# Pandemic Influenza Be Informed. Get Prepared.

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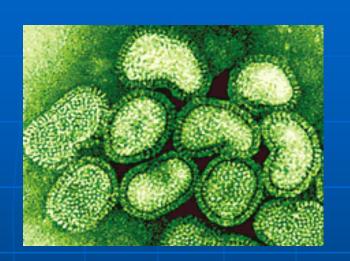
#### Bird Flu or Avian Influenza

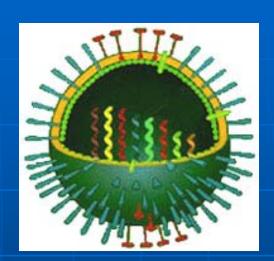
- Infects domesticated chickens, turkeys, ducks and a variety of birds, including migratory waterfowl (and sometimes other species)
- Highly contagious virus
- Two strains
  - Low pathogenic mild
  - High pathogenic almost always fatal
- Spread by contact with bird secretions
   Saliva, nasal secretions, feces
- Virus can remain infectious for 3 months





#### H5N1 Influenza Virus Strain





Viral particle is round and made up of RNA which provides the code for the surface protein

The surface has protrusions of either H (hemagglutinin) or N (neuraminidase) proteins

Minor changes in the structure of these proteins may mean the difference between a benign disease or a killer





## FLU SYMPTOMS F.A.C.T.S.

Fever (102-104 F) lasting several days

Aches/pain

Chest discomfort (severe/pneumonia)

Tiredness/Exhaustion

**Sudden onset** 

Headache

Fatigue lasting 2 – 3 weeks

Sore throat



## What is a Pandemic?



- A PANDEMIC is a global disease outbreak.
- A flu pandemic occurs when:
  - A new influenza virus emerges
  - People have no pre-existing immunity
  - the virus is easily spread from human to human
- Currently H5N1 is not easily spread from human to human
- H5N1 has the potential to adapt into a strain contagious in humans
- Due to the new strain, people have no pre-existing immunity; it is likely that the disease will be serious and deadly
- Once a contagious virus emerges, it is expected to circle the world in about 3 months; all countries will be affected



### 20<sup>th</sup> Century Influenza Pandemics



- 1968 1969 Hong Kong Flu (H3N2)
  - Genes from human and avian influenza
  - 34,000 deaths in the US, primarily the elderly
- 1957- 1958 Asian Flu (H2N2)
  - Genes from human and avian influenza
  - 70,000 deaths in the US, 1st wave, primarily children
- 1918 1919 Spanish Flu (H1N1)
  - Origin of virus unknown (started in US)
  - 500,000 deaths in the US, primarily 20 -35 year olds
  - 40 50 million deaths world-wide
  - 2.5 % of those infected died



#### Avian Influenza H5N1





#### 1997

Hong Kong: Bird flu virus (H5N1) transmitted directly from birds to people 18 cases (6 deaths). All poultry culled

#### 2003 - 2004

- Outbreaks in chickens in Vietnam, Thailand, Korea, Japan, Cambodia, Laos, Indonesia, China
- 100 million chickens died from the virus or were killed in an attempt to prevent its spread
- W.H.O. reports tiger and leopard deaths in a zoo in Thailand
- Over hundred human cases reported in Vietnam, Cambodia, Thailand and Indonesia; people exposed to sick birds





378 Human Cases of Avian Influenza A (H5N1) Reported\* As of April 3, 2008. Mortality Rate 63%



Azerbaijan 8 (5), Cambodia 7 (7) China 30 (20) Djibouti 1 (0), Egypt 47 (20), Indonesia 132 (107) Iraq 3 (2), Lao 2 (2), Myanmar 1 (0), Nigeria 1 (1), Pakistan 3 (1), Thailand 25 (17), Turkey 12 (4), Vietnam 106 (52) \*Reported to WHO







## 200? H5N1 Pandemic

- 5 15 % clinically ill with seasonal flu
  - 36,000 deaths; 200,000 hospitalizations
- 25 50% clinically ill in a pandemic
  - Potentially 90 million ill
  - Potentially 200,000 1.9 million deaths depending on severity
- 51 81 million deaths (96% in undeveloped countries) worldwide





