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Description of document: Centers for Disease Control (CDC) Directors Situation Update Briefs on Novel 2009 Influenza A (H1N1), August-December 2009

Requested date: 09-May-2020

Release date: 21-February-2021

Posted date: 28-August-2023

Source of document: FOIA request
CDC/ATSDR
Attn: FOIA Office, MS-D54
1600 Clifton Road, N.E.
Atlanta, GA 30333
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[FOIA Public Access Link \(PAL\)](#)

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Centers for Disease Control
and Prevention (CDC)
Atlanta GA 30333
February 25, 2021

Via email

This letter is regarding to your Centers for Disease Control and Prevention and Agency for Toxic Substances and Disease Registry (CDC/ATSDR) Freedom of Information Act (FOIA) request of May 9, 2020, assigned #20-01570-FOIA, for:

“A copy of each Director's Situation Update Briefs on Novel 2009 Influenza A (H1 N1), August - December 2009.”

We located 254 pages of responsive records (69 pages released in full; 8 pages disclosed in part; 177 pages withheld in full). After a careful review of these pages, some information was withheld from release pursuant to 5 U.S.C. §552 Exemption 5.

EXEMPTION 5

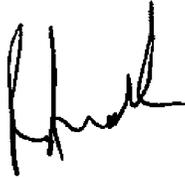
Exemption 5 protects inter-agency or intra-agency memorandums or letters which would not be available by law to a party other than an agency in litigation with the agency. Exemption 5 therefore incorporates the privileges that protect materials from discovery in litigation, including the deliberative process, attorney work-product, and attorney-client privileges. Information withheld under this exemption was protected under the deliberative process privilege. The deliberative process privilege protects the decision-making process of government agencies. The deliberative process privilege protects materials that are both predecisional and deliberative. The materials that have been withheld under the deliberative process privilege of Exemption 5 are both predecisional and deliberative, and do not contain or represent formal or informal agency policies or decisions. Examples of information withheld include draft/provisional presentations and briefs.

You may contact our FOIA Public Liaison at 770-488-6277 for any further assistance and to discuss any aspect of your request. Additionally, you may contact the Office of Government Information Services (OGIS) at the National Archives and Records Administration to inquire about the FOIA mediation services they offer. The contact information for OGIS is as follows: Office of Government Information Services, National Archives and Records Administration, 8601 Adelphi Road-OGIS, College Park, Maryland 20740-6001, e-mail at ogis@nara.gov; telephone at 202-741-5770; toll free at 1-877-684-6448; or facsimile at 202-741-5769.

If you are not satisfied with the response to this request, you may administratively appeal by writing to the Deputy Agency Chief FOIA Officer, Office of the Assistant Secretary for Public Affairs, U.S. Department of Health and Human Services, Hubert H. Humphrey Building, 200 Independence Avenue, Suite 729H, Washington, D.C. 20201. You may also transmit your appeal via email to FOIARequest@psc.hhs.gov.

Please mark both your appeal letter and envelope “FOIA Appeal.” Your appeal must be postmarked or electronically transmitted by May 26, 2021.

Sincerely,

A handwritten signature in black ink, appearing to read 'R. Andoh', with a stylized flourish at the end.

Roger Andoh
CDC/ATSDR FOIA Officer
Office of the Chief Operating Officer
(770) 488-6399
Fax: (404) 235-1852

Enclosures

20-01570-FOIA



**Director's Update Brief
novel 2009-H1N1**

**TUESDAY
01 SEP 2009 1045 EDT**

**Day 137
Week of Improved Coordination**

Key Events

novel 2009-H1N1 – 01 SEP 2009

– Key events:

- novel 2009-H1N1 Declarations
 - WHO: Pandemic Phase 6 (11 JUN 2009 1600 EDT)
 - Outbreaks in at least one country in > two WHO regions
 - USG: Public Health Emergency declared (26 Apr 2009)
 - Renewed by HHS Secretary Kathleen Sebelius
 - HHS: Downgraded to Phase 1 – Awareness (9 May 2009)
- **US Cases** (as of 27 AUG (updated); next update 4 SEPT 2009)
- **No longer reporting total cases.**

