them is almost up, but of course with this new resistance, as soon as the government realizes what’s happened, we will have lost our leverage.”

“The rapid adaptation has taken us all by surprise,” Eighty said. “Initially, as you alluded, it took a significant inoculum of bacteria for infection to take hold—a deep wound. Now, any sized cut, even a gap from a hangnail, might be enough to cause an infection. Doctors would need to be using extreme bio-safety protocols to properly protect themselves and other patients from the germ.”

Bacon felt his cheeks flush. He dreaded the answer to the question he needed to ask.

“What does your model show in a year’s time?”

“This is just a projection,” Nine said, “but I’m afraid you’re not going to like what it shows.”

Again, one map faded from the conference screen, soon replaced by another. Bacon steeled himself. The red dots made the country appear to have suffered a severe case of the measles. Thousands of cases, involving even the less populated states.

“Good lord, what’s the death toll projection?”

“Unless we can find a way to treat the infection, the death toll will just continue to rise. In addition, of course, AP-Janus will be finished. Our bargaining chip will have vanished, and the hunt for the identities of every one of us will intensify. Sooner rather than later, the FBI will offer enough for someone to crack.”

Bacon cringed and leaned back in his plush leather chair, feeling the coldness of the damp stone floor soak into his bones. Instead of rescuing America, the Society of One Hundred Neighbors was about to destroy it.

“We are not mass murderers,” he said. “We have a purpose here.... Ideas?”

After a silent minute, Ninety-seven, the mathematician/engineer, spoke up.

“If we launch a containment strategy, we believe we can limit the loss of life to less than a thousand individuals. But remember, that’s only a projection. At the moment, the cart is very much dragging the horse.”

“What sort of containment strategy do you have in mind?”

“We would need to kill all infected individuals,” she said without emotion, “and stop infecting new ones. Even then, to stretch my equine analogy, the horse may already be out of the barn.”

Bacon grimaced. “We are so close. The president and the secretary know what Janus can do to erode public confidence in our hospital system. They are close to caving in. We absolutely cannot stop now. Eighty?”

“I believe we need to take a more active role in developing an effective treatment for the germ. Seventy-one, who made the initial discovery that started AP-Janus, is working intensively on modifying the treatment protocol. And, of course, from the moment we first contacted them with our offer, the government has been working on a solution.”

“How close are they?”

“They have a microbiologist leading a secret task force,” Eighty said. “Our ability to intercept his communication with his team is frequently compromised by the NSA, but we have reason to believe that progress is being made.”

“So then, we put this scientist to work for us,” Bacon said. “We must possess both the cause and the cure or all is lost. Can we get to him?”

“Thanks to Nine’s foresight, we have had a contingency plan for this very scenario in place from the moment we activated AP-Janus. Forty-five is our inside man. He should be able to obtain the asset.”

At last, Bacon had a reason to smile.

He took a more relaxed sip of his Scotch, and said, “Then you will proceed.”

CHAPTER 3

As for man, the biological laws make no exception for intelligence or wealth. The laws of God only demand that we do what we can in what time we have, to make the world a place where laziness and sloth are never rewarded.

—LANCASTER R. HILL, *Climbing the Mountain*, SAWYER RIVER BOOKS, 1938, P.111

Lou had fallen twice while traversing the rain-slicked rocks and roots. Lou and Cap finished at a slower pace, turning some heads as they dragged across the rustic lobby of the lodge, muddied and scraped.

“I think we’ll bag our run today,” someone called after them. “Too much of a contact sport.”

Still shaken from his falls, Lou headed for the shower while Cap checked the highway map for the best route to his aunt’s house in Buford. Twenty minutes later, Lou emerged from a cloud of steam ready to take on the forest again.

“Looks like I might be back after dinner, so you’ll have to eat without me,” Cap said.

“Not a problem. I should probably do some schmoozing for Filstrup anyway.”

“How do you think the election is going to go?”

“Honestly?... The speech lacks passion,” Lou said. “Abraham Lincoln could give it and it would still fall flat.”

