

Avian Influenza Pre-Pandemic Plan

Anguilla

April 2006

Adapted from the

SUMMARY GUIDE

PRE-PANDEMIC ACTIVITIES

RELATED TO

INFLUENZA PANDEMIC PREPAREDNESS

Influenza Planning Group
Office of the Director
Caribbean Epidemiology Centre
Pan American Health Organization
World Health Organization

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CHECKLIST OF ACTIVITIES FOR INFLUENZA PREPAREDNESS

<u>Activity</u>	<u>Description</u>	<u>Responsibility</u>
Creation of planning group	Composed of members of all groups that will be involved in preparation for and response to a pandemic	Created through the Ministry of Health
Development of plan	<u>Planning for:</u> Surveillance (human & animal); Emergency activities; Prevention of disease spread; Treatment of patients; Communication with the public	Developed by the planning group
Surveillance	<u>Animal:</u> test specimens from dead birds; after positive found, test birds in commercial flocks <u>Human:</u> test specimens from a subset of patients with fever and respiratory symptoms at selected sentinel sites <u>Lab:</u> identify, order supplies	Chief Veterinarian Officer Surveillance Officer, Director of Medical Services, Senior Medical Technologist, Health Information Officer, Medical Records Officer
Treatment of patients	Identify separate clinic and ward facilities; Prepare for separate staffing; Organize supplies for facilities In the event of a human influenza pandemic, WHO Guidelines for Influenza preparedness planning will be followed.	Director of Medical Services and staff

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Background and Purpose

During the pre-pandemic period, highly pathogenic avian influenza (HPAI) H5N1 will probably arrive in our region as an avian pathogen with only limited ability to cause sporadic human cases of disease. As a result, there are four basic activities that should be undertaken by Anguilla and each of the countries in the Caribbean region to protect both human and animal populations:

- Surveillance for the virus in wild and domestic birds
- Surveillance for the virus in humans
- Coordination of all surveillance and planning activities with WHO organizations
- Communicating with Stakeholders

The purpose of this document is to summarize the specific, operational steps that will be needed to conduct surveillance for this virus.

National Surveillance for Influenza in Birds

Anguilla's highest priority is to prevent the introduction and spread of the HPAI H5N1 virus into our population of wild and domestic birds. The virus is currently spreading to the west from Asia towards Europe, carried by migratory birds. These birds can in turn transmit the virus to local birds and from these infections in domestic poultry, sporadic human exposure and disease can occur. Therefore, because of the potential for the virus to occur in both domestic and wild birds, surveillance should be conducted in both populations. It is important to note, however, that although major bird migration routes pass through all areas of the Caribbean, these routes run north-south rather than east-west. There are no direct migration routes from Europe or Asia to the Americas, although mixing of Asian and European bird populations does occur in the summer in the arctic area. Therefore, importation of the virus by migrant birds will probably take quite awhile to occur.

Activities

- **Surveillance among wild birds:**
 - Identify areas that are frequented by migratory birds, especially wetlands visited by waterfowl
 - Identify domestic poultry farms near these aquatic areas
 - Conduct frequent visits to these wetlands and poultry farms to look for abnormal mortality or significant disease outbreaks
 - Collect specimens from dead birds found on these visits as well as from clusters of dead birds found in other areas

- **Surveillance in domestic poultry flocks:**
 - Establish a list of all commercial poultry farms
 - Once influenza A (H5N1) has been identified in Anguilla, begin repeated visits to all farms on the list
 - Collect specimens from a random sample of domestic poultry;

- Collect specimens from all diseased and dead birds found on any poultry farm (including non-commercial farms);
 - Follow WHO protocol for the destruction of sick birds, the disposal of dead birds, and the disinfection of contaminated areas
- **Laboratory:**
 - Send all specimens to the CAREC laboratory for preliminary testing for the presence of influenza virus A
 - CAREC will send all specimens that are positive for influenza A virus to the designated WHO reference laboratory
- **Reporting:**
 - Send immediate notification of positive specimens to Pan American Health Organization/Caribbean Program Coordination (PAHO/CPC) and CAREC
 - Send weekly reports detailing all surveillance activity to CPC and CAREC

National Surveillance for Influenza in Humans

The second most important priority now is for Anguilla to use its existing syndromic surveillance system to identify cases of suspected influenza. In addition, the implementation of the new surveillance forms developed by CAREC, the sensitization of staff to how such forms will be used, the collection of data from the Accident and Emergency Department of the Princess Alexandra Hospital, and the collection of data from private physicians will be required.

