



U.S. HOUSE OF REPRESENTATIVES
COMMITTEE ON HOMELAND SECURITY
CHAIRMAN BENNIE G. THOMPSON (D-MS)

INFLUENZA A/H1N1 FACTS AND RESOURCES

BACKGROUND

The illness caused by the Influenza A/H1N1 virus has been called “swine flu.” That label is not very accurate. The virus is composed of genetic pieces from other viruses: human, avian, and swine. Humans, not animals, are spreading the illness that the Influenza A/H1N1 virus causes. It is not being spread by swine or by eating pork or pork products.

Although there is no reason to panic, there is cause for concern. The World Health Organization has declared that the Influenza A/H1N1 outbreaks are causing a pandemic, which means that the illness has spread to a number of countries worldwide and is easily transmitted between humans. Scientists are concerned that this flu strain could combine with others that would cause seasonal flu this fall, and if that happens, it is possible that the illness people experience then would be much more severe and widespread. We need to be prepared for the possibility that the current illness may affect more people and become more severe.

Domestic Situation

On behalf of the government of the United States, the Secretary of the Department of Homeland Security, Janet Napolitano, declared the Influenza A/H1N1 outbreaks occurring in the country to be a “public health emergency.” This is similar to other emergency declarations that have been made in the past for other incidents of National concern, such as hurricanes. However, in this case, the declaration of a public health emergency allows for actions to be taken to ensure and improve the health of the public more quickly. The Federal departments and agencies that are most affected by this declaration are the Department of Homeland Security and the Department of Health and Human Services - including its subordinate agencies such as the Centers for Disease Control and Prevention, and the Food and Drug Administration.

As of June 26, 2009, the Centers for Disease Control and Prevention in the United States have reported the following laboratory-confirmed and probable human cases of

infection with the Influenza A/H1N1 virus: 239 in Alabama, 46 Alaska, 35 in Arkansas, 729 in Arizona (8 deaths), 1492 in California (16 deaths), 103 in Colorado, 877 in Connecticut (5 deaths), 267 in Delaware, 941 in Florida (2 death), 65 in Georgia, 465 in Hawaii, 72 in Idaho, 2875 in Illinois (12 deaths), 251 in Indiana, 92 in Iowa, 117 in Kansas, 119 in Kentucky, 153 in Louisiana, 61 in Maine, 414 in Maryland (1 death), 1287 in Massachusetts (1 death), 468 in Michigan (2 deaths), 537 in Minnesota (1 death), 114 in Mississippi, 55 in Missouri (1 death), 44 in Montana, 111 in Nebraska, 250 in Nevada, 207 in New Hampshire, 899 in New Jersey (6 deaths), 232 in New Mexico, 2272 in New York (35 deaths), 179 in North Carolina (1 death), 48 in North Dakota, 93 in Ohio, 123 in Oklahoma (1 death), 289 in Oregon (3 death), 1483 in Pennsylvania (3 deaths), 132 in Rhode Island (1 death), 120 South Carolina, 22 in South Dakota, 148 in Tennessee, 2981 in Texas (10 deaths), 847 in Utah (10 deaths), 46 in Vermont, 191 in Virginia (1 death), 588 in Washington (3 deaths), 33 in Washington, DC, 114 in West Virginia, 4273 in Wisconsin (4 deaths), 72 in Wyoming, 18 in Puerto Rico and 1 in the US Virgin Islands. For updates on the occurrence of this illness in the United States, please visit: <http://www.cdc.gov/h1n1flu/> or <http://www.PandemicFlu.gov>.

International Situation

On June 11, 2009, the World Health Organization declared a pandemic for Influenza A/H1N1, raising its pandemic alert phase to 6. This means that means that the illness has spread to a number of countries worldwide and is easily transmitted between humans. For more information, please visit: http://www.who.int/csr/disease/swineflu/frequently_asked_questions/levels_pandemic_alert/

Previously, the Director-General of World Health Organization has declared the outbreaks occurring throughout the world to be “public health emergency of international concern.” The International Health Regulations (that the United States and many other countries adhere to) direct various actions to be taken when such a public health emergency is recognized.

As of June 29, 2009, the World Health Organization has reported the following laboratory-confirmed human cases of infection with this virus: 2 in Algeria, 2 in Antigua & Barbuda, 1488 in Argentina (23 deaths), 4038 in Australia (7 deaths), 12 in Austria, 4 in the Bahamas, 15 in Bahrain, 1 in Bangladesh, 10 in Barbados, 43 in Belgium, 1 in Bermuda, 126 in Bolivia, 452 in Brazil, 1 in the British Virgin Islands, 29 in Brunei Darussalam, 7 in Bulgaria, 6 in Cambodia, 7775 in Canada (21 deaths), 3 in Cap Verde, 9 in the Cayman Islands, 5186 in Chile (7 deaths), 1442 in China, 88 in Columbia (2 deaths), 255 in Costa Rica (1 death), 2 in Cote d’Ivoire, 34 in Cuba, 25 in Cyprus, 9 in the Czech Republic, 44 in Denmark, 1 in Dominica, 108 in the Dominican Republic (2 deaths), 125 in Ecuador, 50 in Egypt, 226 in El Salvador, 13 Estonia, 2 in Ethiopia, 2 in Fiji, 26 in



