



***Anthrax
Vaccine
Immunization
Program***

Individual Briefing



History of the Anthrax Vaccine Immunization Program (AVIP)

- Secretary of Defense ordered the AVIP in Dec 97
- Vaccinations began in Southwest Asia in Mar 98 / Vaccinations began in Korea in Aug 98
- Slowdowns in 2000-01. After supply restored, program resumed 2002
- Injunction issued against DoD in Oct 04
- FDA issues Emergency Use Authorization (EUA) in Jan 05
- FDA formally issues Final Rule/Final Order on 19 DEC 05
- AVIP continued as during EUA: same people, voluntary basis
- Deputy Secretary of Defense issued AVIP policy in Oct 06 to re-established a mandatory program for those in higher risk areas and with special roles; policy allows voluntary vaccinations for other groups
- Under Secretary of Defense for Personnel and Readiness released DoD implementation guidance for the AVIP policy in Dec 06

Current Policy Implementation

- **Vaccinations are mandatory for DoD Servicemembers, emergency essential designated civilians, and contractor personnel performing mission-essential services assigned to:**
 - Central Command area of responsibility for 15 or more consecutive days.
 - Korean Peninsula for 15 or more consecutive days
 - Special units with Bio-warfare or Bio-terrorism related missions
 - Specialty units with approved exception to policy
- **Vaccinations shall begin, to the extent feasible, up to 120 days prior to deployment or arrival in higher threat areas.**

Current Policy Implementation

- Vaccinations are voluntary for DoD Servicemembers who are not in the mandatory groups and have received at least one dose of anthrax vaccine absorbed during or after 1998
- Vaccinations are voluntary for DoD civilians and adult family members; contractors and their accompanying US citizen family members:
 - Residing in Central Command area of responsibility for 15 or more consecutive days
 - or -
 - Residing on Korean Peninsula for 15 or more consecutive days
- DoD Civilian Personnel Management Service concluded notification to National Unions on 12 Jan 07