US TOTALS	HOSP	DEATHS
CASES	(b)(5)	
SLTTs AFFECTED		



Internal Use Only (FIUO)---For Official Use Only (FOUO)

Epidemiology/Surveillance
BRFSS Surveillance Plan - Overview
novel 2009-H1N1 – 01 SEP 2009

- September 1 – March 31 2009
- 49 states and 4 territories participating
- 250 -350 interviews per state per month (~15,000/month)
- 800 interviews per region per week (~3,000/month)
- Interviews front loaded during first two weeks of month (not ideal)
- Data collected
 - Incidence ILI
 - Medically attended ILI
 - Hospitalization
 - Diagnosis flu
 - Household attack rate



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At-Risk Populations
Background
2009-H1N1 – 01 SEP 2009

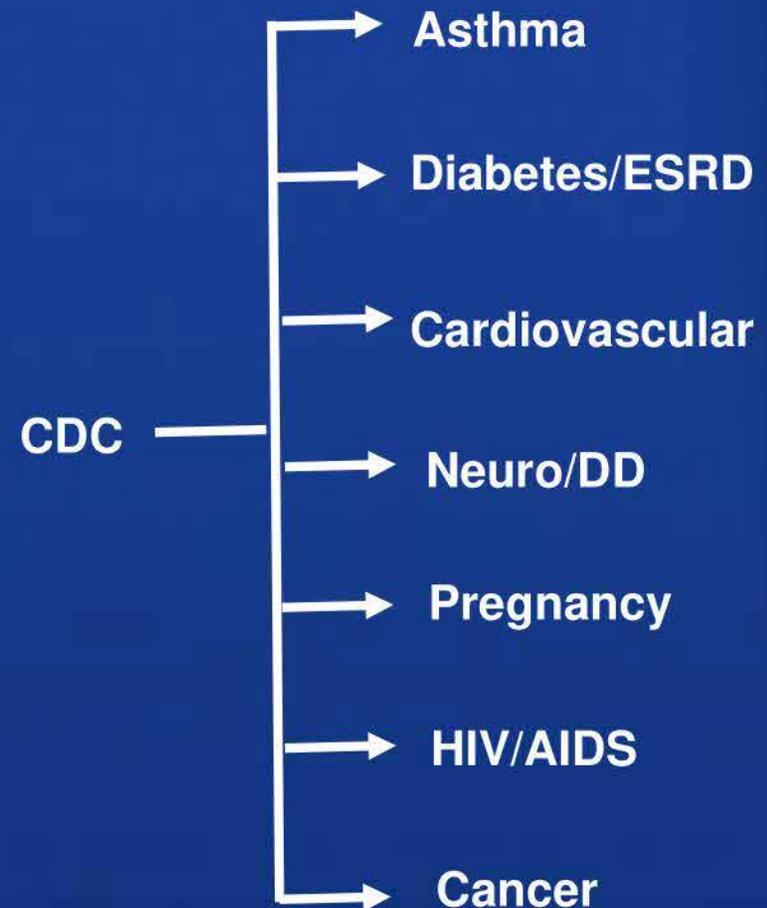
- Effective outreach to medically high-risk populations essential to increase:
 - 2009 H1N1 influenza vaccine uptake
 - Early and appropriate use of antivirals
- Many medically high-risk individuals do not self-identify as being at high-risk

(b)(5)



At-Risk Populations
Strategy
2009-H1N1 – 01 SEP 2009

- Network or 'pipeline' for getting vaccine and antiviral info to medically high-risk groups; clinicians, service organizations
- Coordination of agency-wide SMEs with Vaccine TF, MCCM, JIC is key component
- At-Risk Populations team
 - Identifies and engages agency-wide SMEs
 - Facilitates collaboration among EOC-based and agency-wide SMEs
 - Other federal, SLTT and public health partners



