

**National Pandemic Influenza Preparedness Plans:
A Reflection of the preparedness status
of PICTs for the threat of an influenza pandemic**

Background

“Avian influenza remains the number-one danger for global public health” was one of the key messages of the most recent (57th) session of the WHO Regional Committee for the Western Pacific, held 18–22 September 2006 in Auckland, New Zealand. The statement emphasises the call for all member countries to devote more resources and effort towards preparedness for the threat/event of a pandemic of influenza.

The epidemic of avian influenza, otherwise referred to as bird flu, has not been adequately controlled, especially among Asian countries with A (H5N1) predominating. To date, and according to WHO update #72 (5 December 2006), regarding human cases of avian influenza A (H5N1) reported to WHO from 10 countries, cumulative confirmed cases totalled 258; of those, 154 died (case fatality rate (CFR) = 59.7%). Of the countries with more than 10 confirmed cases of H5N1, Indonesia had the highest CFR of 77.0% (74 cases/57 deaths).

The 22 island countries and territories of the Pacific region are at different stages in the development of national pandemic influenza preparedness plans (NPIPPs). Five have completed their first draft and have submitted it to cabinet and had it endorsed, while some are in the process of fine-tuning different versions of their first draft and will be submitting it for cabinet endorsement soon. But most have not tested their plan or component(s) of it (see Table 1).

The Pacific Regional Influenza Pandemic Preparedness Project (PRIPPP), an AusAID and NZAID co-funded project executed by SPC, had officially commenced implementation of its first-year deliverables by July 2006. Some pandemic influenza preparedness specialists (human health) had been recruited and had commenced working with countries on their NPIPP development and addressing other related issues such as surveillance systems (human and animal health aspects) and training. More recruitment of technical staff in both human and animal health will be undertaken in the months to come, and they will be strategically located to facilitate the smooth implementation of PRIPPP, which has a project life of four years.

There is also a CDC-funded project on lab-based influenza surveillance that is being piloted in six island nations. The project enhances the laboratory capacity of island nations to diagnose influenza and to support influenza-like illness (ILI) surveillance, especially in confirming the likelihood of an influenza outbreak.

The above projects are the latest additions to the milestones of success of the PPHSN Coordinating Body focal point in its attempts to facilitate a healthy Pacific through timely preparedness to respond appropriately to threats/outbreaks of infectious diseases or events of national emergency.

Status of PICT NPIPPs

It has now been about three years since the re-emergence of highly pathogenic avian influenza (HPAI) A H5N1 infecting birds/poultry and jumping to infect and even kill human beings. As the threat of pandemic influenza is becoming more imminent while A(H5N1) outbreaks are not controlled, WHO, SPC, UN systems, FAO and OIE have been urging the global community to develop pandemic preparedness plans, test them and, jointly with the developed world, share scarce resources with resource-limited countries, such as PICTs, to attain the minimal level of preparedness.

Table 1 summarises the status of PICT pandemic preparedness plans for the threat/event of a national disaster like a pandemic of influenza. The data are sourced from country visits, email communications and workshops/meetings (national and regional).

PRIPPP is tasked to take the lead role in collaboration with WHO to hasten the process of completion, test the plans or component(s) of the plans, assist assessment of core capacity of PICTs for implementation of International Health Regulations (IHR) using various arms of PPHSN (EpiNet, LabNet, PacNet), and facilitate identifying possible mechanisms/resources for the implementation of NPIPPs.

Table 1: Summary of status of PICT national pandemic influenza preparedness plans (as at 30 November 2006)

	Pandemic Plan drafted/written	Cleared by Health Ministry	Cleared by highest national authority	PP tested (organised validation exercise)	Result
American Samoa	Draft ready Dec 2005	Yes	Recently – US	No	
Cook Islands	Yes – draft	Yes (taskforce reviewing/updating draft)	In process	No	
FSM-Yap	Yes	Yes	FSM – US federal – not confirmed	Yes, Phase 5	
FSM-Pohnpei	Yes	Yes	FSM – US	Yes, Phase 5	
FSM-Kosrae	Yes	Yes	FSM – US	Yes, Phase 5	
FSM-Chuuk	Yes	Yes	FSM – US	Yes, Phase 5	
Fiji Islands	Yes – draft	Yes – AH/HH (together)	In process	No	
French Polynesia	Yes	Yes	Not confirmed	Some testing	
Guam	Draft ready Jan 2006	Yes	US – not confirmed	No?	
Kiribati	Yes – draft	In process	No	No	
Marshall Islands	Yes	Yes	US – not confirmed	Yes, Phase 5	
Nauru	Yes	Yes	Yes	No	
New Caledonia	Yes	Yes	Yes	No	
Niue	Yes	Yes	In process	No	
Northern Marianas	Yes	Yes	Yes	Yes, Phase 5	Fared well
Palau	Yes	Yes	Yes	Yes, Phase 5	Fared well
Papua New Guinea	Early draft	In process	In process	No	
Samoa	Human Health Pandemic Preparedness Plan (HHPPP); Animal Health has completed a separate PP for HPAI (AHPAIPP)	Yes (both agree to harmonise plans and with other sectors)	Yes (HHPPP)	No	
Solomon Islands	Yes – AH and HH separately	In process	No	No	
Tokelau	Yes – draft	Yes	No	No	
Tonga	Yes	Yes	Yes	No	
Tuvalu	Draft	Yes	In process	No	
Vanuatu	Draft in process	No	No	No	
Wallis & Futuna	Draft	Yes	France	No	

PP = preparedness plan; AH = animal health; HH = human health

Conclusion

It is anticipated that with PRIPPP the pandemic preparedness of PICTs will be better facilitated in terms of completing their 'umbrella' NPIPPs, testing the plans or component(s) of them, and developing essential services' contingency or sub-plans, and also facilitating PICTs' accessibility to essential tools of preparedness, including scarce but essential resources.

This year, 2006, marks PPHSN's 10-year anniversary of providing services to PICTs. It has broadened its scope over the years to accommodate other related functions, but has maintained its focus on achieving and sustaining its primary service goals of providing and sharing updated quality surveillance data on outbreak-prone infectious diseases, and assistance in response to threats or outbreaks.

So, *Inform'ACTION* readers as well as PPHSN friends (and 'foes!'), let's commend the efforts of PPHSN in its 10th year of surveillance and outbreak response services to PICTs. Well done! Let's celebrate the 10th birthday of PPHSN with more solid collaboration and networking in the decade to come.

Merry Christmas and a blessed 2007 to all readers.

Malo

Seini Kupu
Influenza Pandemic Preparedness Specialist
SPC