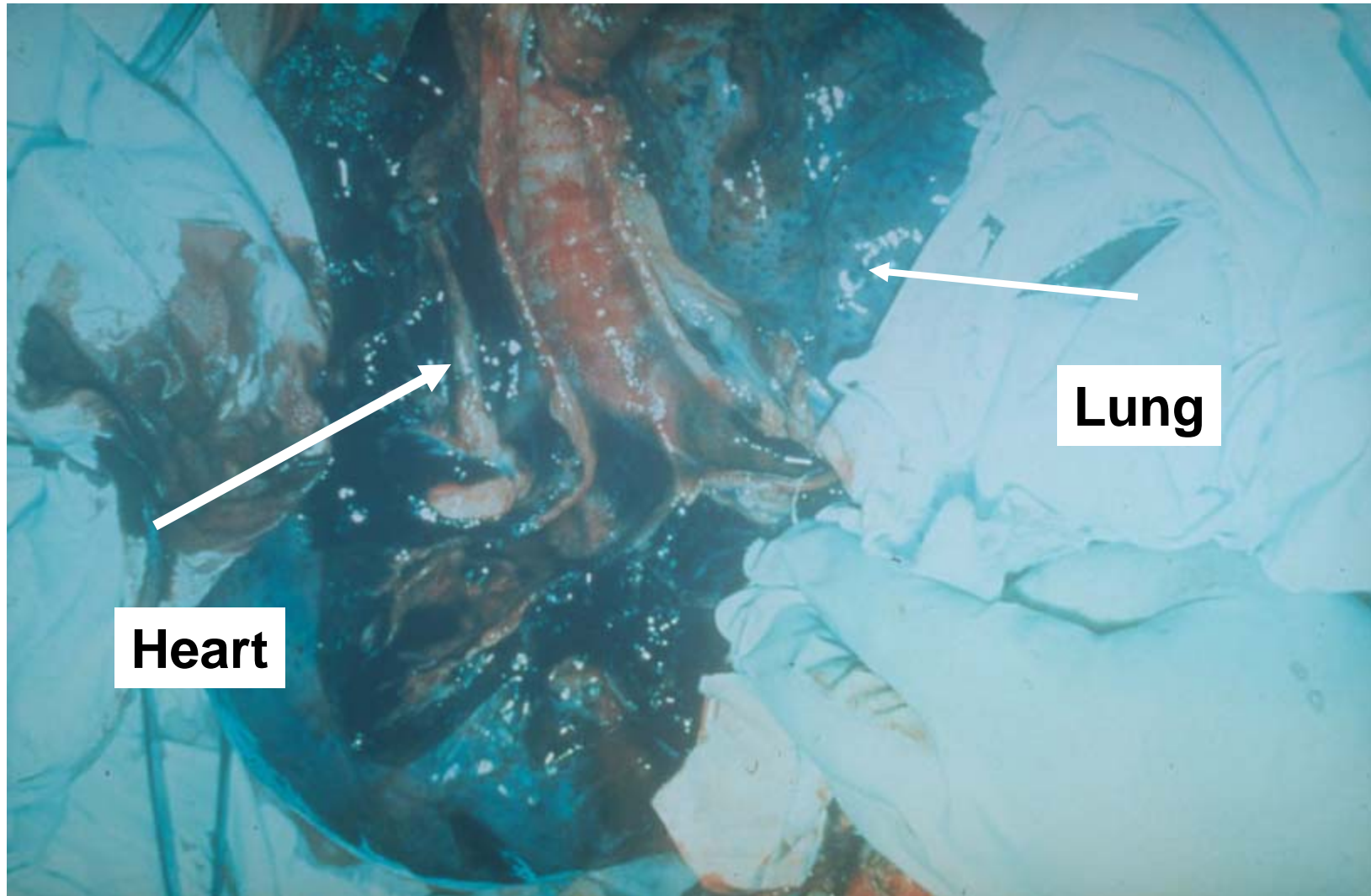
Anthrax Spores

- Highly lethal – Inhaling spores can kill 99% of unprotected, unvaccinated, untreated people
- Extremely stable - withstands harsh conditions, remains inactive for up to 50 years
- Resists heat, ultraviolet light, gamma radiation, bleach
- Easily weaponized and deployed – bombs, missiles, mailed packages, aerosols
- Colorless, odorless, difficult to detect
- At least 7 potential adversaries suspected of researching, developing, or weaponizing anthrax
- You can be infected and not know it, until it's too late.