At-Risk Populations
Population Engagements
 2009-H1N1 – 01 SEP 2009

Groups Engaged

Week of August 24-28

- 12 conf. calls or Webinars targeting organizations serving At-Risk populations and public health partners
- Coordinated with HHS, White House Office of Public Engagement
- Attendees represent organizations with large followings; able to distribute info to constituents

Medically High-Risk		Minority and other communities	
No.	Population	No.	Population
246	Disability, Asthma	157	Immigrant and Non-English speaking
169	HIV/AIDS	82	African American
--	Maternal Health	138	American Indian
		341	Broad Constituency



At-Risk Populations
Lessons Learned
2009-H1N1 – 01 SEP 2009

- Generally good interest, internal and external participation in conf. calls/Webinars
- Nuanced questions, points for clarification. Examples:
 - ACIP H1N1 prioritization: home care providers for disabled persons; cognitive, neurologic/neuromuscular disorders
- Importance having multidisciplinary CDC SMEs for Q&A
 - H1N1 Influenza
 - At-risk population-specific
 - Outreach/communications (Twitter, new media)



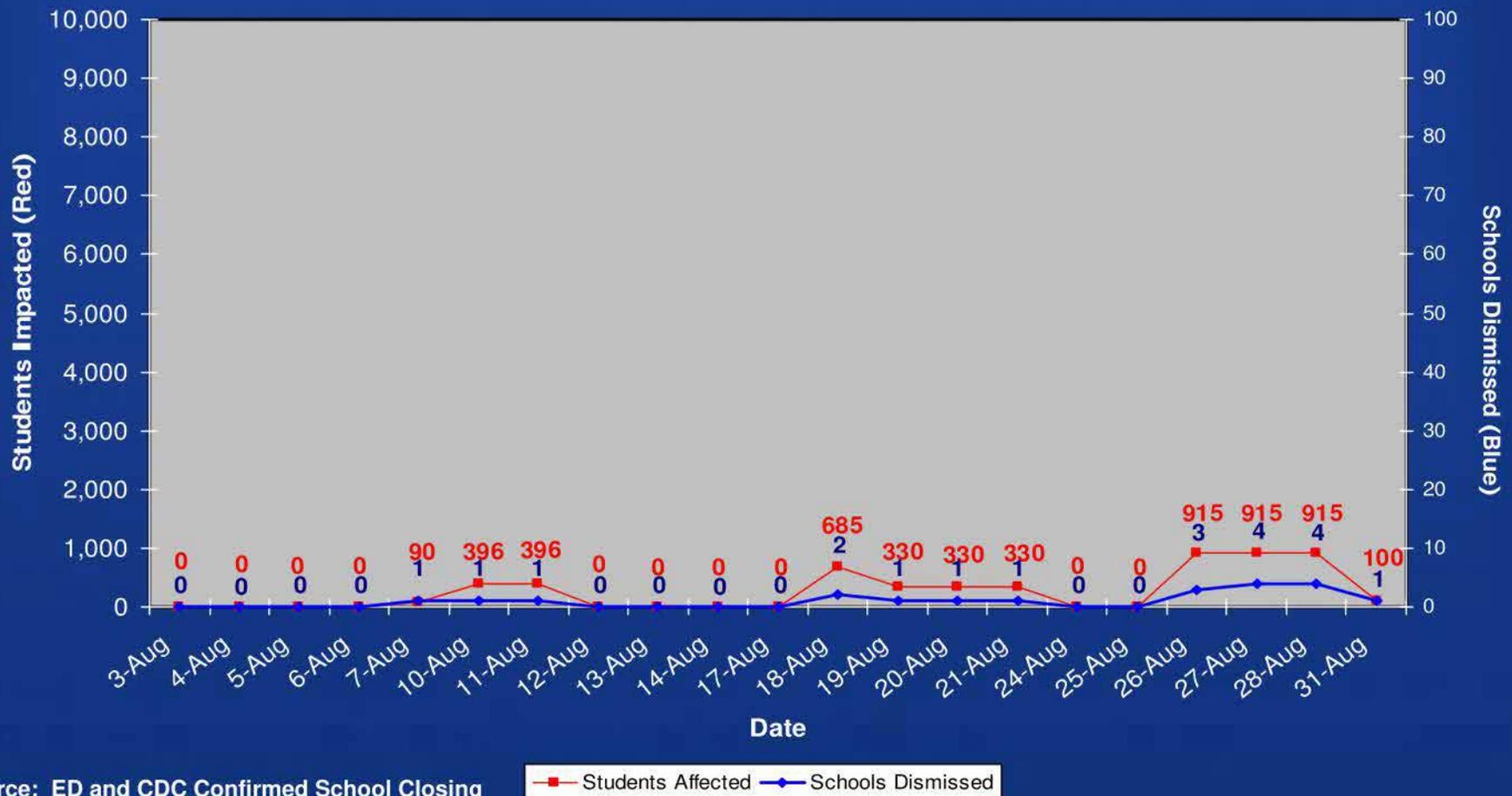
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Supporting Documentation