“Ouch.”

“Many of the docs involved in physician wellness organizations are in recovery themselves. Filstrup’s views, well, they’re clinical at best. Long on pomposity, short on grit.”

“Why is he running for this office, anyway?”

“You’re talking about a guy who has called me for progress reports on the election several times since we got here, while his wife is still in the ICU. Clearly his ego was bought in a plus-sized store.”

“Well, I’m sure you’ll give it your all.”

“Believe me, pal, I care a lot more about Marjory Filstrup’s irregular heart rhythm than I do about Walter’s election. Besides, even though I’ve got another day to read it over, Filstrup would gut me if I so much as changed a word, so what there is is what they’re gonna get.”

“After our run tomorrow, I’ll listen to you read it if you want.”

“You’re going to hate it.”

“Nah, man. It’s cool. I haven’t had a vacation in ages, and I’m really happy being here, so helping you and your boss out is the least I can do.”

“I’m glad the trip’s working out, thanks in large part to that touchdown catch you made out there.”

“Aw, shucks.”

Lou left while Cap was showering. The van hired to shuttle folks to the tour of the CDC was idling near the entrance to the lodge. Lou doubted he would be on time to snag a window seat, but to h

surprise there were only two other passengers. According to their name tags, they were Dr. Brent Greene, an internist from Oregon, and Dr. Harvey Plimpton from Connecticut, who had lost interest in his specialty of gastroenterology somewhere in his late fifties and had become certified by the American Board of Addiction Medicine.

Greene, a garrulous and gregarious redhead, was utterly dismayed with the small turnout.

“I don’t think people understand what an unusual experience this is going to be. The Centers for Disease Control doesn’t even offer tours, except of their museum. My ex, Roger, is in the public relations office and pulled strings to arrange this for us. A guided tour of the CDC is a once-in-a-lifetime opportunity.”

“Physician health people can be a little narrow,” Plimpton said. “What made you sign up, Lou?”

“I’ve never been. I had no idea they didn’t give tours. I have always thought of the place as sort of a Disney World of microbiology, featuring Bugland and Epidemiologyland and Andromeda Strainland and the like.”

The Templeton Rehabilitation Center was believed by many to provide the most effective treatment for chemically dependent health professionals in the world. Lou’s addiction, primarily to amphetamines, had evolved as he moonlighted more and more hours in an effort to help his father, Dennis, a union laborer then on disability, meet the college tuition expenses of Lou’s younger brother, Graham. The deal was that Graham was never to be told. Lou feared that the fragile relationship between the two headstrong brothers would shatter. As things were, they had never grown close.

The last time Lou had been in Atlanta, the anniversary of his arrival at Templeton, was the last time he had been in the city. By then, many of those from his “class” had been lost to follow-up, and too many others were dead.

Bad disease.

The memories, tempered by the years and the recovery meetings, roiled in Lou’s mind as the van rolled through the streets of the city where the turnaround in his life had begun.

Druid Hills, home to the CDC as well as some of Atlanta’s most elegant mansions, was some five miles from downtown. The van and its three passengers cruised to the main entrance past the agency logo—white rays on blue, beneath the block letters CDC. The driver pulled to a stop in front of the main building and informed the trio of the pickup time for the return trip to the lodge.

“I could stay here for days,” Greene gushed.

“Is your ex coming to greet us?” Lou asked.

“Doubtful. Roger and I are on decent terms, but we split because I told him he wasn’t motivated enough to amount to anything.”

Lou shielded his eyes against the glare of the morning sun. The air, free of the scent of lab chemicals, smelled instead of flowering plants and trees. He gestured at a towering brick smokestack rising up from behind a mirrored-glass building. The sprawling complex seemed perfect for incubating secrets as well as specimens.

“I wouldn’t be a bit surprised to learn they’re taking volunteers for human experimentation, if you want to extend your stay,” he said.

“I assume you’re joking.”

“Alas, people are always making that assumption.”