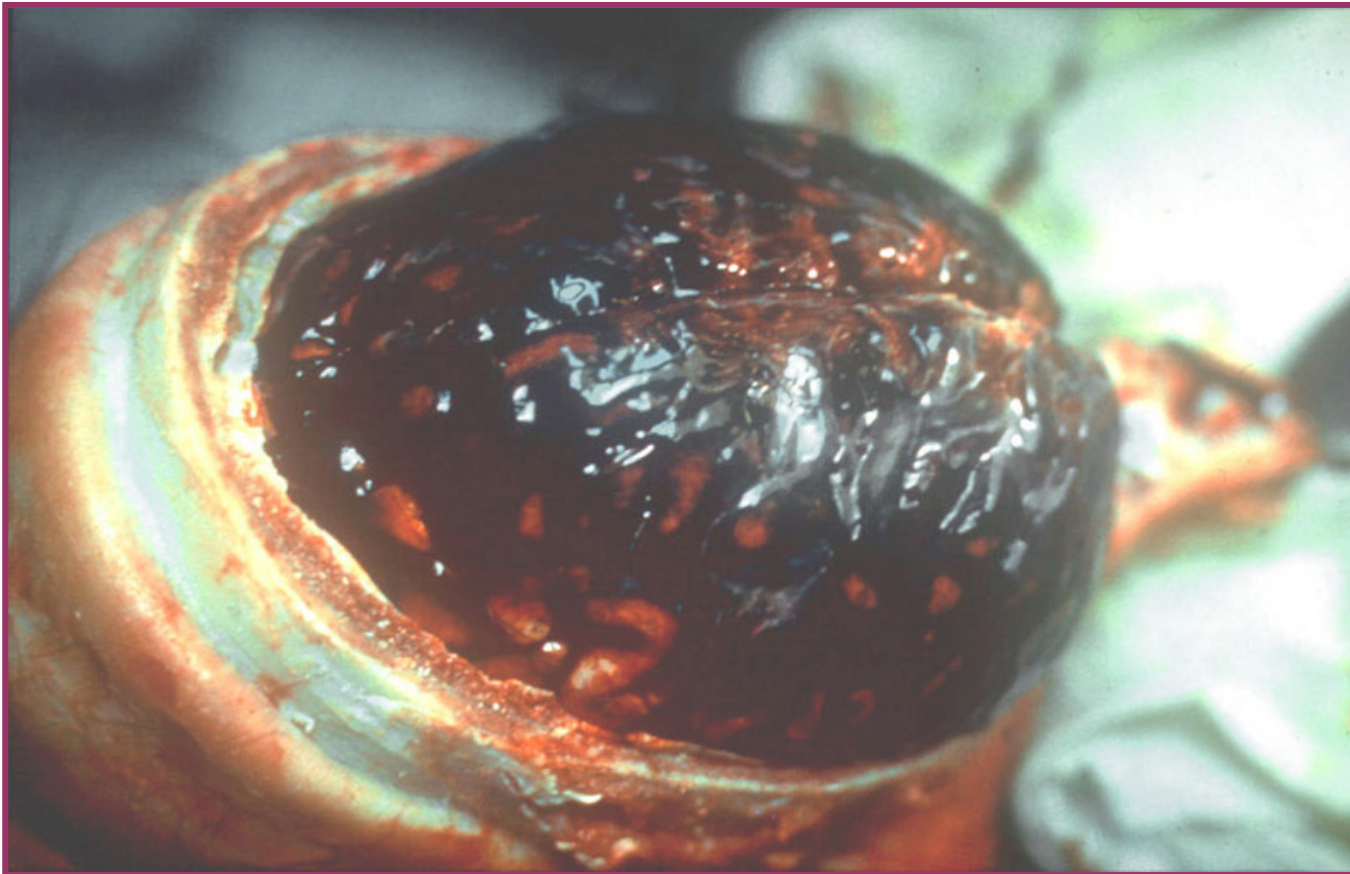
Largest Human Outbreak of Anthrax

- Sverdlovsk, USSR, 1979
- Anthrax spores accidentally released from a military microbiology facility
- 77 people infected
- 66 of these people died (86% death rate)
- Most victims worked or lived within 4-kilometer zone south of the city
 - Investigators concluded anthrax spores spread where the wind blew

