# Interim Pandemic Influenza Risk Management Guidance

**AN OVERVIEW** 

Dr N Janakan
NPO, Communicable Diseases
WHO Sri Lanka

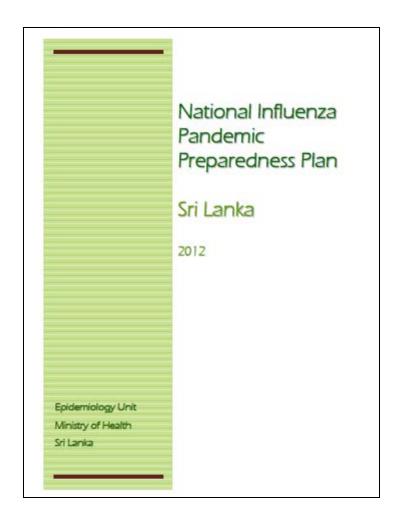
#### **Influenza Pandemics**

- Unpredictable
- Serious consequences on human health & economic well-being globally
- Advanced planning & preparedness are critical to mitigate the impact of pandemic
- Declaration of PHEIC and/or pandemic stresses the need for collective global action & to follow certain regulations/ legal agreements by all countries

# **Background**

- 1<sup>st</sup> pandemic preparedness guidance was issued by WHO in 1999
- Since then 3 revisions have been made in 2005, 2009 & 2013 based on lessons learned & new evidence-based research
- 2013 revision was based on lessons learned during A(H1N1)
   2009 pandemic & suggestions from IHR Review Committee
- Guidance encourages MS to develop risk management plans taking into consideration the local context/ risk assessment
- Countries should consider reviewing / updating their national influenza preparedness & response plans taking into consideration the interim guidance 2013 (not intended to replace national plans)

## Influenza Pandemic Preparedness Plan



http://www.epid.gov.lk/web/attachments/article/180/NIPP\_final.pdf

## **Interim Risk Management Guidance**

- Role of WHO
  - IHR (2005) implementation
  - Pandemic phases
  - Pandemic influenza preparedness (PIP) framework
  - Pandemic vaccine production
- Emergency Risk Management for Health
- National Pandemic Influenza Risk Assessment
- National Pandemic Influenza Risk Management

# IHR (2005) Implementation

- Binding upon 196 state parties & provide a legal/ regulatory framework for timely & effective management of international public health risks (have potential to spread between countries)
- Serious events that endanger global public health are specified by IHR as public health emergencies of international concern (PHEIC)
- PHEIC Serious, sudden, unusual or unexpected event that carries implications for public health beyond affected country's national borders
- Responsibility of determining PHEIC lies with DG/WHO after following certain procedures

# Decision instrument for assessment & notification of events that may constitute a public health emergency of international concern

4 diseases that always have to be notified: polio (wild type virus), smallpox, human influenza caused by a novel virus & SARS.

Diseases that always lead to the use of the algorithm: cholera, pneumonic plague, yellow fever, VHF (Ebola, Lassa, Marburg), WNF, meningitis etc.

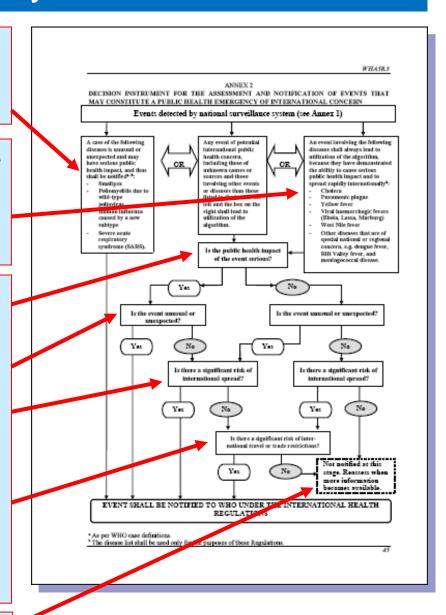
Q1: Is the public health impact of the event serious?

Q2: Is the event unusual or unexpected?

Q3: Is there a significant risk of international spread?

Q4: Is there significant risk to international travel or trade?