Community Measures Task Force (CMTF)
School Dismissal Monitoring System, United States, 8/3 - 8/31, 2009
 novel 2009-H1N1 – 01 SEP 09

- One school was detected dismissed due to H1N1 in 1 state on 31 August 2009.
- The dismissal impacted approximately 100 students.



Source: ED and CDC Confirmed School Closing Reports released each weekday at 2:00pm

—■— Students Affected —◆— Schools Dismissed



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Joint Information Center (JIC)
Day Care Guidance Roll-out Plan
novel 2009-H1N1 – 01 SEP 2009

- Day care guidance anticipated to be released Thursday/Friday 03/04 SEP
 - Likely to be released as part of CDC press event 03 SEP
 - Press event will also feature MMWR on pediatric deaths from 2009 H1N1 outbreak Apr-August 2009
- Day care communication toolkit to be posted Thursday or Friday 02/03 SEP
 - Secretary Duncan (DED) to highlight toolkit as part of press event Friday 04 SEP



Joint Information Center (JIC)
***Communication Plan for CDC Response to IOM Statement of Conclusions
Regarding Respiratory PPE for Health Care Provider***

novel 2009-H1N1 – 01 SEP 2009

Stakeholder calls

- 31 AUG 3 call with Unions
 - Purpose: lay out framework and field questions from broad array union leaders.
 - Agenda
 - Short medical overview about what we know about H1N1 so far
 - Desire to work with unions collaborative as we develop PPE/vaccine deployment
 - Note upcoming IOM study and development of health guidance/broader federal workforce guidance.
 - Prior to IOM release--Interagency call: DHHS ASPR, DHS, DOL, NVPO, VA, DOD
- ASTHO call (date TBD)
- Call with clinician organizations (IDSA, SHEA, HICPAC, APIC, VA, Hospital Associations) (date TBD)
- Follow up call with union leaders planned for 08 SEP to address evolving questions and concerns related to guidance and policies
- 15 SEP OPM Public CHCO meeting



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Joint Information Center (JIC)
***Communication Plan for CDC Response to IOM Statement of Conclusions
Regarding Respiratory PPE for Health Care Provider***

novel 2009-H1N1 – 01 SEP 2009

Press Engagement

- An embargoed copy of IOM release will be sent to press at 0900 AM 02 SEP.
- IOM press release at 1100 AM 03 SEP.
- CDC is planning a press event 1200 PM 03 SEP related to MMWR publication.
- CDC spokesperson will need to be prepared to answer questions about IOM release, and CDC reaction as early as 0900 AM 02 SEP.



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**Director's Update Brief
novel 2009-H1N1**

**FRIDAY
02 OCTOBER 2009**

Day 168

The information provided in this briefing is considered provisional and preliminary and will not be officially released by the Centers for Disease Control and Prevention until 1100 EDT hours daily.