Lou followed the others into the tastefully apportioned lobby, chilled enough to raise goose bumps. He wondered about the negative pressure rooms, HEPA air purifiers, and other bio-safety protocols employed at various areas in the facility to keep lethal pathogens contained.

“If you’ve ever wondered what a bioterrorist’s candy store looks like,” Greene said as if reading his thoughts, “well, this is it.”

A brunette dressed in a sharply tailored navy blue suit approached. The tag pinned to her ampelapel said that her name was Heidi, and that she was with public relations. She glanced briefly at her clipboard, perhaps making sure she had the correct number of visitor badges to hand out.

“Hello and welcome,” she said with the slightest hint of an accent. “My name is Heidi Johnson and I’ll be your guide for your visit today. I assume you are Dr. Greene?”

“Brenda Greene, that’s right.”

“I have a message for you from Roger Greene. He regrets that he has meetings all day and won’t be here to escort you personally, but he welcomes you to the foremost facility of its kind in the world and knows I will fill in admirably for him. Now, unless there are questions, I guess I should make sure I have the right people before we head off.”

“I assume you know that we’re from the Physician Wellness conference,” Greene said.

“Chattahoochee Lodge. We don’t generally offer tours, but Mr. Greene, who’s my boss, arranged your visit personally.”

Lou glanced over at Brenda and felt certain he could read her mind about the relationship between her ex and Heidi.

“I had expected a larger group, but the smaller numbers only mean we will be able to see more,” Heidi said.

From the gardens outside to the sparkling interior to Heidi’s perfect smile, Lou sensed that the CDC did its very best to downplay its important and often dangerous work. However, Heidi’s demeanor dimmed slightly after she finished handing out name badges.

“I’m afraid Dr. Chopra, the director of our Division of Bacterial Diseases, has been called away on business, so we’re not going to be able to visit her lab before our tour of the grounds and the museum. We have two alternatives. We could visit the Division of Viral Diseases or take a tour of our Antibacterial Resistance Unit.”

Viral diseases ... Antibacterial resistance ... A candy store for terrorists. The phrases reverberated in Lou’s thoughts.

Harvey Plimpton, who had been taciturn in contrast to Brenda Greene, came alive at the option.

“Antibacterial resistance. Before I changed specialties, I did research on E. coli mutation. Can we go there?”

“If you both agree,” Heidi said.

Lou and Greene made brief eye contact and nodded.

“Great, we’ll start your visit there,” Heidi said. “I’ll call and let Dr. Scupman know that we’re coming. I think you’ll find him ... well, quite interesting.”

“What do you mean by ‘interesting’?” Lou asked.

Heidi returned an enigmatic smile, but not an answer.

CHAPTER 4

The government exists to provide order to the people while 100 Neighbors exists to define what that order shall be.

—LANCASTER R. HILL, *100 Neighbors*, SAWYER RIVER BOOKS, 1939, P. 17

It was three tenths of a mile from the main building to the CDC's recently constructed Antibiotic Resistance Unit. Led by Heidi Johnson, the small group trooped there through a muggy, seventy-five-degree morning. The ARU, an expansive, single-story blockhouse-like rectangle, was constructed of gray cinder block. Dense low shrubbery surrounded it, but there was little in the way of artistic landscaping. Lou wondered if the designer had been intimidated by the notion of the germs the building was to contain or had simply been instructed not to make the place too inviting.

As if validating his suspicions, security protocols commenced upon entry. An armed guard, young and fit and not the least bit engaging, came out from behind a small, unadorned desk in an equally uncluttered lobby. He took IDs and registered fingerprints using a biometric scanner. Moments later another armed guard appeared from behind a locked steel door, this one secured by a keypad entry system. Escorted by the second guard, Lou followed the others into a long, windowless corridor, with unframed, foot-square photos lining the wall on each side—unlabeled, unappealing, colorful microscopic and electron microscopic images of germs, mostly bacteria.

The air, possibly filtered through some sort of recirculation system, tasted stale. Passing in front of a glass interior door, Lou spied a trio of scientists dressed in white knee-length lab coats at the far end of a hallway to their right. He glimpsed them just before they vanished through a side door into what might have been yet another corridor ... or a stairway.

