

USACHPPM
DEPUTY CHIEF OF STAFF FOR OPERATIONS
HEALTH INFORMATION OPERATIONS
WEEKLY UPDATE

26 November 2001

RECENT ISSUES

1. **INHALATIONAL ANTHRAX – USA.** The cumulative number of confirmed inhalational anthrax cases associated with bioterrorism is eleven, which is up from ten on the last weekly update. A 94-year old female in Oxford, Connecticut was confirmed to have succumbed to the same strain of anthrax used in the previous bioterrorist cases on 21 November. The woman has no known connection to government/postal offices or media sources. Authorities have not confirmed the source of exposure in this case at this time. The last victim, who died on 31 October, also had an unidentifiable route of exposure and a lack of epidemiological connection.

Location	CT	FL	NY	NJ	DC Metro area	Case Fatality Rate
No. Cases (deceased)	1 (1)	2 (1)	1 (1)	2	5 (2)	45%

2. **CUTANEOUS ANTHRAX – USA.** The cumulative number of confirmed cutaneous anthrax cases associated with bioterrorism is seven, which has not changed from the last weekly update. The following table provides a summation of cutaneous cases. The confirmed cases are not likely to change categorization because treatment was performed and/or the condition resolved prior to definitive diagnostics.

Location	Florida	New York	New Jersey	DC metro area
No. Confirmed Cases	0	4	3	0
No. Suspect Cases	0	3	2	0

3. **ANTHRAX EXPOSURES – USA.**

- On 22 November, the CDC confirmed an anthrax-contaminated letter that was received by the Calvo Mackenna children's hospital in Santiago, Chile. Up to now, the only anthrax-contaminated letters received outside of the U.S. were due to contamination through the State Department postal handling system and involved Russia, Lithuania, and Peru. Many false alarms have also occurred in which the initial anthrax test is positive but follow up tests are negative. False positives have been detected in Germany, Brazil, Kenya, and Pakistan.
- The CDC recommended a ten-day prophylaxis for 1,294 postal employees and 50 contract drivers in Wallingford and Seymour, Connecticut following the diagnosis of inhalational anthrax in an Oxford woman. Environmental samples taken on 11 November from the Wallingford facility were negative, and broader sampling of both facilities is currently underway.
- Delivery of first class mail to the Senate resumed on 20 November after 34 days of suspension; delivery of express mail to certain federal agencies remains suspended.

- The Federal Bureau of Investigation (FBI) announced on 19 November that a protocol was developed by scientific and forensic experts to analyze a suspected anthrax-laden letter to U.S. Senator Patrick Leahy. Scientists from the FBI and USAMRIID in cooperation with a panel of civilian experts agreed on the approach that is hoped to maximize forensic clues. The letter was found on 16 November in one of 280 barrels of unopened mail sent to Capitol Hill being held since the discovery of the Daschle letter. Copies of the letters and envelopes are available at <http://www.fbi.gov/pressrel/pressrel01/102301.htm>.

4. HOMELAND SECURITY – UPDATES.

- Tom Ridge, Director of the Office of Homeland Security stressed in a briefing with the Secretary of Energy that technology was the key in developing strategy against terrorist threats. Aspects of the technology that were highlighted included products developed by several of the national laboratories: (1) biological decontamination foam from Sandia Laboratory; (2) a palm pilot computer that can be transformed into a nuclear detection device from Lawrence Livermore Laboratory; and (3) a network of biological agent detection sensors from a joint program between Los Alamos National Laboratory and Lawrence Livermore. Mr. Ridge stressed the importance of the national laboratories in the development of technology to detect, prevent, and respond to terrorist attacks. Mr. Ridge announced that hundreds of technological applications, some potentially destined for the national laboratories, are now being funneled through the Office of Science and Technology Policy. These technologies have broad military, as well as civil defense, application.

- The Strategic Petroleum Reserve now contains 540 million barrels of oil or 53 days of reserve. The Department of Energy will expand this reserve to 68 days over the next three years under the existing plan. The Strategic Petroleum Reserve exists to protect against future supply disruptions that could be important in military operations.

