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H1N1 (SWINE) FLU OUTBREAK UPDATE MEMORANDUM

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H1N1 (SWINE) FLU OUTBREAK | BACKGROUND INFORMATION

As the H1N1 flu outbreak has developed, it has caused concern among many New Yorkers. The New York State Senate has put together this information sheet to help understand the current situation and the response on all levels.

As the situation continues to develop, it is important to remember that the best guidance that can be provided to people is to not panic, and to maintain high levels of hygiene, as they would to control the flu during flu season. This flu is responding to anti-flu medications and health officials are reporting that at this point it seems less virulent than the average seasonal flu.

Please note, this situation is changing regularly, and information is constantly being updated by the World Health Organization (WHO), the Center for Disease Control (CDC), the New York State Department of Health (DOH) and the New York City Department of Health and Mental Hygiene (NYCDOHMH). Links to these organizations are provided at the end of this document to help you obtain the most up-to-date information.

CURRENT WORLD HEALTH ORGANIZATION PHASE OF PANDEMIC ALERT

On April 30, the WHO went to phase 5 in their scale of phases of pandemic alert. Phase 5 signifies that the WHO feels that although a pandemic has not arrived, there is significant chance of one and all countries should activate their pandemic emergency plans. From the WHO's website:

Phase 5 is characterized by human-to-human spread of the virus into at least two countries in one WHO region. While most countries will not be affected at this stage, the declaration of Phase 5 is a strong signal that a pandemic is imminent and that the time to finalize the organization, communication, and implementation of the planned mitigation measures is short.

CASES – INTERNATIONALLY AND LOCALLY

As of this time, the World Health Organization is reporting that H1N1 flu has been identified in 35 countries. It began in Mexico, where it has been confirmed that 75 people have died because of H1N1 flu, with 3,892 cases confirmed by the World Health Organization and Mexican health officials. Canada has reported 719 cases, with one fatality. Costa Rica, which has 20 confirmed cases, has also experienced one death due to swine flu. The United States has confirmed or identified as probable 6,552 cases in all 48 contiguous states. Nine people have died. One of those was Mitchell Weiner, an Assistant Principal at I.S. 238 in Hollis, Queens. Mr. Weiner died on Sunday, May 17.

According to the WHO, other countries with confirmed cases of the H1N1 virus but no deaths include: Argentina (1), Australia (7), Austria (1), Belgium (5), Brazil (8), Chile (24), China (11), Colombia (12), Cuba (4), Denmark (1), Ecuador (8), El Salvador (6), Finland (2), France (16), Germany (14), Greece (1), Guatemala (4), India (1), Ireland (1), Israel (7), Italy (10), Japan (294), Malaysia (2), Netherlands (3), New Zealand (9), Norway (3), Panama (73),

Peru (5), Philippines (1), Poland (2), Portugal (1), Republic of Korea (3), Spain (113), Sweden (3), Switzerland (1), Thailand (2), Turkey (2), and the United Kingdom (112).

Initial cases in Queens all involved girls at St. Francis Preparatory High School. They had just returned from a trip to Mexico. All of the cases were mild and none of the girls were hospitalized. All of the girls are reportedly recovering. On April 28, P.S. 177 became the second school in New York City to close due to illness. It is thought by Department of Health officials that the cases from P.S. 177 stemmed from familial relations with students at St. Francis.

Since the virus was first identified, the CDC, the New York State Department of Health and the New York City Department of Health and Mental Hygiene, working with the state's Wadsworth Laboratories, has identified 366 likely or confirmed cases of swine flu. 240 of these are in New York City. The 126 cases identified outside of NYC include: Nassau (38), Suffolk (21), Westchester (19), Rockland (5), Orange (3), Sullivan (1), Greene (1), Albany (1), Saratoga (1), Washington (1), Clinton (1), Lewis (1), Onondaga (11), Cortland (1), Monroe (2), Erie (17), Niagara (1), and Chautauqua (1). For more information about the swine flu situation in New York, including a map indicating the latest number of cases by county, please visit: <http://www.health.state.ny.us/diseases/communicable/influenza/h1n1/>

It is important to note that the United States and New York have both responded very aggressively to this outbreak. The response, combined with a more sophisticated public health system, most likely accounts for the fact that the United States, and in particular New York, are showing higher numbers of confirmed cases than Mexico, which is known to be the epicenter of the outbreak.

WHO AND FEDERAL REACTION

The WHO and the CDC have now said there is a likelihood of a pandemic.

The WHO's pandemic threat level has remains at level 5. It is important to stress that if the threat level is raised to level 6, this will not suggest a change in the situation here. Level 6 is characterized by "community level outbreaks in at least one other country in a different WHO region in addition to the criteria defined in level 5."

The United States, and impacted areas in New York City, have already reached a level that involves community level outbreaks. Therefore, additional action by the WHO will not indicate that the situation in New York has changed.

