Containing pandemic flu
What an influenza pandemic will mean for the UK

- High levels of illness
- Intense pressure on health services
- Disruption to many aspects of daily life
- Many deaths
Reduce impact through:

- Surveillance
- Diagnosis
- Antiviral drugs
- Vaccines (once they become available)
- Public health interventions
Virological surveillance

Year round global activity led by WHO, to:

- Monitor the evolution of flu viruses
- Inform recommendations for annual flu vaccine
- Detect the emergence of new or unusual viruses
National and International Surveillance

- WHO Global Influenza Surveillance network
- European Influenza Surveillance Network
- UK: Clinical and virological surveillance co-ordinated by the Health Protection Agency
Diagnosis

- Most often a clinical diagnosis
- Laboratory tests
  - molecular detection of virus in clinical specimens
  - culture of virus
  - serology
- Rapid ‘near patient’ tests – detect the presence of flu within 30 minutes – cannot determine the specific virus
Public health interventions

- Personal interventions
  - Basic measures to reduce the spread of infection
    - **Hand washing**: washing hands frequently with soap and water reduces the spread of the virus from the hands to the face, or to others
    - **Respiratory hygiene**: covering the mouth and nose when coughing or sneezing; using a tissue when possible; disposing of dirty tissue promptly are carefully – bag and bin
    - **Avoiding non essential travel**: non attendance at large gatherings such as concerts, theatres, cinemas, sports arenas etc
Possible population-wide interventions

- Travel restrictions
- Restrictions of mass public gatherings
- Schools closure
- Voluntary home isolation of cases
- Voluntary quarantine of contacts of known cases
- Screening of people entering UK ports
Antiviral drugs
Antiviral drugs

- Likely to be only major medical countermeasure available early in a pandemic
- Used in the absence of, or as an adjunct to vaccination
Antiviral drugs

- UK building up a stockpile of 14.6 million courses
- Stockpile complete September 2006
Antiviral treatment

- Health workers - as a priority as they will have a higher risk of exposure to the virus
- Clinical risk groups - those in whom pandemic flu will be more serious
- General population

Who is prioritised will partly depend on the pandemic virus and who it affects the most – for example which groups are particularly vulnerable
How do antiviral drugs work?

- Prevent the flu virus from reproducing
- Treatment can shorten the illness by a day and reduce hospitalisations by an estimated 50% (based on seasonal flu)
- To be effective, must be taken within 48 hours of the onset of flu symptoms
Treatment

- Healthcare workers will be prioritised for initial supplies of antivirals
- Antivirals will be predominantly for treatment of the ill
- There may be some limited use of antivirals as prophylaxis, if expert advice suggests this appropriate
Delivery of treatment

NHS will need to ensure:

- Patients with influenza like illness can access antivirals within 48 hours
- Patients with severe complications can be appropriately treated in hospital
Influenza Vaccine
Is there a vaccine?

- Because the virus will be new, there will be no vaccine ready to protect against pandemic flu
- A specific vaccine cannot be made until the virus has been identified
- Cannot be predicted in same way as ‘ordinary’ seasonal flu
- ‘Ordinary’ flu vaccine or past flu jab will not provide protection
Vaccines

- Routine seasonal flu vaccines will provide little or no protection
- The new virus strain has to be identified
- New vaccine must be developed to match the pandemic strain of virus
- Will have important differences from routine flu vaccine
- Advance work is being done to facilitate production of a pandemic vaccine once the virus is known
Vaccines

- Four to six months to produce, possibly longer
- Unlikely to be available during the early stages
- When available, aim to immunise whole population as soon as possible
- As production will take time, vaccines will be given to some groups before others according to nationally agreed priorities
Vaccine – provisional priority groups

- Health care workers most at risk
- Clinical risk groups
- Institutional settings
- General population