

Implementation Of The National Strategy For Pandemic Influenza

A One-Year Summary Of Efforts To Better Protect Our Nation Against The Threat Of Pandemic Flu

Today, The White House Homeland Security Council Issued A One-Year Report On The Administration's Progress In Implementing The National Strategy For Pandemic Influenza. The United States is better positioned today to detect an outbreak of pandemic flu earlier, to support an international effort to contain the pandemic in its earliest stages, to limit the spread of a pandemic, and to save lives.

- In May 2006, The Administration Issued The [National Strategy For Pandemic Influenza Implementation Plan](#), Which Provides A Roadmap To Achieve The Federal Government's Pandemic Preparedness And Response Goals.
- We Have Made Great Strides Over The Past Year To Complete The Actions Outlined In The Implementation Plan. Eighty-six percent of all actions due within 12 months under the Implementation Plan have been completed. The remaining 14 percent of actions are in progress and are expected to be completed by the 18-month mark.¹

We Are Confronting The Threat Of An Influenza Pandemic At Its Source

The United States Has Made Pivotal Contributions To Control The International Spread Of H5N1. Through the International Partnership on Avian and Pandemic Influenza, we are working with affected countries and international partners to detect, contain, and prevent animal outbreaks; reduce human exposure to the virus; and enhance planning and preparedness for future outbreaks.

- The United States Is Working On Avian Influenza Issues In More Than 100 Countries To Combat The Spread Of Avian Influenza And Prepare For A Possible Pandemic.
 - Over the past year, the U.S. Government has supported the training of more than 129,000 animal health workers and 17,000 human health workers in H5N1 surveillance and outbreak response.
 - We have deployed more than 300,000 personal protective equipment kits to more than 70 countries for use by surveillance workers and outbreak-response teams.
 - U.S. experts have provided vital technical expertise to national investigations of actual outbreaks of H5N1 in countries on three continents and provided technical assistance, commodities, and logistical or financial support to 39 of the 60 countries and jurisdictions affected by H5N1.
 - The United States is supporting efforts to improve laboratory diagnosis and early warning networks in 75 countries.
- The United States Is Working To Expand On-The-Ground Surveillance Capacity And Improve Knowledge About The Movement And Changes In H5N1 On A Global Scale By:
 - Creating the Wild Bird Global Avian Influenza Network for Surveillance project;
 - Enhancing the Global Emerging Infections Surveillance and Response System;
 - Funding the World Health Organization Global Outbreak Alert and Response Network;
 - Expanding the network of Global Disease Detection Centers; and
 - Providing the genome sequences of more than 2,250 human and avian influenza isolates as a result of the Influenza Genome Sequencing Project to track genetic changes in viral strains.

The United States Is Now Better Prepared To Respond To An Outbreak Of Pandemic Influenza

The United States Has Developed Protocols And Trained Personnel To Support An International Effort To Contain The Pandemic In Its Earliest Stages. We have pre-positioned stockpiles of personal protective equipment, decontamination kits, and antiviral medications overseas to complement global efforts to contain pandemic outbreaks.

¹ Due to ongoing scientific and policy analyses, the deadlines for 14 actions were postponed and not included in this summary.

The Administration Has Made Significant Investments In Vaccines, Antiviral Medications, And Research That Will Help Safeguard Our Nation And Benefit The World. The Administration is investing in the expansion of vaccine manufacturing capacity, the advanced development of new cell-based vaccines, vaccine-stretching technologies known as adjuvants, and the establishment and maintenance of pre-pandemic vaccine stockpiles.

- We have invested more than \$1 billion in the development of new vaccine technologies.
- In April 2007, the U.S. Government approved the first pre-pandemic vaccine for humans against the H5N1 virus. We currently have enough of this pre-pandemic H5N1 vaccine for approximately 6 million people.
- The U.S. Government has invested more than \$100 million in adjuvants. Initial clinical studies suggest that adjuvants to H5N1 vaccines could stretch our vaccine supply 10- to 20-fold.
- As of June 2007, Federal and State stockpiles contain enough antiviral medications to treat nearly 50 million people.
- The U.S. Government is developing new antiviral medications to further broaden our capabilities.

In February 2007, The U.S. Government Released Federal Guidance For Non-Pharmaceutical Interventions For Mitigating The Impact Of A Pandemic. Recent scientific modeling and historical reviews of the 1918 pandemic suggest that non-pharmaceutical interventions could be very effective at slowing the spread of disease and mitigating an outbreak. With the use of antiviral medications, they could potentially prevent illness and death in millions of Americans, but only if they are implemented early and maintained consistently across communities affected by a pandemic. The [Community Mitigation Guidance](#) provides a clear roadmap for communities to accomplish these objectives.

The U.S. Government Has Invested In Health System Preparedness, Has Produced Tools To Assist In Planning For Expansion In Hospital Capacity During A Pandemic, And Is Stockpiling Critical Medical Supplies.

- The [Community Planning Guide for Providing Mass Medical Care with Scarce Resources](#) offers specific recommendations for providing the highest possible standard of care where resources are limited.
- The U.S. Government has invested \$600 million over the past year for State and local preparedness efforts, including the exercising of community mitigation measures, medical surge plans, and mass inoculation plans.
- The U.S. Government has developed new guidelines and protocols to enhance the delivery of EMS and 9-1-1 services during a pandemic.

We Have Provided Businesses With Practical, Action-Oriented Information To Identify Essential Functions, Protect The Health Of Employees, Maintain Continuity Of Business Operations, And Sustain Society.

- The U.S. Government has developed the [Pandemic Influenza Preparedness, Response, and Recovery Guide for Critical Infrastructure and Key Resources](#).
- The Federal Government has conducted more than 150 presentations, workshops, and forums attended by thousands of key stakeholders from critical infrastructure entities.
- Partners from Federal, State, local, territorial, and tribal emergency medical services, fire, emergency management, law enforcement, and public works departments have come together to develop best practices and model protocols, to coordinate pandemic preparedness activities, and to standardize all-hazards training and exercises.

We Have Made Significant Progress Over The Past Year, But Much Important Work Lies Ahead

Strengthening Disease Detection And Biosurveillance: We must redouble efforts to develop "real-time" clinical surveillance in the United States, so that we are able to target and refine our efforts more effectively during a pandemic.

Expanding Medical Capacity To Care For Large Numbers Of Ill Patients: Despite our investments and the development of guidance for communities, much more work is necessary to ensure that communities are prepared to care for the burden of illness that would be presented during a severe pandemic.

Addressing Global Needs: The U.S. Government is committed to working with the pharmaceutical industry, our international partners, and the World Health Organization to address global vaccine development and vaccine access.

Implementing Community Mitigation And Building Community Resilience: We must continue to work with non-Federal stakeholders to address practical implementation considerations, including legal and feasibility concerns.