As described below, federal, state and city health officials are working hard and have responded swiftly and appropriately to the public health threats and challenges posed by this new disease. While it is certainly hoped that there is not a need for the WHO to raise the threat level, our officials are currently acting accordingly and taking the steps necessary to minimize the outbreak in effected communities.

On Sunday April 26, the federal (U.S.) government declared a public health emergency. On April 27, the CDC issued Emergency Use Authorizations (EUAs) for Tamiflu, Relenza and the Swine Flu Test Kit, allowing them to be used on populations for whom they had not been medically approved.

On Tuesday, April 28, the CDC issued a travel advisory against all non-essential travel to Mexico. The WHO has not issued any travel advisories.

This is a procedural action that allows them to take several steps. The declaration allows the federal government to use several drugs for off-label use or use medications that have yet to receive approval by the FDA. It also allows actions to be taken for the federal, state and local public health departments to work together and free up resources. Finally, it releases funds for more anti-viral medications. This means availability of 2.2 million more courses of treatment for NY, in the event that a pandemic is declared.

In more concrete actions, the CDC's Division of the Strategic National Stockpile (SNS) is releasing one-quarter of its antiviral drugs, personal protective equipment, and respiratory protection devices to help states respond to the outbreak. On Wednesday, April 29, the CDC issued guidance to the airline industry on identifying passengers who may be ill with H1N1 flu.

CDC and other officials are reporting that the H1N1 flu virus is susceptible to the prescription antiviral drugs oseltamivir and zanamivir. This is positive news, since seasonal flu is beginning to show resistance to these medications.

NEW YORK REACTION

On Sunday, April 26, Governor Paterson also activated the health emergency preparedness for New York.

This enabled the state and local governments to receive faster access to resources and heightened the level of monitoring taking place. The state is coordinating a response through its Health Alert Network (HAN), using it to communicate and coordinate disease monitoring activity, laboratory testing, and the proper health care response with local health departments, hospitals and providers.

DOH is also monitoring the utilization of resources to ensure that medications and preventive supplies such as masks are used properly. Wadsworth Laboratory has developed a rapid testing mechanism for the identification of severe illnesses. Finally, DOH is monitoring hospital emergency department visits for spikes in visits resulting from respiratory illness and Medicaid prescriptions for increases in influenza medications. No increased level in either has currently been identified.

The New York State Department of Health (DOH) has dispensed 1,500 courses of treatment to New York City, as requested by the NYC Department of Health and Mental Hygiene (NYCDOHMH). There are 6,000 total courses available in the non-pandemic stockpile. While some shortages of Tamiflu are being reported at isolated pharmacies, the Department of Health is reporting that there is no reason to suspect a shortage of the medication. They have been in contact with manufacturers, who assure them that there is plenty available. The Department then reached out to distributors to ensure that more of the drugs are coming into the state and effected areas promptly.

There are an additional 2.4 million courses in the pandemic stockpile, in the event they become needed. These pandemic sources would be supplemented by 2.2 million courses from the federal government. It is important to note that these were purchased at an

extremely discounted rate for use in a pandemic only. We would have to reimburse the difference if they were used and a pandemic was not declared by either the CDC or the WHO.

A press conference on the outbreak in New York City immediately after the outbreak began included Mayor Bloomberg and NYC Health Commissioner Frieden, Senator Schumer, House Members Rangel, Nadler and Maloney, Majority Leader Smith, Senator Perkins, Assembly Member Wright and City Council Speaker Quinn. Subsequent press conferences have been held by state and city officials to keep the public updated about the current situation.

As of May 22, the City of New York has 29 schools and programs closed due to the H1N1 outbreak. This does not count schools that were closed and re-opened, such as St. Francis.

SCHOOL	RE-OPEN DATE
IS 238Q	Tuesday, May 26 (students)
JHS 74Q	Tuesday, May 26
PS 107Q	Tuesday, May 26
MS 158Q	Tuesday, May 26
IS 25Q	Tuesday, May 26
World Journalism Preparatory (located at IS 25Q)	Tuesday, May 26
Q233 (District 75 program located at IS 25Q)	Tuesday, May 26
IS 318K	Tuesday, May 26
PS 19Q	Tuesday, May 26
PS 32Q	Tuesday, May 26
PS 209Q	Tuesday, May 26
P9 (District 75 program located at PS 209Q)	Tuesday, May 26
PS 130M	Tuesday, May 26
PS 35Q	Tuesday, May 26
Merrick Academy Charter School	Tuesday, May 26
PS 242Q	Tuesday, May 26
PS 130Q	Tuesday, May 26
Q993 (District 75 program located at PS 130Q)	Tuesday, May 26
South Bronx Charter School for International Culture and the Arts (all three locations)	Tuesday, May 26
Charter High School for Architecture, Engineering, and Construction Industries (located in the Bronx)	Tuesday, May 26
PS/IS 499Q	Wednesday, May 27
P993 (District 75 program located at PS/IS 499Q)	Wednesday, May 27
PS111X	Wednesday, May 27
Bronx Charter School for Better Learning (located at PS 111X)	Wednesday, May 27
PS 143Q	Wednesday, May 27

