

President Unveils Plan for Pandemic Flu Response

BY MARY ELLEN SCHNEIDER
Senior Writer

The long-awaited national pandemic influenza plan unveiled this month could also help solve chronic problems in production of seasonal flu vaccine.

"We don't need to have a disaster to get a benefit from this influenza planning," said Andrew T. Pavia, M.D., professor and chief of the division of pediatric infectious diseases at the University of Utah, Salt Lake City.

The government's plan puts a strong emphasis on developing the capacity to produce influenza vaccine, rather than just focusing on stockpiling, said Dr. Pavia, who is also a member of the pandemic influenza task force for the Infectious Diseases Society of America.

The plan also begins to address the issue of why manufacturers have left the vaccine market, he said in an interview.

In a speech at the National Institutes of Health on Nov. 1, President George W. Bush outlined the administration's strategy for dealing with a possible influenza pandemic, and requested \$7.1 billion in emergency funding from Congress to implement the plan.

The bulk of the funding—\$2.9 billion—would go toward accelerating development of cell-culture technology for vaccine production. Use of such technology should allow manufacturers to produce enough vaccine for every American within 6 months of the start of a pandemic, President Bush said. He also requested

\$800 million for development of new treatments and vaccines for pandemic influenza.

Another \$1.5 billion would be used for the Department of Health and Human Services and the Department of Defense to purchase influenza vaccines. Researchers at NIH have developed a vaccine, now in clinical trials, that is based on the current strain of the avian flu virus, President Bush said. The government plans to purchase enough doses of this vaccine from manufacturers to vaccinate about 20 million people.

Although this vaccine would not provide full coverage against a pandemic influenza strain, it would offer some protection during the early months of an outbreak, President Bush said. President Bush announced that he is also seeking about \$1 billion to stockpile antiviral medications.

The administration is also requesting \$251 million to detect and contain outbreaks before they spread. That money would be used to help other countries train personnel, expand surveillance and testing, and improve preparedness plans, as well as take action to contain outbreaks. At home, the president has launched the National Bio-Surveillance Initiative, aimed at rapid detection of and response to disease outbreaks. In addition, the administration is seeking \$644 million to help all levels of government prepare

to respond to a potential pandemic outbreak.

President Bush also urged Congress to pass liability protection for vaccine makers in an effort to improve domestic production of vaccines.

The administration was praised for addressing the issue of pandemic flu at the highest levels, but the plan also had its critics.

The proposal is too top-heavy and has a limited focus on the role of primary care physicians, said Jonathan L. Temte, M.D., associate professor of family medicine at the University of Wisconsin, Madison, and a liaison to the Advisory Committee for Immunization Practices from the American Academy of Family Physicians.

The federal strategy for dealing with pandemic flu needs to interact with state and local plans and with individual health care providers, he said. "I don't see any of that infrastructure," Dr. Temte said in an interview.

Democrats in Congress called President Bush slow to act on this issue.

"Every public health expert I've spoken to has emphasized that when it comes to a pandemic, it's not a matter of 'if' but 'when'—yet the administration did not treat this like a national priority until very recently," Rep. Nita Lowey (D-N.Y.), who sponsored legislation in October to ad-

dress a potential influenza pandemic, said in a statement.

Sen. Edward Kennedy (D-Mass.) said in a statement that just stockpiling drugs won't be enough and that the plan needs to be stronger in terms of improving the capacity of hospitals and other health care facilities to respond to a pandemic.

Surge capacity in hospitals is a major challenge in preparing for a flu pandemic or another major event such as a bioterrorist attack, said Gregory J. Moran, M.D., a clinical professor in the department of emergency medicine and infectious disease at the University of California, Los Angeles.

Hospitals need to develop plans to create extra bed capacity in non-patient care areas of the hospital. But hospital administrators can't do this alone and need community interest and investment, Dr. Moran said in an interview.

Right now there is no financial incentive for hospitals to have extra beds that generally remain empty so that they are available in case of an emergency. "We are not well prepared for the worst-case scenario," he said.

The national plan outlined by the president is still a work in progress, Dr. Pavia said, and more work needs to be done to spell out how to move research findings quickly into vaccine production. In addition, more must be done to plan for major public health interventions such as school closures and travel restrictions. ■

Information on the government's pandemic flu plan is available online at www.pandemicflu.gov.