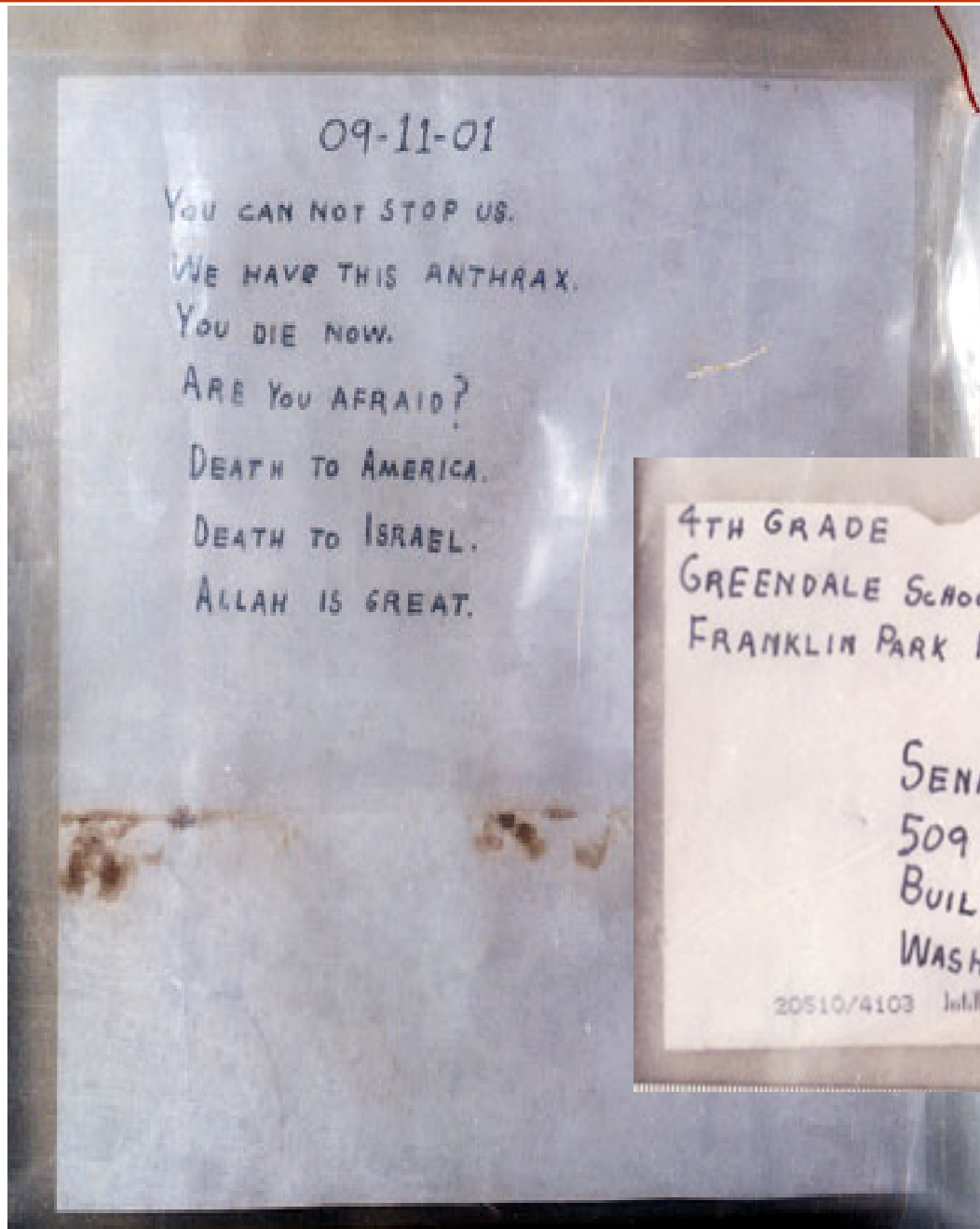
Lethal Case of Inhalation Anthrax



Lethal Case of Inhalation Anthrax



Letter with Anthrax Spores, Fall 2001



09-11-01

YOU CAN NOT STOP US.

WE HAVE THIS ANTHRAX.

YOU DIE NOW.

ARE YOU AFRAID?

DEATH TO AMERICA.

DEATH TO ISRAEL.

ALLAH IS GREAT.



4TH GRADE
GREENDALE SCHOOL
FRANKLIN PARK NJ 08852

SENATOR DASCHLE
509 HART SENATE OFFICE
BUILDING

WASHINGTON D.C. 20530

20510/4103

October 2001 Anthrax Attacks

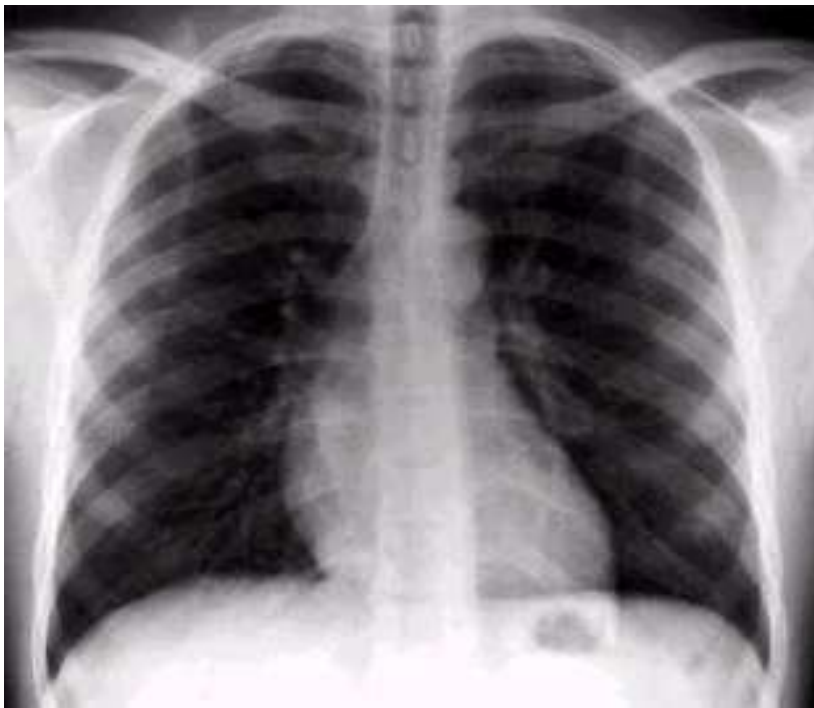
- Several letters containing anthrax spores sent in mail
- 4 regions affected in US
 - Florida
 - New York / New Jersey
 - Washington, DC, metropolitan area
 - Connecticut
- Additional contamination of other postal facilities
- Nationwide effects
- 22 people infected:
 - 11 inhalation cases, 5 died (45% death rate)
 - 11 cutaneous (skin) cases, 7 confirmed cases (including a baby), plus 4 suspected cases
- Over 33,000 people given antibiotics