Creepy.

The mystery of what lay beyond that passage tugged at Lou's curiosity and had him suspecting there was more to the facility belowground than above. The labs housed germs that were resistant to treatment. The battles that must be raging within those unappealing walls were intriguing. How many lethal forms of microscopic life were being cultured and studied? Could the scientists he had seen be working on something other than antibiotic resistance—weapons of mass destruction, perhaps? He kept pace with the others but let his imagination run on high.

Following a maze of shorter corridors, the group passed through an open doorway and entered into a space with no scientific equipment inside—a conference room and library, with floor-to-ceiling bookshelves. Tomes and bound periodicals, neatly arranged and labeled, occupied the entirety of two walls, and there were half a dozen bridge chairs set in front of a large flat-screen television positioned at the front of the room.

Awaiting their arrival were two people, a man, mid-to-late fifties, and a woman, perhaps two decades his junior, both wearing knee-length lab coats. There was no identifying information—the

names or the name of the unit—stitched above the breast pocket. The man had a broad, flat nose, heavy-lidded green eyes, and unruly gray-brown hair, carelessly parted on the right. His pallid complexion hinted to Lou at unbalanced hours spent indoors, probably in this vitamin D-deficient sarcophagus. The blue oxford shirt beneath his open lab coat would never pass anyone's wrinkle-free test. His associate, her raven hair pulled into a tight bun, had an academic look, enhanced by heavy-framed glasses. Petite and quite cute in a mousy sort of way, she, at first take seemed reserved and uneasy around the arrivals.

"Hello and welcome," the man said, his speech, purposefully or not, delivered in a sepulchral tone. "My name is Scupman—Dr. Samuel Scupman. I am the head of the Antibiotic Resistance Unit here at the CDC. My associate is Dr. Vicki Banks. She will be assisting with today's presentation. Mr. Greene, in public relations tells me you are all physicians."

"Except me," Heidi said. "I work with Mr. Greene."

Lou again saw Brenda's eyes flash.

"I'm Dr. Brenda Greene," she said. "Mr. Greene and I are—*were*—married. This is Dr. Harvey Plimpton and this is Dr. Lou Welcome. We're attending the national physician health organization meeting, and we're all thrilled to be here."

Scupman, looking as if he could not care less who they were, nodded but made no attempt to shake hands. His eyes narrowed, possibly at the notion of having to interact with a species composed of more than one cell. A cloud of sorts passed in front of his face.

"I confess I was surprised that your husband would offer up our unit this way," he said. "Much of the work we do here is top secret. To guide you into the heart of our lab would be profoundly irresponsible. You see, within the confines of this facility exist more than ten thousand different species of bacterium—"

"Actually, at last count, we have more than twenty thousand," Vicki Banks interjected.

"Yes, of course, thank you," Scupman said. "Twenty thousand different strains of germs, many of which are so lethal that even for people highly trained in biorisk management, including the most advanced biosafety and laboratory security protocols, the dangers are still quite pronounced. I know you'll want more, but for your own protection, today's tour will be confined to the safety of this slideshow."

"We understand," Brenda said, her disappointment obvious.

"Please, if you'll take your seats," Banks instructed. "Dr. Scupman has another commitment, so we'll need to begin right away."

As soon as everyone was settled, the lights dimmed and the first slide—bright colors, high definition—appeared on screen. It depicted a series of pink, rod-shaped bacteria, housed within a petri dish culture medium.

"What you are seeing here," Scupman said, "is a Gram negative motile bacterium called *Burkholderia pseudomallei*. This impressive little creature is the root cause of the infectious disease melioidosis. Without proper treatment, mortality rate for infected organisms exceeds ninety percent. Vomiting, high fever, cough, and profound chest pain combine to deliver a mercilessly slow and agonizing death. This bacterium, endemic in parts of Asia, Australia, and Africa, is currently classified as a category B biological weapon agent. It is sturdy, easily obtained, easily cultured, and

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