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Possible Avian Influenza Pandemic: Doctors Calmly Prepare

BY SHARON WORCESTER
Southeast Bureau

Warnings of a potential avian influenza pandemic have the nation and medical community on alert—but those who would be on the front lines appear to be taking the threat in stride.

One of the few concrete steps physicians can take at this time is to ensure that patients are vaccinated against conventional influenza strains, said Donald M. Poretz, M.D., vice president of the Infectious Diseases Society of America.

Such vaccination will address the immediate concern of influenza outbreaks in the United States and, according to World Health Organization guidelines, could be useful for preventing coinfection with H5N1 and a human influenza strain.

According to the WHO, doing so will decrease the opportunity for genetic reassortment of the avian H5N1 strain with genes from a human (H1 or H3) strain and thereby reduce the likelihood that a novel pandemic strain will emerge from the current situation in Asia.

If an avian influenza pandemic does occur, diagnosis could prove quite difficult, because the symptoms of H5N1 are similar to those of "regular flu," said Doug Campos-Outcalt, M.D., chair of the department of family and community med-

icine at the University of Arizona, Phoenix, and former chair of the American Academy of Family Physicians' commission on clinical policy.

There doesn't appear to be—and there shouldn't be—major fear or panic in the United States regarding a pandemic at this point, he told this newspaper.

However, European Union (EU) public health experts have begun to rally after the confirmation by the WHO that, in addition to Asia, the H5N1 strain of the influenza virus has been isolated in poultry in Turkey and Romania, bringing the disease to Europe's doorstep. Among the steps taken by the EU was a ban on the importation of live birds, poultry meat, and other poultry products from Turkey and Romania, according to a statement posted on the EU Web site.

"We need to look at the information objectively, and not emotionally. I don't believe anyone can make a statement as to whether or not there will be a pandemic, but the likelihood is that there will be at some point, so one has to be prepared," said Dr. Poretz, professor of medicine at Georgetown University in Washington.

Dr. Campos-Outcalt said that "everyone I know is fatalistic about it. Everyone knows it's coming, but it's difficult to prepare for."

Beyond preventive hygiene measures,

such as hand washing and covering one's mouth when coughing or sneezing, that are important for preventing transmission of any influenza virus, most preparations for a pandemic are "out of the hands of ordinary physicians," said Dr. Campos-Outcalt.

When it comes to potential patient requests for antiviral medications such as oseltamivir, "I would encourage physicians to prescribe as recommended by the CDC and the manufacturer," said Dr. Campos-Outcalt. The CDC's influenza page is located at www.cdc.gov/flu/.

The watch-and-wait mode is an appropriate place for individual physicians to be right now, said Bill Hall, a spokesperson for the Department of Health and Human Services.

HHS is maintaining open lines of communication with public health departments, and through those departments is working to keep physicians informed of world events related to the spread of avian influenza—particularly the H5N1 strain that is rampant in Asia, has spread to numerous other areas, continues to mutate, and has jumped from birds to multiple other species.

While there is a sense of urgency, there is, at this point, no influenza strain that is causing a pandemic, thus there is no alert to physicians with regard to a pandemic, Mr. Hall said in an interview.

In fact, the only panic—as in people running through the streets with arms flailing—is occurring in the media, Mr. Hall said.

According to information from the WHO, IDSA, and various research projects, the H5N1 avian influenza strain does appear to have the potential for developing efficient person-to-person transmission capability, which it currently lacks, and which could be the bridge between the current situation and a future pandemic.

Should the virus obtain this capability, H5N1 could circle the globe within weeks or months, and could kill as many as 150 million people, according to a WHO estimate.

At press time, the WHO had confirmed 117 cases of human infection with H5N1 influenza, with cases in Vietnam, Thailand, Cambodia, and Indonesia. Human-to-human transmission has been documented in only two of those cases—both from a single household in Vietnam. The fatality rate among these cases is over 50%.

Infection in animals has been more widespread.

The virus's ability to mutate and infect additional species, including cats, leopards, tigers, and pigs, is another source of that urgency. ■