#### Non-pharmaceutical interventions



- Social distancing measures to reduce contacts.
- Voluntary isolation of persons with confirmed or probable influenza.
- Voluntary quarantine of members of a household where there are cases of flu. Persons may not be sick.
- School dismissal (public, private and universities) and childcare closings
- Public health hygiene (hand washing, sneezing practices, not touching eyes, nose, mouth)





#### Challenges



- Pandemic outbreaks may include up to 3 "waves" lasting 6 to 8 weeks separated by months
- Essential services you depend on may be disrupted (banks, government offices, health care facilities, transportation, etc.)
- Food and water supplies may be interrupted and limited
- Being able to get to work may be difficult or impossible
- Schools and daycare may be closed to limit the spread of flu and help prevent infection in children
- Medical care for people with chronic illness may be disrupted as doctors offices and hospitals are overwhelmed





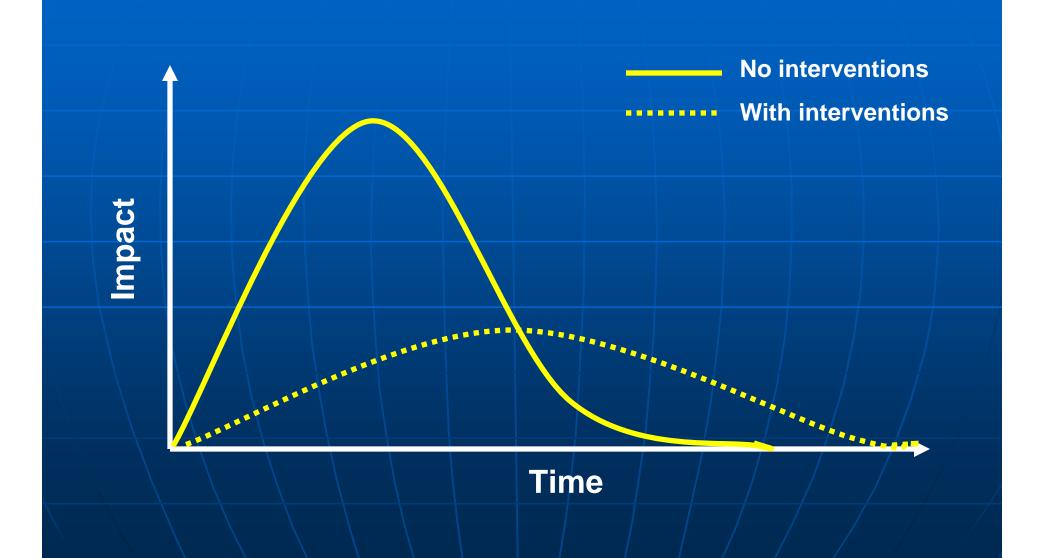
## Pandemic Severity Index A Guide to Community Intervention



### **Delay and Limit New Cases**









### Vaccines





- There is NO VACCINE to protect one against the H5N1 virus; can't be produced until the pandemic emerges
- Developing pre-pandemic vaccines based on the lethal H5N1 (20 million doses stockpiled and to be distributed by Feds)
- Currently techniques are being developed to improve production capacity and to develop ways to expand supplies
- Initial stockpiles will go to priority groups: essential services, health care providers, public safety workers
- 4-6 months to develop a vaccine for the rest of us (300 million)
- You must get a seasonal flu vaccine!









### **Antiviral Drugs**

- Tamiflu TM (Roche) and Relenza TM (Smith Kline Glaxo) N-inhibitors:
   Interfere with viral neuraminidase enzymes found on the surface of the virus
  - Reduces severity of symptoms, duration, and contagiousness.
  - Prevents infection
- Concerns
  - Must be used within first 48 hours
  - Expensive \$90/5 doses
  - Virus may mutate
  - Doses not known









#### National Antiviral Drug Program

#### Target: 81 million treatment courses

Treatment	Stockpile	Purpose
courses		
6 M	HHS	"quenching"
44 M	HHS	treatment
31 M	State	treatment
81 M	TOTAL	treatment

HHS will have 50 M courses on hand by Feb 08 States have ordered 18M courses on hand



