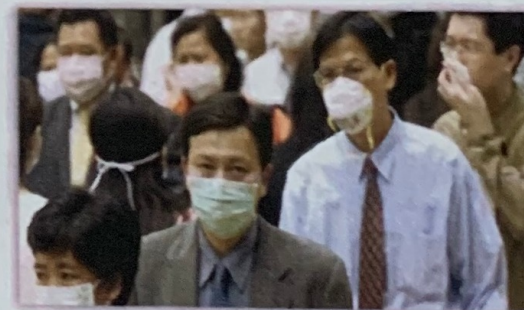


# **Facilitated Group Discussion Pandemic Response**

# Pandemic Response: First Move

- Outbreak of **novel influenza: H9N2**
  - Large number of infections in London, Seoul, and Jakarta
  - Efficiently transmitting person-to-person
  - ***Transmission likely through respiratory routes***
- Medical services are overwhelmed across parts of Asia
- Insufficient lab capacities in remote areas make reporting and tracking difficult
- **Health officials warn that this could become the worst influenza pandemic since 1918**
- No reported U.S. cases



# Pandemic Response: First Move



- The World Health Organization (WHO) requests additional antiviral drugs from manufacturers and donations from unaffected countries' stockpiles
- Many countries have banned travel to affected countries
- The United States has implemented a travel advisory but has not banned travel
- Experts speculate that the virus will soon be identified in the U.S. due to travel between the U.S. and Asian countries

# Key Issues for Discussion

- **Organizing for a simultaneous international and domestic response**
  - Working with the WHO and international partners
  - Who is the lead Federal agency for domestic and international responses?
    - HHS, USAID, CDC, DoD roles
- **Preparing for a national response**
  - Public Health Emergency (PHE)
  - Medical Countermeasures: global stocks, development, and distribution
    - Pharmaceutical (vaccines and antivirals)
    - Non-pharmaceutical (protective equipment and medical devices)
  - Communications to the public and key stakeholders
- **International trade and movement of people**
  - Border management
  - Guidance to American Citizens with reference back to HHS and CDC

# Pandemic Response: Second Move

- Cases of H9N2 influenza have now been *reported in California and Texas*
- The world will be facing an impending *shortage of key resources* such as:
  - Antiviral drugs
  - Personal protective equipment
  - Other medical equipment, such as ventilators



# Key Issues for Discussion

- **National Response to a Pandemic Flu**
  - How does our domestic response change now that there are cases in the U.S.?
  - Domestic delivery of medical countermeasures
- **U.S. hospital preparedness and response**
  - State and local governments lead public health response
    - Federal Government may provide significant support with HHS as the lead Federal agency for the domestic response
- **Sustaining a simultaneous international and domestic response**
  - Addressing global shortage of countermeasures such as antivirals and equipment
  - Sustaining an effective communications strategy
- **Funding to include supplemental resources from Congress**

# Key Takeaways

- **Influenza pandemics and other emerging infectious disease threats may start internationally and do not respect borders**
- **Bringing decision-makers to the table early is paramount – collective understanding of the science and the disease must drive response decisions**
- **Transportation and containment issues are a key concern and decisions will need to be made about screening and monitoring on epidemiology as well as safe movement of patients**
  - Different diseases will require *different interventions*.
- **Collaboration between federal and state public health officials is crucial**
- **Considerations related to health screening and travel for passengers will differ depending on the disease**
- **A coordinated, unified national response and message is paramount**
- **In a pandemic scenario, days – and even hours – can matter**
  - Smart decision-making should provide as much lead time as possible to prepare.
- **Medical countermeasure strategy is key for success**
  - Both pharmaceutical, such as vaccine and anti-viral development and distribution, and non-pharmaceutical, such as social distancing and PPE
- **Supplemental funding will be needed to fund response**