- The Environmental Protection Agency (EPA) announced that response tools and vulnerability training are being made available this week to water companies, sewage treatment companies, and to chemical manufacturers. The EPA developed detection and treatment protocols based on cooperative inputs between the CDC and Department of Defense. Dissemination of this information is primarily focused through the American Water Works Association, the Association of Metropolitan Water Agencies, and the American Chemical Council. One emphasis is ensuring organizations cross-reference employee names against the Federal Bureau of Investigation watch list database.

- Mr. Ridge also announced that the Office of Homeland Security would team with the National Ad Council for a communication campaign to the American public on antiterrorist threats and countermeasures. One of the communication messages now available includes excellent information on explaining the recent terrorist acts to children, “Talk with Your Kids,” and includes a link to the American Psychological Association with age-specific tips on helping children to cope. Recent messages are available at <http://www.adcouncil.org/crisis/print.htm>.

5. CONSOLIDATED WEAPONS OF MASS DESTRUCTION (WMD) RESOURCES – WORLD HEALTH ORGANIZATION (WHO). The WHO recently consolidated its publications on WMD into a single webpage that provides access to: (1) information on diseases such as anthrax and smallpox; (2) “Public Health Response to Biological and Chemical Weapons,” 2nd edition; and (3) information on chemical and radiological incidents/accidents and emergencies. The website is at http://www.who.int/emc/deliberate_epi.html.

6. CHEMICAL AND BIOLOGICAL DEFENSE – UNITED STATES GENERAL ACCOUNTING OFFICE (GAO) REPORTS.

- GAO released a report on the medical readiness of the Department of Defense (DoD) earlier this month. Recommendations from the report include: (1) clarify expectations for medical readiness; (2) incorporate biological medical readiness in Defense Planning Guidance; (3) determine which medical personnel are qualified to provide specific chembio treatments; (4) develop medical training requirements for chembio contingencies, assess training with proficiency standards and tests, and track individual training and proficiency; and (5) increase chembio exercises involving medical personnel. The full report is available at <http://www.gao.gov/new.items/d02219t.pdf>.

- GAO recommended a risk management approach to identify actions that decrease the risk and mitigate the consequences of a terrorist attack in an earlier report on 31 October. The report describes an effective risk management approach that includes a threat assessment, a vulnerability assessment, and a criticality assessment. The full report is available at <http://www.gao.gov/new.items/d02208t.pdf>.

7. AFGHANISTAN HUMANITARIAN DISASTER RELIEF – U.S. AGENCY FOR INTERNATIONAL DEVELOPMENT (USAID). On 6 November, the United Nations (UN) High Commissioner for Refugees (UNHCR) reported 135,000 Afghan refugees had entered Pakistan since 11 September. Although the UN and nongovernmental organizations are reporting increased population movements since 12 November, there is currently no clear total number of new refugees and internally displaced persons (IDPs). The UN began to reestablish a presence within the country during the week of 19 November, and regular updates are anticipated in the near future. The USAID is providing \$5.5 million to the French humanitarian organization ACTED for food, blankets, winter clothing, and shelter for IDPs. As of 20 November, the USAID has provided 10 medical kits, each of which can provide basic medical supplies and medicines for 10,000 people for three months. The DoD has also air-dropped over 1.7 million humanitarian daily rations (HDRs) into Afghanistan at a cost of over \$120 million. President Bush has authorized village-level reconstruction, and USAID is currently reviewing opportunities for small-scale, spot reconstruction of roads, wells, irrigation system, schools, and housing in northern Afghanistan. Although ACTED believes that most of the drought-affected and many of the conflict-affected IDPs are not likely to return to their homes before spring, there are some indications of refugee return. Since 1 November, nearly 12,000 refugees have spontaneously returned to Afghanistan from Iran. DoD support for refugee populations and IDPs will likely continue to be a focus through the winter as ground troops increase.

