

NASA
Update on Swine Influenza
28 April 2009

Cases Updated
5 May 2009

Chief Health and Medical Officer
Dr. Rich Williams

Swine Influenza A

- Outbreak of Swine Influenza A (H1N1) evolving rapidly.
- Source of the Mexico outbreak unknown
- Public health emergency declared 4/27 by Homeland Security and HHS.
- Swine Influenza (swine flu):
 - Respiratory disease of pigs caused by type A influenza viruses.
 - Outbreaks of swine flu happen regularly in pigs.
 - Outbreaks usually Fall or Winter.
 - Human infection with flu viruses from pigs are most likely to occur when people are in close proximity to infected pigs
 - Most commonly, human cases of swine flu happen in people who are around pigs but it's possible for swine flu viruses to spread from person to person also.
 - Spread mainly person-to-person transmission through coughing or sneezing of people infected with the influenza virus.

CDC Response

- Last week CDC activated its Emergency Operations Center.
- Working closely with health officials in Mexico, Canada and U.S., and WHO.
- The World Health Organization (WHO), the Global Alert and Response Network (GOARN), and the Centers for Disease Control and Prevention (CDC) have sent experts to Mexico to work with health authorities.
- Investigating isolated human cases in U.S.
- Issued Interim Guidance documents related to infection control, face mask and respirator use, antivirals, etc.
- Strategic National Stockpile released to affected states:
 - One-quarter of antiviral drugs
 - PPE
 - Respiratory Protection Devices
- Laboratory testing found the swine influenza A (H1N1) virus susceptible to the prescription [antiviral drugs](#) oseltamivir and zanamivir.
- Recommends U.S. travelers avoid all nonessential travel to Mexico.

CDC/WHO Updates

- As of May 5 CDC reports:
 - 403 confirmed cases in the U.S.

States	Confirmed Cases	Deaths
Alabama	4	
Arizona	17	
California	49	
Colorado	6	
Connecticut	2	
Delaware	20	
Florida	5	
Georgia	1	
Idaho	1	
Illinois	82	

CDC/WHO Updates

- As of May 5 CDC reports: (cont.)

States	Confirmed Cases	Deaths
Indiana	3	
Iowa	1	
Kansas	2	
Kentucky	1	
Louisiana	7	
Maine	1	
Maryland	4	
Massachusetts	6	
Michigan	2	
Minnesota	1	
Missouri	1	

CDC/WHO Updates

- As of May 5 CDC reports: (cont.)

States	Confirmed Cases	Deaths
Nebraska	1	
Nevada	1	
New Hampshire	1	
New Jersey	6	
New Mexico	1	
New York	90	
N. Carolina	1	
Ohio	3	
Oregon	15	
Pennsylvania	1	

CDC/WHO Updates

- As of May 5 CDC reports: (cont.)

States	Confirmed Cases	Deaths
Rhode Island	1	
S. Carolina	16	
Tennessee	2	
Texas	41	1
Utah	1	
Virginia	3	
Wisconsin	3	
TOTAL (38)	403 cases	1 death

WHO Updates as of 5 May 09

– Internationally Confirmed Cases: 1,241 cases

Country	Confirmed Cases	Deaths
Austria	1	
Canada	140	
China, Hong Kong-SAR*	1	
Costa Rica	1	
Columbia	1	
Denmark	1	
El Salvador	2	
France	4	
Germany	8	
Ireland	1	

*Special Administrative Region

WHO Updates as of 5 May 09

– Internationally Confirmed Cases: 1,241* cases (cont.)

Country	Confirmed Cases	Deaths
Israel	4	
Italy	2	
Mexico	590	25
Netherlands	1	
New Zealand	6	
Portugal	1	
Republic of Korea	1	
Spain	54	
Switzerland	1	
United Kingdom	18	
United States*	403	1

*Based on CDC report for the United States.

World Health Organization

- WHO raised influenza pandemic alert from Phase 3 to Phase 4 on April 27.
- Indicates likelihood of pandemic increased but not inevitable.
- Decision based on epidemiological data demonstrating human to human transmission and ability to cause community level outbreaks.
- Containment of virus not feasible.
- Focus on mitigation measures.

OCHMO Response

- Monitoring the evolving event.
- Reviewing CDC guidance documents.
- Attending CDC briefings by telecon.
- NASA Health Alert sent to the NASA workforce.
- Reviewing NASA Pandemic Plan guidance issued in 2006.
- Updating the NASA OH Website.
- On-going communications with senior leadership, OSPP, HR, OH community.

OCHMO Response

- Advised Occupational Medicine Clinics should:
 - Ensure that a clinic representative at all EOC briefings related to the potential flu outbreak.
 - Be prepared to coordinate with local health department authorities as requested.
 - Review and become familiar with Appendix C of the OCHMO Draft Pandemic Plan which details clinic-specific infection control guidelines.
 - Review and ramp-up their on-site infection control plans as needed.
 - Monitor the CDC web site for influenza updates and sign-up for the related e-mail distribution list.
 - Monitor CDC teleconferences and/or download the subsequent content of the teleconferences and share with clinic staff.
 - Refer employees to the CDC link on the first page of the OH website.

OCHMO Forward Work

- Initiating discussions with OSPP, HR, and OGC concerning limitation of exposure in the workplace
 - “Send home” policies
 - Liberal use of telecommuting
 - Self identification following travel to swine flu affected areas
 - Telecommute for 5 days to avoid possible expression of illness at work