#### Face Masks and Respirators







Face masks – loose fitting, disposable, inexpensive, stops droplets

**Respirators** – OSHA rated (N 95 or higher) designed to stop particles  $\geq$  0.3 micron; must have tight fit; may be problematic for persons with health problems

#### **CDC Interim Guidance**

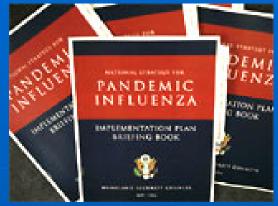
Little research about the value of masks in a public setting

No proof of effectiveness

In combination with other actions, may prevent spread of influenza

Use an N 95 respirator if caring for pandemic flu patient at home or close contact with sick people in a pandemic





# The Government Pandemic Effort



- November 05: President releases *National Strategy for Pandemic Influenza* 
  - Clarifies roles and responsibilities of the government; each Agency to develop plans and cover 4 areas:
    - 1. Protecting the health of employees
    - 2. Maintaining essential function during times of significant absenteeism
    - 3. Supporting the Federal response (sustain infrastructure and mitigate impact to the economy and the functioning of society)
    - 4. Communicating guidance to stakeholders
- November 06 "Checklist of key elements of Influenza Operations Plan" distributed. DOE certified it is addressing the applicable elements, Dec 06



## DOE's Pandemic Planning





- Deputy Secretary memo issued March '06 assigning responsibilities for the development of Pandemic Influenza Preparedness Plan
- Chief Health, Safety and Security to chair and organize biomedical expertise through the Biologic Effects Monitoring Team (BEMT)

#### Biologic Effects Monitoring Team

- Evaluates infectious disease threats
- Formulates recommendations to protect the health of DOE employees and the mission
- Promotes worker health education
- Coordinates the Department's response related to health issues





# DOE Contingency of Operations



Basic Continuity Operations Plan (COOP) concepts are applicable BUT traditional COOP plans (relocating personnel or function) may not work

- Absenteeism may run as high as 40% across the complex
- Interruption of utilities, deliveries, supplies
- Long term months vs. 30 days
- Medical response capabilities overwhelmed
- Protect employees from disease, especial those at high risk

COOP response will be activated based reported cases and transmission



# Developing a DOE Preparedness Plan





- Review Continuity of Operations Plan
  - Identify Mission Essential Functions
  - Prepare "3 deep"
  - Establish accountability employees call in
- Promote Employee Assistance Programs
- Social distancing
  - Telework/flexiplace
  - Adjust work hours to minimize contact
- VOLUNTARY isolation of sick; voluntary quarantine
- Educate/Promote public health measures/Communicate
- Stockpile/provide surface disinfectants (alcohol/bleach)
- Exercise the plan









- During a pandemic, psychological distress responses can include: grief, anger, fear, depression, and psychosomatic illness
- Fear or dread of disease can lead to changes in behavior
- Stigmatization, discrimination manifest in antisocial behavior: avoidance, segregation, abuse, violence against people and property
- Fear of being socially marginalized may cause people to deny early clinical symptoms and delay medical care



# Protect Yourself from the Flu





- Avoid close contact with people who are sick; if you are sick, stay at home
- Cover your mouth and nose when sneezing or coughing. If you
  do not have a tissue, it is best to sneeze or cough into your sleeve
  rather than into your hands: <a href="https://www.coughsafe.com">www.coughsafe.com</a>
- · Wash your hands often with soap and water or alcohol based gel
- Avoid touching your eyes, nose, and mouth; viruses are easily spread through these routes
- Stay Healthy: Stay well rested, engage in regular physical activity, manage your stress, drink plenty of fluids, and eat nutritious food
- Children are major contributors to flu infection. Teach them to good hygiene.





## Tips to help you prepare for an Influenza Pandemic

www.pandemicflu.gov

Have a 2-3 week supply of food and water
 1 gallon water/day per person

Non-perishable food items – canned/dried foods; pet food hand-operated can opener

- Prescription and non-prescription drugs
- First aid kit, soap, bleach
- Plans for senior citizens and people with disabilities
   Who will care for the sick?
- Practice good hygiene