Positive response to 2 questions requires a country to notify WHO



**Insufficient information: re-evaluate** 

### **DETERMINATION OF A PHEIC**

- DG/ WHO determines whether an event constitutes a PHEIC
- 5 key criteria:
  - Information from the State / States
  - Decision instrument (Annex 2)
  - Advice of the Emergency Committee
  - Scientific principles, scientific information, other relevant information
  - Risk assessment: to human health, of international spread and interference with international traffic

#### **International Public Health Risks**

- IHR (2005) advices to avoid restrictions on international travel
   & trade by state parties unless absolutely necessary
- However, state parties may impose restrictions on their own after informing WHO with justification
- WHO will inform this decision to other state parties & they may request implementing state party to reconsider their decision

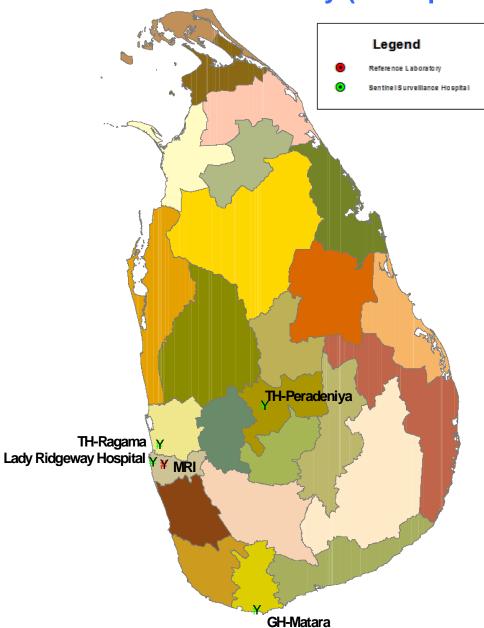
#### **Pandemic Phases**

- Guidance 2013 has simplified the phases & their definitions
- Reflects the WHO's risk assessment of global situation regarding an influenza virus with pandemic potential
- Based on evolving virological, epidemiological & clinical data
- Pandemic phases (based on global risk assessment)
  - Inter-pandemic (preparedness)
  - Alert (preparedness & response)
  - Pandemic (response)
  - Transition (recovery & preparedness)
- Countries are strongly advised to do their own risk assessment taking into consideration the global assessment provided by WHO

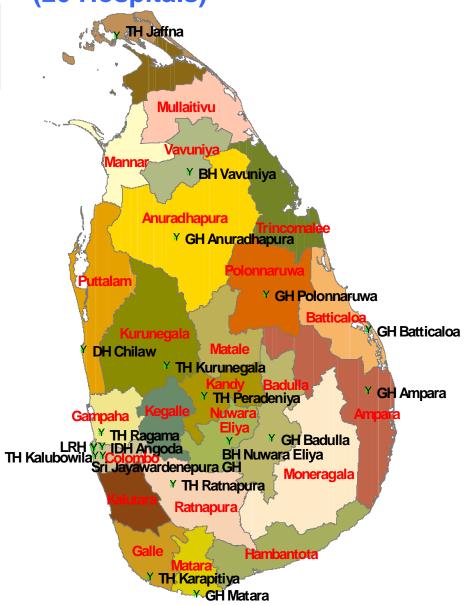
### **Activities during pandemic phases**

- Inter-pandemic phase Surveillance (SARI & ILI), emergency risk management capacity development
- Alert phase Risk assessment, activate stakeholders/ advisory groups, deploy anti-virals, intensify preparedness
- Pandemic phase Risk assessment & scale response
- Transition phase Risk assessment & tail-off response

# **SARI Sentinel Surveillance Hospitals** and Reference Laboratory (4 Hospitals)



# ILI Sentinel Surveillance Hospitals and Reference Laboratory (20 Hospitals)



# Pandemic Influenza Preparedness (PIP) Framework

#### Aims to

- improve sharing of influenza viruses with pandemic potential (for global monitoring & risk assessment, facilitate vaccine development)
- Ensuring equitable access for vaccines & medicines among countries during outbreaks/ pandemics (benefit sharing)

# Pandemic vaccine production

- WHO issues biannual recommendations on the composition of seasonal influenza vaccines
- Recommendations & availability of vaccine viruses announced publicly by WHO & also communicated to vaccine manufacturers
- During an emerging pandemic, selection of pandemic vaccine strain & distribution of vaccine viruses for pandemic vaccine production are critical functions of WHO

## Risk assessment & management

- MS encouraged to use national risk assessments to take risk management decisions for the benefit of country's specific situation & needs
- Risk management involves
  - Policy & resource management
  - Planning & coordination
  - Information & knowledge management
  - Health infrastructure & logistics
  - Health & related services
  - Community capacities