WORLD HEALTH ORGANIZATION



ORGANISATION MONDIALE DE LA SANTE

WHO OFFICE AT THE UNITED NATIONS BUREAU DE L'OMS AUPRÈS DES NATIONS UNIES

World Health Organization

Economic and Social Council Special Event - Avian Flu 3 November

Distinguished Members of the Economic and Social Council,

Pandemic influenza. What is the current situation?

A pandemic can start when three conditions are met: a virus new to humans emerges; it infects humans, causing serious illness; and it spreads easily and sustainably among humans. All the prerequisites for the start of a pandemic have been met, save one: the establishment of efficient and sustained human to human transmission of the virus.

So far, out of the 122 known cases of humans being infected by H5N1, there have been 62 confirmed deaths in four countries in Asia. This virus does not spread easily among humans, but is having a huge effect on bird populations as it moves across the world.

So why are we raising the alarm?

Because, once a new flu virus <u>is</u> able to infect humans easily and spread rapidly, it will cause a pandemic.

The information we have so far shows this bird flu virus to be gradually changing. Flu viruses are famous for their adaptability. Every time H5N1 infects an animal or human, it has the opportunity to change, and improve its transmissibility. The human pandemic influenzas of previous centuries have been caused by developments in bird flu viruses that have allowed them to infect humans rapidly and easily.

We cannot stop viruses from changing, but we can limit their opportunities to evolve in human hosts. By forecasting and preparing, we can take steps to limit a pandemic's damage. That damage is potentially enormous - not just to health, but to society as a whole. Remember SARS. The economic cost of SARS has been estimated at \$30 billion. Yet remember - there were fewer than 800 deaths throughout the whole outbreak.

Some countries are better able than others to prevent the spread of avian flu to their poultry flocks, by using vaccination against H5N1, or by sheltering domestic stock from infectious migratory birds.

We are not able, at present, to say the same for pandemic influenza. Every country, every population, is at risk for infection with pandemic influenza, whether or not it has sick birds.

What can be done?

• We can reduce the risk of the emergence of a pandemic virus.

- We must minimize human exposure to the bird flu virus. It is essential that culling and compensation schemes are funded, in place, and effective. Farmers must know that they will be fairly compensated for the destruction of infected poultry or they will not come forward.
- We must maximize the use of the available vaccine against "normal" seasonal flu.

• We can make preparedness plans.

- Once the virus has gone pandemic it will be too late to prepare. There will only be time to react. WHO has sent guidance to each country on what to do. But too few are ready with a plan. Every government must be able to respond rapidly and effectively when the time comes.

We can improve the speed and sensitivity of surveillance.

- All countries need to be able to detect, investigate and report cases without delay. That information has to be quickly produced, and shared freely among the international community. This will enable countries to quickly dispatch antiviral stockpiles and take other measures that will stop or limit the spread of infection.

We can make sure that everyone knows what to do.

Good communication is going to be a key to success or failure. In each phase, communication, especially risk communication, is vital. This is the best way to put populations on guard and help communities to act responsibly. Minimizing social and economic disruption will be an important result of preparedness planning.

We can put resources now into vaccine development.

- The best protection of all is an effective vaccine. There are promising developments under way, and we are following these closely. There is a meeting being held right now, today, in WHO to review this issue. But we currently do not yet have a vaccine that we know will be safe and effective. Nor is there sufficient manufacturing capacity at present. The world will need to produce billions of doses of safe vaccine when the time comes. The lead time between the emergence of the virus and the production of the vaccine must be as short as possible to minimize the death toll.

In summary, there are several outstanding capacity and resource issues.

• In surveillance

- The needs are: better surveillance for disease in animals and humans; field investigations; diagnostic support; and incentives for people to report.

• In communication

- infrastructure, skills and resources are immediate and long-term needs, at all levels.

• In production capacity

- Antivirals may be able to help to contain infection in the event of a pandemic. Supplies of oseltamivir are currently inadequate to meet demand.
- Producers of vaccine against seasonal flu can only make enough for current demand - this is a fraction of what would be needed for production of global supplies of a vaccine against pandemic influenza. Scaling up seasonal flu vaccine production now will support manufacturing capacity for later.
- The world needs a vaccine against pandemic influenza.
 - Investment is needed in research, and in manufacturing capacity.

International collaboration is essential for success. WHO, together with FAO, OIE and the World Bank, is hosting an international collaborative meeting next week, 7th to 9th November, in Geneva to make sure that we are working on a "joined up" solution to the situation as it develops. As priorities, we have to confront the capacity and resource issues, and we have to fill the gaps.