Timeline of Anthrax Postal Attacks

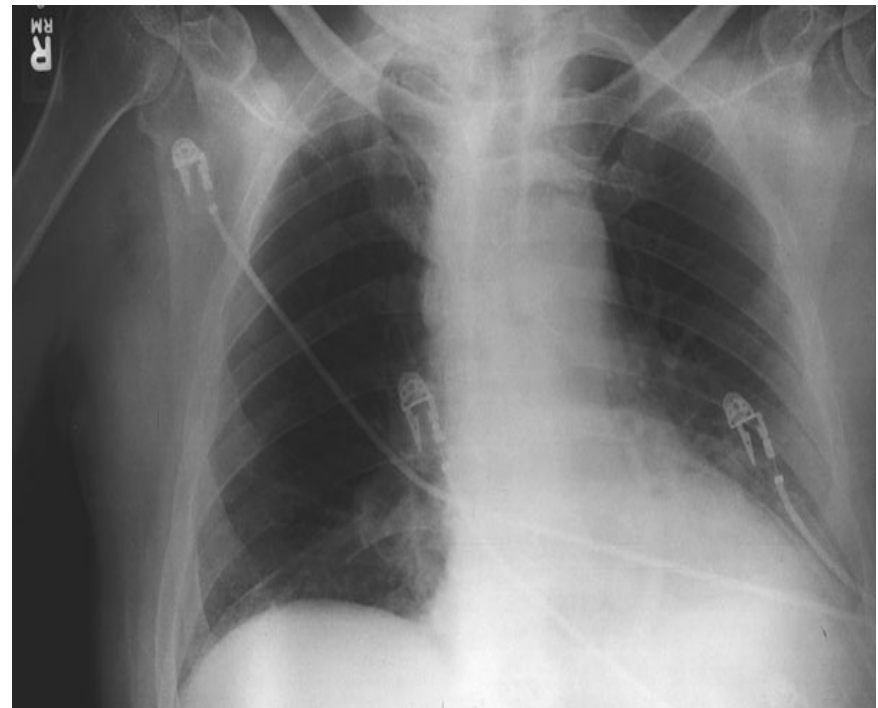
- **4 Oct 01.** American Media Inc. (AMI) photo editor diagnosed with inhalation anthrax. He died the next day.
- **16 Oct 01.** Without knowing they had been exposed, four Washington area postal workers developed inhalation anthrax symptoms. Two died. The Brentwood postal facility is now named the Curseen-Morris Processing & Distribution Center in their memory.
- **25 Oct 01.** A hospital supply worker in New York City with no obvious exposure becomes ill. She died 5 days later from inhalation anthrax.
- **14 Nov 01.** A 94-year-old woman in rural Connecticut with no obvious exposure becomes ill. Diagnosis: inhalation anthrax. She died 1 week later.

