

Office of the Assistant Secretary for Preparedness & Response

National Biodefense Science Board Washington, D.C. 20201

October 14, 2008

The Honorable Michael O. Leavitt Secretary of Health and Human Services 200 Independence Avenue, S.W. Washington, DC 20201

Dear Secretary Leavitt:

The National Biodefense Science Board (NBSB) formed the Personal Preparedness Working Group in response to information presented at the Board's June 2008 public meeting on specific national efforts to promote personal preparedness. Some of these efforts included: 1) exploring home stockpiles of antibiotics to be used in the case of an anthrax attack, and 2) guidance documents from the U.S. Department of Health and Human Services (HHS) directed to the public and health care providers on prescribing antibiotics, insuring that individuals may maintain their own home stockpiles.

The Board held a public teleconference on October 14, 2008 to consider and discuss recommendations from the Personal Preparedness Working Group of the NBSB. The following recommendations have been approved unanimously by the Board:

RECOMMENDATION #1:

High-quality specific information can and should be obtained from an operational evaluation during the pre-positioning of antibiotic countermeasure programs. Collecting quantitative and qualitative information would enhance rather than detract from the operational aspects of those programs. Moreover, it would provide complementary and supportive data to that gathered in planned studies that make up the core of a new drug application (NDA) package for purpose-built antibiotic stockpiles. This recommendation should be considered for the two separate activities specified below.

- a. Regarding the planned implementation of the Cities Readiness Initiative (CRI)
 Postal Module in Minnesota, we believe that there is extensive experience and
 expertise among the epidemiologists at the Minnesota Department of Health, as well
 as at the Centers for Disease Control and Prevention, for this activity.
- b. Regarding the potential pre-positioning of antibiotics for the January 2009 Inaugural Capitol Region, we believe that there is extensive experience and expertise among the epidemiologists within the National Capitol region, as well as at the Centers for Disease Control and Prevention, for this activity.

RECOMMENDATION #2:

We recommend that operational and qualitative research be conducted in order to better understand what issues and triggers drive individual decisions to participate in personal preparedness activities and their adherence to instructions on proper storage and use of individual antibiotic caches. Lessons can be learned from disaster preparedness in high risk areas for storms (high probability, moderate to high impact) and earthquakes (low probability but possibly catastrophic impact) where personal preparedness has been emphasized for many years.

RECOMMENDATION #3:

A draft HHS document, "Personal Preparedness for an Anthrax Emergency: Benefits and Risks of Home Storage of Antibiotic Drugs: Questions and Answers," was provided to the NBSB members at the August 11, 2008 teleconference. Pending review by the Personal Preparedness Working Group of the NBSB, we recommend that this draft document be considered for, modified, and used during pilot testing in programs such as the CRI Postal Module in Minnesota or any other separate program such as the January 2009 Inaugural Capitol Region program.

Home stockpiling of antibiotics is one strategy that may be utilized to build personal preparedness in the event of a threat against our nation, and HHS officials have expressed their interest in pursuing this particular approach as preparedness for an anthrax attack. Therefore, the NBSB feels that the above recommendations should be taken into thoughtful consideration in an effort to protect, preserve, and advance personal preparedness in our nation.

Sincerely,

Patricia Quinlisk, M.D., M.P.H.

Chair, National Biodefense Science Board