Finland, 235 in France, 3 in French Polynesia, 2 in Martinique, 366 in Germany, 86 in Greece, 254 in Guatemala (2 deaths), 118 in Honduras (1 death), 8 in Hungary, 4 in Iceland, 64 in India, 8 in Indonesia, 1 in Iran, 10 in Iraq, 39 in Ireland, 469 in Israel, 112 in Italy, 21 in Jamaica, 1212 in Japan, 18 in Jordan, 202 in Korea, 30 in Kuwait, 3 in Laos, 1 Latvia, 25 in Lebanon, 1 in Lithuania, 4 in Luxembourg, 112 in Malaysia, 8279 in Mexico (116 deaths), 1 in Monaco, 1 in Montenegro, 11 in Morocco, 3 in Nepal, 118 in the Netherlands, 3 in Netherlands Antilles, Curacao, 1 in Netherlands Antilles, St Maarten, 587 in New Zealand, 277 in Nicaragua, 31 in Norway, 3 in Oman, 403 in Panama, 1 in Papua New Guinea, 85 in Paraguay, 360 in Peru, 861 in the Philippines (1 death), 14 in Poland, 11 in Portugal, 10 Qatar, 24 in Romania, 3 in Russia, 1 in Samoa, 69 Saudi Arabia, 5 in Serbia, 599 in Singapore, 9 in Slovakia, 4 in Slovenia, 1 in South Africa, 541 in Spain, 9 in Sri Lanka, 11 Suriname, 67 in Sweden, 49 in Switzerland, 774 in Thailand, 53 Trinidad and Tobago, 2 in Tunisia, 27 in Turkey, 1 in Ukraine, 8 in the United Arab Emirates, 4250 in the United Kingdom (1 death), 1 in the UK Crown Dependency Guernsey, 1 in the UK Crown Dependency Isle of Man, 8 in the UK Crown Dependency Jersey, 27717 in the United States of America (127 deaths), 195 in Uruguay, 2 in Vanuatu, 172 in Venezuela, 84 in Viet Nam, 9 in the West Bank and Gaza Strip, and 6 in Yemen. For updates on the spread of Influenza A/H1N1 illness throughout the world, please visit: www.who.int/en.

QUESTIONS AND ANSWERS

Question: What is a Public Health Emergency?

Answer: According to the World Health Organization, a public health emergency is “an occurrence or imminent threat of illness or health conditions caused by bioterrorism, epidemic or pandemic disease, or highly fatal infectious agents or toxins that pose serious risk to a significant number of people.” On behalf of the Federal government of the United States, the Secretary of the Department of Homeland Security, Janet Napolitano, declared a public health emergency in response to these outbreaks. On Sunday, April 26, 2009, in a White House press conference, Secretary Napolitano stated that this emergency declaration was issued as a standard operating procedure. As a practical matter, the declaration permits the distribution of Federal, State, and local governmental resources for prevention, detection, response, recovery, and mitigation activities for public health.

Question: What is a pandemic?

Answer: According to the World Health Organization, a pandemic is declared when a virus has caused sustained community level outbreaks in more than one region of the World Health Organization. The term pandemic simply means that a disease is affecting countries throughout the world. For more information, please visit: http://www.who.int/csr/disease/swineflu/frequently_asked_questions/levels_pandemic_alert/en/index.html.



Question: What is the role of the Department of Homeland Security?

Answer: The Department of Homeland Security is responsible for coordinating interagency efforts to address the outbreaks caused by the Influenza A/H1N1 virus. Additionally, the Department of Homeland Security is responsible for the following activities:

- Ensuring public health and safety at our border crossings;
- Ensuring public health and safety as people use our transportation systems;
- Ensuring that disease is not carried into the country through smuggling activities;
- Ensuring that people get the correct medications by tracking and confiscating counterfeit pharmaceuticals;
- Assisting states in addressing public health and safety concerns for mass gatherings; and
- Working with the States, Tribes, and localities by distributing grant funding to allow States and localities to address health needs in large-scale emergencies.

Question: The Secretary of the Department of Homeland Security has been named the “Principal Federal Official”. What does that mean?

Answer: According to the National Response Framework, the Secretary of Homeland Security is the Principal Federal Official for domestic incident management. By Presidential directive and statute, the Secretary is responsible for the coordination of Federal resources utilized in the prevention of, preparation for, response to, or recovery from terrorist attacks, major disasters, or other emergencies. The Secretary of the Department of Homeland Security also provides the President with an overall architecture for domestic incident management and coordinates the Federal response, when required, including the support of other Federal partners. Depending upon the incident, the Secretary of Homeland Security also contributes elements of the response consistent with the Department’s mission, capabilities, and authorities.