Chest X-Ray in Anthrax

Florida photo editor who died 5 October 2001



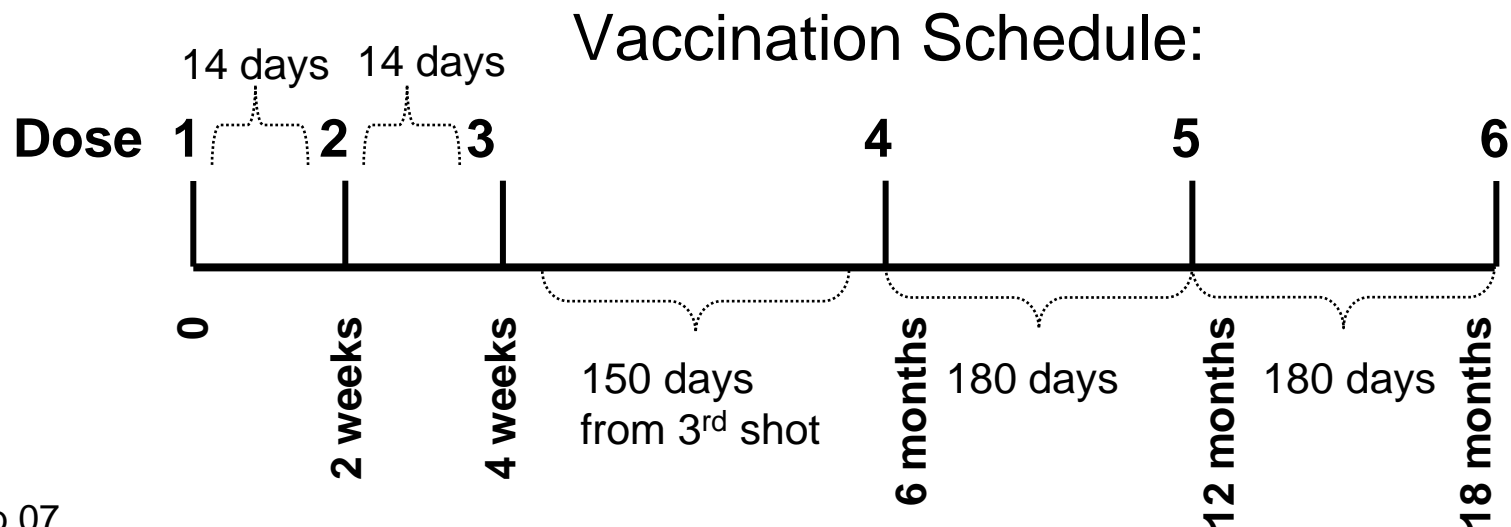
Normal Chest X-ray



**Chest X-ray of Inhalation Anthrax
Victim**

Anthrax Vaccine Facts

- Manufactured by Emergent Biosolutions in Lansing, MI
- A study in mill workers showed anthrax vaccine was 92.5% effective in preventing anthrax (including both cutaneous and inhalation anthrax)
- Each vaccine lot is okayed by FDA before shipment
- No other product is approved by FDA to prevent anthrax before exposure



Anthrax Vaccine Safety

- **Over 1.4 million people vaccinated with over 5.8 million doses**
- **Injection-site reactions common:**
 - 30% of men, 60% of women have injection-site reactions
 - Burning, soreness, redness, itching, swelling, or pain
- **Systemic symptoms (beyond injection site):**
 - 5% to 35% of both genders
 - Muscle or joint aches, headaches, rashes, chills, mild fever, fatigue, swelling may extend below elbow
- **Acute allergic reactions after any vaccine, 1 in 100,000 doses**
- **The risk of any vaccine causing serious harm or death is very small**
- **Consult your health care provider if adverse events occur**

Exemptions from Vaccination

- **Some people should not get anthrax vaccine.**
- **Temporary medical exemptions include:**
 - Women who are pregnant, or might be pregnant
 - Acute diseases, surgery
 - Short-term immune suppression
 - Medical evaluation or condition pending
- **Permanent exemptions can include:**
 - Severe allergic reaction or other serious reaction after a previous dose of anthrax vaccine
 - People with a possible history of latex sensitivity
 - HIV infection or other chronic immune deficiencies
 - People who had Guillain-Barré syndrome (GBS)
 - Recovery from previous anthrax infection

Adverse Event Reporting

- **Vaccine Adverse Event Reporting System (VAERS):**
 - FDA and CDC review 100% of adverse-event reports
 - All VAERS forms reviewed by independent panel of expert civilian physicians for 4 years
- **DoD requires healthcare workers submit a VAERS Form for:**
 - Loss of duty 24 hours or longer (≥ 1 duty day)
 - Hospitalization
 - Suspected vaccine vial contamination
- **Other submissions are encouraged.**
- **Anyone can submit a VAERS Form !**
- **VAERS Forms may be obtained from:**
 - Your clinic, 1-800-822-7967, or www.vaers.hhs.gov

Reserve Component Adverse Events

- **Adverse events after DoD- or USCG-directed vaccinations are line-of-duty conditions**
- **Someone with an adverse event in a non-duty status possibly associated to any vaccination:**
 - Seek medical evaluation at a DoD, USCG, or civilian medical treatment facility, if necessary
 - Report the event to your unit commander or designated representative as soon as possible
 - Consider VAERS submission
- **Commander will determine Line of Duty and/or Notice of Eligibility status, if required**

Key Messages

- Your health and safety are our #1 concern.
- The threat from anthrax spores is deadly and real.
- America's best scientists say that anthrax vaccine protects against all forms of anthrax disease and is safe.
- Vaccination protects you, your unit, and your mission.

For More Information

- Military Vaccine (MILVAX) Agency
 - Website: www.anthrax.mil www.vaccines.mil
 - Toll-Free: [877.GET.VACC](tel:877.GET.VACC)
 - E-Mail: vaccines@amedd.army.mil

- For medical advice about your vaccination (24/7)
 - DoD Vaccine Clinical Call Center: [866.210.6469](tel:866.210.6469)

- For clinical consultation or exemption assistance
 - Website: www.vhcinfo.org
 - E-Mail: askVHC@amedd.army.mil

- CDC National Immunization Hotline
 - Toll-Free: [800.232.2522](tel:800.232.2522)