8. AFGHANISTAN HEALTHCARE – WORLD HEALTH ORGANIZATION (WHO). On 21 November, a WHO representative released a report from a three-day fact-finding mission

to Kabul, Afghanistan. The report indicates that the technical staff of the Ministry of Health remains in place although the Minister and his two deputies have fled the city. Kabul has five major hospitals and the main overall concern is lack of fuel. Other concerns include the absence of ambulance service in the city and the low morale of hospital staff members, who have not been paid in five months. A critical shortage of qualified health staff is present especially midwives. Although WHO has provided 50 tones of medicine in the past six weeks, basic drugs are at minimal levels. Laboratory test kits for basic lab analyses such as blood tests are lacking. The WHO is sending these test kits, as well as blood bags and reagents for screening HIV/AIDS and hepatitis. There does not appear to be any epidemics in Kabul although local health officials have expressed concern over the potential for a rabies outbreak due to an increase in the number of stray dogs. The WHO is providing vaccines although there are no reported human cases to date. The WHO's staff who have remained in Afghanistan are beginning to strengthen existing programs for priority diseases such as tuberculosis and malaria. International staff returned to Faizabad and Kabul, but WHO has had no contact with the Kunduz staff for several days. The WHO issued a 30-day operational plan for Afghanistan, which includes medical supply procurements, deployment of more health care workers and identification of support for these workers. The report includes a threat assessment, which details the top winter threats as war casualties, respiratory infections, maternal complications and diarrhea. The report, which has a map of health servicing districts, is available at <http://www.who.int/disasters/repo/7438.doc>. The WHO is sending teams to evaluate the health situation in IDP camps in Spin Boldak and other camps along the Pakistan border. An information briefing from 23 November is available at <http://www.who.int/disasters/repo/7452.html>.

9. INFLUENZA AND ANTHRAX DIFFERENTIATION – CDC. The CDC posted a summary version of the 9 November MMWR article “Considerations for Distinguishing Influenza-like Illness from Inhalational Anthrax.” The summary version is available at http://www.cdc.gov/nip/flu/MMWR_summary_11-9.htm.

10. INFLUENZA SURVEILLANCE – USA. The National Flu Surveillance Network reports that five states are under influenza alert: Alaska, Georgia, New York, North Dakota, and Texas. Alaska was elevated from a watch status due to increased activity in Anchorage, and North Dakota was added this week primarily due to activity in York. Although Texas is classified overall as in an alert status, San Antonio is under an influenza warning. Sixteen states are under an influenza watch with three new states being added to the watch: New Jersey, North Dakota, and Michigan. Although Indiana is classified overall as in a watch status, South Bend is under an influenza alert. There are four states that are showing activity during this week that were not showing activity during this time last year: Indiana, Nebraska, Virginia and Wyoming. For more detailed information by city and/or county, please see [Table 1](#). The influenza alert categories are epidemic, warning, alert, watch, first case and no activity. A warning status means that high numbers of cases are being reported daily, an alert status means that a moderate number of cases are being reported as consistently as every other day and a watch status means positive results have been reported in that state.

11. DENGUE FEVER – HAWAII. The Hawaii Department of Health released a histogram depicting the dengue fever outbreak by date of onset. The histogram indicates the outbreak is in recession. The histogram is available at http://www.state.hi.us/doh/dengue/onset_graph.html.

Cumulative, confirmed cases rose from 84 to 87 as of 21 November with two new cases in Maui and one new case in Oahu. Cumulative totals for each island are: Maui = 64; Oahu = 18; and Kauai = 5.

12. BOVINE SPONGIFORM ENCEPHALOPATHY (BSE) – JAPAN. On 21 November, the World Organisation [sic] for Animal Health received a laboratory report of a five-year-old dairy cow testing positive for BSE on ELISA and Western Blot. This is the second case of BSE in Japan. The dairy farm has been isolated and an epidemiological investigation is underway.

13. WHO OFFICE – DEMOCRATIC PEOPLE’S REPUBLIC OF (NORTH) KOREA (DPRK). The WHO opened its first permanent office in DPRK after a recent three-day visit by a WHO representative. The WHO reports a well-established public health system in the main cities but with more rural areas lacking in basic amenities such as running water, electricity, and essential drugs and equipment. DPRK has had several years of food shortages with the rural population being especially affected by conditions such as maternal conditions, tuberculosis, malaria, and children’s diseases linked to malnutrition. Although the WHO reports governmental resolve to improve the health of the population, it predicts that international support will need to continue. Improved international support will likely improve tensions in the region.

