

Opening Statements of Preventive Treatment Options for Anthrax Exposures  
Talking points for Dr. Jim Hughes

*Broadcast Friday, 21 December 2001, 12:00 Noon*

Hello. I'm Dr. Jim Hughes, Director of the National Center for Infectious Diseases at CDC. Thank you for joining us today for this next program in the clinical education series, "CDC Responds."

Since early October, CDC and many other partners have been responding to an unprecedented bioterrorism attack resulting from the dissemination of *Bacillus anthracis* through the US postal system. 22 persons with anthrax have been identified; 11 people have developed inhalational anthrax, and 5 have died as a result. Many more people have been exposed to anthrax spores, putting them at risk for development of inhalational disease. Persons known or suspected of having exposure to airborne anthrax spores have been prescribed a regimen of 60 days of antibiotics --- we believe that many infections have been prevented as a result of this prompt action. However, we are concerned that the risk of infection for persons who were exposed to high doses of spores may extend beyond 60 days. As you will hear, only limited data are available to assess the magnitude of this risk.

Unfortunately, there is little recent clinical experience with this disease in the United States, and we continue to learn about the illness.

In today's broadcast, you will hear what we know and what we don't know about this risk. A panel of experts from CDC will provide an update of the

three options for at-risk people who are completing their 60 days of prophylaxis.

We also want to remind our viewers that until the perpetrators are caught, another bioterrorism attack could occur. Therefore, health-care providers, laboratorians, and public health officials must remain vigilant for cases of anthrax.

On behalf of CDC, thank you very much for joining us for today's program.