Regarding the outbreaks caused by the Influenza A/H1N1 virus, as the Principal Federal Official, Secretary Napolitano is in charge of managing and coordinating the Federal response. The Department of Homeland Security is taking the lead for some activities, but is relying on other Federal partners to take the lead in other areas. For example, the Department of Health and Human Services is in charge of laboratory confirmation of the illness, developing a potential vaccine, producing and distributing medical guidance.

Question: What agencies are responsible for handling the Influenza A/H1N1 outbreaks in the United States?

Answer: Currently, the Federal Departments and agencies with primary responsibility for handling these outbreaks in the United States are the Center for Disease Control and Prevention and the Department of Homeland Security. State, Tribal and local public



health, public safety, and emergency management organizations serve as leads for investigating and managing outbreaks in their jurisdictions throughout the Nation, with Federal support.

Question: Some Federal agencies are using the term “nonessential travel.” What does that mean?

Answer: Nonessential travel is travel that is not absolutely necessary. The United States is advising that our citizens avoid traveling to Mexico unless absolutely necessary. If you must travel to Mexico and feel that you are likely to come into contact with the virus, you should consult the travel guidance provided by the CDC to protect your health. Please visit: www.cdc.gov/h1n1flu.

Question: Is the Department taking special precautions at the Southern border?

Answer: No, the Department of Homeland Security is taking its standard precautions at the Northern and Southern borders, as well as all other entry points into the country.

Question: Is it prudent to close the borders?

Answer: The rationale for closing the border when outbreaks are occurring is to prevent the disease from entering the country. The disease is already present in the country. Additionally, WHO is not currently advising any restriction of regular travel or border closures. It is always considered prudent for people who are ill to delay international travel and for people developing symptoms after traveling internationally to seek medical attention pursuant to recommendation from the proper medical authorities.

Question: What is the economic impact of closing the borders?

Answer: Closing the border would stop legitimate trade, commerce, and importation of goods into the United States with an estimated value of approximately \$6.2 billion a day.

Question: If I am not traveling is there medicine available?

Answer: Medications are currently available by prescription through health care providers. In addition, the CDC Division of the Strategic National Stockpile has transported 25% of its antiviral drugs, personal protective equipment and other necessary medical equipment to various distribution points throughout the country. This pre-positioned placement will reduce the delay in getting these medications to states that need them if an outbreak should occur.

Question: Where can I find a list of potential symptoms of the illness caused by the Influenza A/H1N1?

Answer: The symptoms of this illness are similar to those of regular influenza and can include fever, cough, sore throat, body aches, headache, chills, and fatigue. In the past, severe illness (pneumonia and respiratory failure) and deaths have been reported with



influenza infections. Like seasonal flu, infection with Influenza A/H1N1 may cause a worsening of underlying medical conditions. For additional information, visit:
<http://www.cdc.gov/h1n1flu/qa.htm>.

Question: How can I prevent infection?

Answer: Individual prevention efforts should always include frequent hand washing, proper nutrition, fluid consumption, stress management and other activities that generally promote good health. If hand washing is not possible, the use of a hand-sanitizer that kills germs is acceptable. Try to avoid contact with surfaces that you think may be contaminated with the flu virus and refrain from close physical contact with people who are may be infected with the virus. For more information, please visit:
<http://www.cdc.gov/h1n1flu/qa.htm>.

Question: How soon could a vaccine become available?

Answer: The existence of a vaccine becomes critical if effective treatments are not available. Two antiviral drugs – oseltamivir (brand name Tamiflu®) and zanamivir (brand name Relenza®) – have been shown to be effective in treating illness caused by the Influenza A/H1N1 virus. Vaccine production is a complicated process that can take from four to six months and cannot be shortened, given the current state of science and technology. A decision has not yet been made as to whether a vaccine will be produced and distributed throughout the US. However, the Federal government has started the vaccine development process.

Question: Is the illness caused by the Influenza A/H1N1 virus a foodborne disease?

Answer: No, you cannot become infected with Influenza A/H1N1 by eating pork or pork-related products.

Question: Where can I find updates on the number of people affected?

Answer: For the United States, please visit: <http://www.cdc.gov/h1n1flu/index.htm>. For the rest of the world, please visit: www.who.int/en.

OTHER COMMITTEE RESOURCES

Additional references and government resources can be accessed via the Committee on Homeland Security website at <http://www.homeland.house.gov>. Chairman Thompson's statement from April 27, 2009 can also be read at:
<http://homeland.house.gov/press/index.asp?ID=449>.

See also:

“Getting Beyond Getting Ready for Pandemic Influenza”

January 2009 - Committee on Homeland Security Majority Staff Report



U.S. HOUSE COMMITTEE ON HOMELAND SECURITY

Majority staff report prepared at the request of Rep. Bennie G. Thompson, Chairman

<http://homeland.house.gov/press/index.asp?ID=423&SubSection=0&Issue=0&DocumentType=0&PublishDate=0>

###



U.S. HOUSE COMMITTEE ON HOMELAND SECURITY

Majority staff report prepared at the request of Rep. Bennie G. Thompson, Chairman