14. FOOD AND DRUG ADMINISTRATION (FDA) APPROVALS.

- On 21 November, Xigris was the first biologic approved by the FDA for the treatment of adult patients with severe sepsis who have an especially high risk of dying from sepsis, as measured by a scoring system based on their general health and the severity of illness. Xigris is a genetically engineered version of Activated Protein C, which interferes with the formation of blood clots that can lead to organ failure and death. Xigris is contraindicated for patients who have active internal bleeding, or who are more likely to bleed because of certain medical conditions including recent strokes, recent head or spinal surgery or severe head trauma. Eli Lilly and Co., in Indianapolis will market the product. This product has potential use in an adverse military environment.
- On 20 November, Ortho Evra was the first transdermal (skin) patch approved by the FDA for birth control. The weekly patch releases norelgestromin (a progestin hormone) and ethinyl estradiol (an estrogen hormone) through the skin into the bloodstream. The patch is applied once weekly for three weeks to the lower abdomen, buttocks or upper body other than the breasts. The fourth week is patch-free to allow for menstruation. The product was less effective in women who weighed in excess of 198 pounds. The patch did not stay adhered to five percent of women in the study and two percent withdrew due to skin irritation. RW Johnson based in New Jersey will manufacture and market the Ortho Evra. This drug has potential use in the military population, but the adherence of the patch may require evaluation in a deployment setting.
- Also on 20 November, Tracleer (bosentan) tablets were the first oral medication approved by the FDA for pulmonary arterial hypertension (PAH). Tracleer blocks the action of endothelin, which narrows blood vessels and elevates blood pressure. High concentrations of endothelin have been found in the plasma and lungs of patients with PAH. Because of the risk of liver toxicity and fetal damage, Tracleer is available only through a direct distribution program from

the drug's manufacturer, Actelion Pharmaceuticals US, Inc., in South San Francisco, California. It is not available in commercial pharmacies. This drug has potential use primarily in the retiree population.

15. FDA WARNING – DIETARY SUPPLEMENT LIPOKINETIX. On 20 November, the FDA issued a warning to immediately halt use of Lipokinetix, which is marketed as a dietary supplement by Syntrax Innovations, Inc. The drug has been implicated in multiple reports of persons who developed livery injury or liver failure while using the product. Symptoms associated with the product include nausea, weakness, fatigue, abdominal pain, or any change in skin color. Health care professionals or consumers are urged to report adverse events to FDA's MedWatch adverse event and product problem hot line at 1-800-FDA-1088 or via the Internet at <http://www.fda.gov/medwatch/how.htm>.

16. HUMAN THERAPEUTIC CLONING – ADVANCED CELL TECHNOLOGY (ACT), INC. On 25 November, ACT announced the cloning of a human cell. The company's stated goal is to develop stem cells that are capable of differentiating into a variety of cells that could be potentially used as immune-compatible cells for age-related diseases. The report was published in the 25 November issue of the Journal of Regenerative Medicine, and the press release is available at http://www.advancedcell.com/pr_11-25-2001.html. Cell regeneration technology has broad application across a range of medical specialities.

17. HIV DRUG RESISTANCE – NATIONAL INSTITUTES OF HEALTH. The NIH reported on 22 November that a study revealed that the rate at which the HIV virus disappears from the blood during the first week of treatment is predictive of the drug regimen's long-term effectiveness. The study appears in the current issue of the *Lancet* and the news release is available at <http://www.nih.gov/news/pr/nov2001/niaid-22.htm>.

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Count	State	Influenza Category			
		Watch	Alert	Warning	Epidemic
1	AL		Anchorage		
2	AR	Little Rock			
3	CA	Fresno/Long Beach			
4	FL	Dade County/ Jacksonville			
5	GA		Fayetteville		
6	IL	Bloomington			
7	IN	Richmond	South Bend		
8	KS	Norton			
9	LA	Bogalusa/Metairie/ New Iberia			
10	MI	Novi			
11	NE	Hastings			
12	NC	Brevard			
13	ND		York		
14	NJ		Mount Holly		
15	NY	Brooklyn	Ridgewood		
16	PA	Pittsburgh			
17	SD	Roscoe			
18	TX	Austin/Texarkana		San Antonio	
19	UT	Salt Lake City			
20	VA	Reston			
21	WY	Lander			

Table 1: Influenza Surveillance as reported by the National Flu Surveillance Network