PS 203 Q	Wednesday, May 27
MS 113K	Wednesday, May 27
PS 372 (District 75 program located at MS 113K)	Wednesday, May 27
IS 73Q	Wednesday, May 27
Horance Mann School (private)	Contact school
Our Lady of Lourdes Catholic School (private)	Contact school
The Child Legacy School (private)	Contact school
Saint David's School (private)	Contact school
PS 16Q	Re-opened, Friday, May 22
P255 (District 75 program located at PS 16Q)	Re-opened, Friday, May 22
IS 5Q	Re-opened, Friday, May 22
P9 (District 75 program located at IS 5Q)	Re-opened, Friday, May 22
IS 238Q	Re-opened, Friday, May 22 (staff)

* accurate as of 4:50 p.m. on 5/22/09.
For most up to date information, please visit
<http://schools.nyc.gov/Home/Spotlight/closures.htm>

PREVENTION AND HOW TO RECOGNIZE AND TREAT

Right now, it is important to remain calm. At this point, this is an outbreak. It is important for people to take steps to prevent the spread of disease, just as they would at any time, especially during the height of cold and flu season. Typical preventive steps include:

- Regularly washing hands with soap and water or an alcohol based solution;
- Covering your mouth or nose with a tissue when you sneeze or cough, don't use your hand or cough or sneeze on someone else;
- Try to avoid close contact with sick people;
- Avoiding touching nose, eyes or mouth.

Further, DOH and the CDC are asking that those who are sick stay home from work or school and limit contact with others.

If people get sick with flu-like symptoms (fever, body aches, runny nose, sore throat, nausea, vomiting, or diarrhea) they are advised to reach out to a health care provider. This is especially true if they have recently travelled to, or been in contact with someone from, Mexico; San Diego or Imperial County, California; Dickinson County, Kansas; Lorain County, Ohio; or someone from St. Francis Preparatory Academy.

There is not yet a vaccine for H1N1 flu; however, it is treatable. Medical professionals will be able to provide the proper anti-viral medications that will help treat the disease.

If people are otherwise feeling healthy, there is no reason to stay home. St. Francis Preparatory is closed until Wednesday for cleaning. According to DOH and NYCDOHMH officials, all other otherwise healthy children should go to school unless told otherwise by local school and health officials.

VACCINE DEVELOPMENT

On Tuesday, May 19, the WHO released its recommendations on H1N1 vaccines. The group reviewed current evidence of the virus and potential vaccine options as well as the current status of seasonal influenza vaccine production and the potential production capacity for a H1N1 vaccine. They also discussed timing as it relates to commercial production of a H1N1 vaccine.

The WHO experts estimate that if there is a vaccine "yield" that was similar to that of seasonal flu, and doses were used in the minimal amount necessary to be effective, 4.9 billion doses could be made available worldwide.

Because so much remains unknown about this disease, the WHO does stress that there is still a great amount to learn about both the disease and any potential vaccine and its side effects. However, the organization recommended, among other things, that manufacturers immediately begin preparing test batches of a vaccine for clinical trials and begin to prepare for commercial production for mass use.

The working group also noted that it remains important for manufacturers and the population to produce and receive immunizations for seasonal flu, even though it is not useful in defending against the H1N1 strain. This virus is expected to remain in global circulation and remains dangerous.

BACKGROUND

H1N1 flu is a variant of influenza that historically has been spread by those in close contact with pigs. The most common form of the virus is the H1N1 subtype, but there are others. The new strain of swine flu is of the H1N1 subtype; however, it is airborne and being passed on from human to human. This is a development that has the Center for Disease Control (CDC) and the World Health Organization (WHO) concerned about the possibility of a pandemic. Since the majority of the populace does not have regular contact with pigs, they will not have any immunity to the virus. Therefore, the disease's new ability to spread from human to human is of even more serious concern to health officials.

Experts are also concerned because at this point, the reported cases are not clustered among those who are over 64 or under 3, which is the usual high-risk group. Because of all of these factors, and the fact that the cases are not geographically bunched, the WHO is paying close attention to the matter and, as of Saturday afternoon, called the disease "a health emergency of international concern."

For further information, please visit:

http://www.nyhealth.gov/diseases/communicable/influenza/seasonal/swine_flu/index.htm

<http://www.nyc.gov/html/doh/html/home/home.shtml>

<http://www.who.int/csr/disease/swineflu/en/index.html>

www.cdc.gov/h1n1flu