

fast FACTS...

about Sedgwick County Government



Pandemic Influenza (Flu) Update

February 12, 2008

Sedgwick County
Health Department

1900 E. 9th Street

Wichita, Kansas

67214

316-660-7300

www.sedgwickcounty.org

Local News:

Christen Skaer, DVM and Director of the State Animal Response Team (SART), was the guest speaker. SART will look at emergencies affecting animals and look into a response that would include the small animal population. The Kansas Veterinary Medicine Association has taken the lead role to coordinate resources and programs to include large animals and companion animals. Some states already have a State Animal Response Plan in place. Florida and Colorado have good response plans.

The Response Team will look at training and credentialing volunteers and resources to fund those needs. There will be a task force leader in each region and a county or regional response team. If an emergency occurs, a plan will be in place and SART can be called to find resources and get regions and groups working together to respond.

SART's first meeting was February 9 with Sedgwick County Emergency Management. Dr. Skaer emphasized that SART is not yet functioning. They are working on needed legislation, meeting with local Emergency Management Departments, putting MOUs in place, training personnel and volunteers and looking into funding.

PIWG Sub-committee Updates

Sub-committee chairs who were present gave the following updates on their groups' status.

Communications: The sub-committee and Health Department received recognition from USD 259 for the donation of hand sanitizer and "Germ proof your hands" tags to the K-3rd grades. The sub-committee has not met recently but is waiting to assist other sub-committees with communications needs.

Mass Pharmaceutical Distribution: The Centers for Disease Control and Prevention (CDC) visited on Tuesday, January 22 to assess the SNS plan for Sedgwick County.

Behavioral Health: Tom Pletcher reported that Jason Scheck has assumed the position of Director of Crisis Intervention with COMCARE. Jason will take over leadership of this sub-committee.

Surveillance, Monitoring and Investigation:

Deborah Fromer is the new chair of the Surveillance subcommittee. Met last week and discussed the best way to get disease reports quickly. Still working on identifying an effective surveillance system.

Hospitals/Mass Care: Have a date set to meet with the State to present S-MAT (State Medical Assistance Team), which is based on the North Carolina Plan of emergency management regions. Under this plan, state assets are developed locally through partnerships with large hospitals. The plan needs state buy-in and funding.

Continuity of Operations (COOP): Some County departments have put their COOP plan into action due to small emergencies.

Special Needs Populations (elderly and disabled): A survey has been sent to child care providers and one will be sent shortly to long term care providers. A tabletop exercise will occur on March 11th.

Faith Based subcommittee: Central Christian Church has developed a COOP plan and are training their staff for emergencies. They have volunteered to hold the next meeting at their church and help with mailings.

Upcoming meetings: The next PIWG steering team meeting will be Tuesday, February 19 at 9 a.m. at 1530 S. Oliver, Suite 270 (Upstairs).

The next Quarterly Meeting for all of the PIWG will be May 20 at 9:00 a.m. at the University of Kansas School of Medicine-Wichita, 1010 N. Kansas.



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State News:

Janice McCoy announced that Pan Flu money would be going away after this grant year (August).

Janice is working on the State Anti-Viral subcommittee. They currently know that there will not be enough anti-virals for prophylaxis, just treatment. The Federal Government has a stockpile and State of Kansas has buy-in for 25% of the population. Anti-virals need to be administered within 48 hours of becoming ill. Distribution of vaccine and anti-virals is still under consideration. When the State has the final plan it will be distributed.

National News:

Scientists have a new understanding of how influenza viruses work. They have found that the shape of cells is vital to infection occurring.

In birds, the H5N1 flu virus binds with alpha 2-3 receptors; in humans, it binds with alpha 2-6 receptors. Not all 2-6 receptors are the same shape which may explain why humans can get bird flu from a bird and not pass it along easily to other humans.

Scientists originally thought in order for the H5N1 virus to infect humans it would need to simply mutate and bind with alpha 2-6 receptors. Researchers are now stating the H5N1 bird flu virus would need to adapt and latch on to certain shaped receptors (umbrella) for infection to occur. This finding leads researchers to believe there is less chance of the H5N1 virus spreading easily from human-to-human.

International News:

As of January 21, 2008 there have been a total of 351 confirmed human cases and 219 confirmed deaths due to H5N1 avian influenza. None of these have occurred in the United States. The reported number of cases and deaths due to H5N1 avian influenza has decreased from 2006 to 2007. In 2006, there were 115 cases and 79 deaths. In 2007, there were 86 cases and 59 deaths.

The World Health Organization (WHO) has confirmed a single case of human-to-human transmission of the H5N1 bird flu virus in a family in Pakistan. The outbreak followed a culling of infected chickens in the Peshawar region. A veterinary doctor and three of his brothers developed flu like symptoms. One of the brothers, who was not involved in the culling, died. The others recovered. This was the first human-to-human case of H5N1 transmission in Pakistan.

Researchers at the National Institute for Infectious Diseases Lazzaro Spallanzani in Rome tested the blood of 42 volunteers who had been vaccinated against seasonal influenza to see if the vaccine might provide some protection against avian influenza. The H5N1 virus was added to the blood during testing. In some of the volunteers, their antibodies acted against the virus. Researchers also found a few immune cells called CD4 T-cells were able to recognize and act against the H5N1 virus. Seasonal vaccine administration enhanced the frequency of such reactive CD4 T-cells. These findings suggest that seasonal vaccination can raise enhance immunity against the H5N1 avian influenza virus.



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