The current surveillance case definition for fever and respiratory symptoms (acute respiratory infection) is consistent with the illness as seen in 41 patients in Southeast Asia during 2004 and 2005 with confirmed HPAI (H5N1) (with the exception of sore throat):

- Acute (sudden) febrile illness (>38° C or 100.4° F)

- Previously healthy person presenting with cough *or sore throat*
- With or without respiratory distress

During the pre-pandemic period, cases of HPAI H5N1 influenza A can occur from contact with infected animals, primarily poultry and ducks. The purposes of human surveillance are to identify these sporadic cases as well as to establish a well-functioning surveillance system for use during the beginning of an actual pandemic. In addition, the system will help to identify other strains of influenza that are circulating in the area so that appropriate public health measures can be undertaken. Because humans, unlike birds, seek medical attention for serious disease, and because they (or at least specimens taken from them) are usually sent to a regional or national referral hospitals or laboratories, a sentinel surveillance system focusing on these institutions is will be used to monitor human cases. This system will focus on that subset of patients with fever and respiratory symptoms who are most likely to be suffering from a viral infection, particularly influenza.

Activities

- **Sentinel surveillance system:**
 - Contact health centres, hospital staff (including A& E staff) and private practitioners to remind them of the importance of reporting those meeting the case definition.
 - Follow-up with sites that fail to send in weekly reports.
 - Ensure that all sites have adequate reporting forms
 - Visit private medical establishments on a weekly basis to ensure that surveillance data is collected

Treatment of Patients

- All patients presenting with flu-like symptoms will be treated according to influenza protocol if symptoms fail to improve or have an atypical presentation avian flu should be suspected and managed according to current Avian Influenza protocol.

- Patients will be closely monitored for their response to treatment
- Specimens will be sent to CAREC for testing on patients who are not responsive to treatment

Laboratory:

- Send specimens in viral transport medium, along with a line-listing of the patients' information, to the CAREC laboratory
- Conduct follow-up investigations of all positive cases (influenza A) [*note that this recommendation will change once HPAI H5N1 has entered the country*]
- **Reporting:**
 - Send reports of all influenza surveillance activity to CAREC weekly

Coordinated Activities at CAREC and other UN Organizations

Activities

- The sub-regional laboratory at CAREC will determine if the specimen is H1, H2, H3, or H5 influenza A
- The sub-regional laboratory will send specimens from tissue culture and the amplicon from RT-PCR to the WHO reference laboratory at CDC
- WHO Reference laboratory will determine if the specimen is HPAI H5N1
- CAREC will prepare an electronic mail notification system to send immediate alerts to each country when necessary
- CAREC will prepare a bi-weekly Newsletter to summarize all human and avian surveillance activities and results
- The Newsletter will also contain additional information on relevant activities from outside the region

Communication Plan

Communication strategies are an important component in managing any infectious disease outbreak, and are essential in the event of a pandemic. Accurate and timely information at all levels is critical in order to minimize unwanted and unforeseen social

disruption and economic consequences, and to maximize the effective outcome of the response.

The Department of Agriculture must communicate with poultry producers about the risks of avian flu and garner their support in implementing preventative strategies. Poultry farmers need to be in contact with the Chief Veterinary Officer immediately in the event of unexplained poultry deaths. Furthermore, communication with the Department of the Environment and the Anguilla National Trust are critical.

Activities

- The Chief Veterinary Officer will meet individually with poultry farmers to apprise them of the preparedness plan.
- The Chief Veterinary Officer will convene a meeting with representatives of the Department of Environment and the Anguilla National Trust to apprise them of the preparedness plan
- The Department of Agriculture will issue press releases to the general public enlisting their assistance in identifying unusual deaths among wild fowl. The public will be advised to report to the department any such deaths among fowl they observe in or around their yards

Health care professionals must be sensitized to the Avian Influenza Pre-Pandemic Plan and understand their role in its implementation. All staff should be aware of how patients are being monitored and treated in cases where Avian flu is suspected.

Activities

- The Surveillance Officer and Director of Medical Services will convene a meeting of Health Authority staff to apprise them of the preparedness plan and to train staff in the use of the revised reporting forms
- A formal letter will be sent by the Ministry of Health to the private medical providers advising them about the preparedness plan, the new reporting forms, and the need to conduct syndromic surveillance
- The Surveillance officer will visit the private medical establishments to train them in the use of the revised reporting forms.

Equally important, is informing the public as to what interventions are being implemented to mitigate the potential pandemic.

Activities

- The Ministry of Health will issue a press release to all media houses alerting the public to the existence of Anguilla's Avian Influenza Pre-pandemic plan
- With guidance from the Director of Medical Services, the Ministry of Health will issue periodic press releases as new information becomes available.
- Public information messages will aim to stress the urgency of the potential pandemic while at the same time attempt to prevent panic. Such messages will be communicated in clear easily understood language.
- Messages will include information about what the public can do to prepare, prevent and provide care in the event of an influenza pandemic.