Director's Critical Information Requirements (DCIRs)

novel 2009-H1N1

24 Hour Immediate Telephonic Notification

- Genetic mutation that may make the novel 2009-H1N1 virus resistant to zanamivir
- Clusters of disease of resistant viruses
- Request for stockpile assets
- Change/declaration in US Government response or policy
- Threat or damage to any CDC facility (including SNS storage facilities) that affects mission performance
- Significant adverse reactions to antiviral use
- Death or serious injury/illness of CDC employee

Updated: 17 Sept 2009



novel 2009-H1N1 – 02 OCT 2009

Data are provisional and will not be officially released by the CDC until 1100 EDT

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Director's Priority Information Requirements (DCIRs)

novel 2009-H1N1

Immediate Telephonic Notification 0700-2200, Otherwise Email

- Threats that might impact CDC operations
- Compromise in CDC's capability to meet deployment needs
- Change in international response actions or strategy
- Significant event regarding US infrastructure/ economy
- Delay in completion of director's tasking or guidance document clearance

Updated: 17 Sept 2009



novel 2009-H1N1 – 02 OCT 2009

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novel 2009-H1N1 Declarations:

- WHO: Pandemic Phase 6 (11 JUN 2009 1600 EDT)
 - Outbreaks in at least one country in > two WHO regions
- USG: Public Health Emergency declared (26 Apr 2009)
 - Renewed by HHS Secretary Kathleen Sebelius
- HHS: Downgraded to Phase 1 – Awareness (9 May 2009)

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Joint Information Center (JIC)
News Media Summary Report Date 10/2/09

- Print/internet stories: 140 (+24%)
- National TV stories: 37 (-10%)
- Local TV stories: 681 (+26%)
- Total TV stories: 718 (+23%)

*% change based on comparison with same day previous week

Major Themes:

Risk Perception

- H1N1 “isn’t any more deadly than seasonal flu”; most H1N1 deaths were related to bacterial infections

Vaccine Developments

- States reporting number of doses and when they will receive vaccine; varied reports across states (ranges from mid-November to late January)
- Healthcare workers, pregnant women, and young children will be first to receive vaccine
 - First doses in form of nasal spray mist (2 doses, 28 days apart)
- Largest U.S. supplier reporting shortages of seasonal flu vaccine (running 50% behind) due to rush of H1N1 vaccine; could take until November for more shipments to arrive



novel 2009-H1N1 – 02 OCT 2009

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Points of Misinformation and Potential Confusion

- When will the vaccine become available?
- Mixed messages on vaccine safety (e.g. TV personality Dr. Oz who expressed uncertainty about vaccine safety vs. CDC message on vaccine safety)

Emerging Themes *(not prominent, but significant or potentially emerging themes)*

- Projected obstacles in responding to H1N1: healthcare workers having to stay home to take care of children, parents missing work, hospitals running out of room
- Hospitals opening drive-thru and drive-up tent clinics to screen and treat influx of swine flu patients.
- Popular doubts over vaccination:
 - 43% are concerned about the vaccine safety
 - Most parents may not be willing to get their children immunized
 - Just a third of people under 30 plan to get vaccinated



Director's Update Brief novel 2009-H1N1

Tuesday
4 AUG 2009 0815 EDT

Day 109
Week of School Guidance and Intensifying Media

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Pre-decision/Draft

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Key Events



novel 2009-H1N1 – 4 AUG 2009

- **Key events:**
 - novel 2009-H1N1 Declarations
 - WHO: Pandemic Phase 6 (11 JUN 2009 1600 EDT)
 - Outbreaks in at least one country in > two WHO regions
 - USG: Public Health Emergency declared (26 Apr 2009)
 - Renewed by HHS Secretary Kathleen Sebelius
 - HHS: Downgraded to Phase 1 – Awareness (9 May 2009)

- **US Cases** (as of 30 July 2009; next update 7 August 2009)
- **No longer reporting total cases.**

US TOTALS	HOSP	DEATHS
CASES	(b)(5)	
SLTTs AFFECTED		

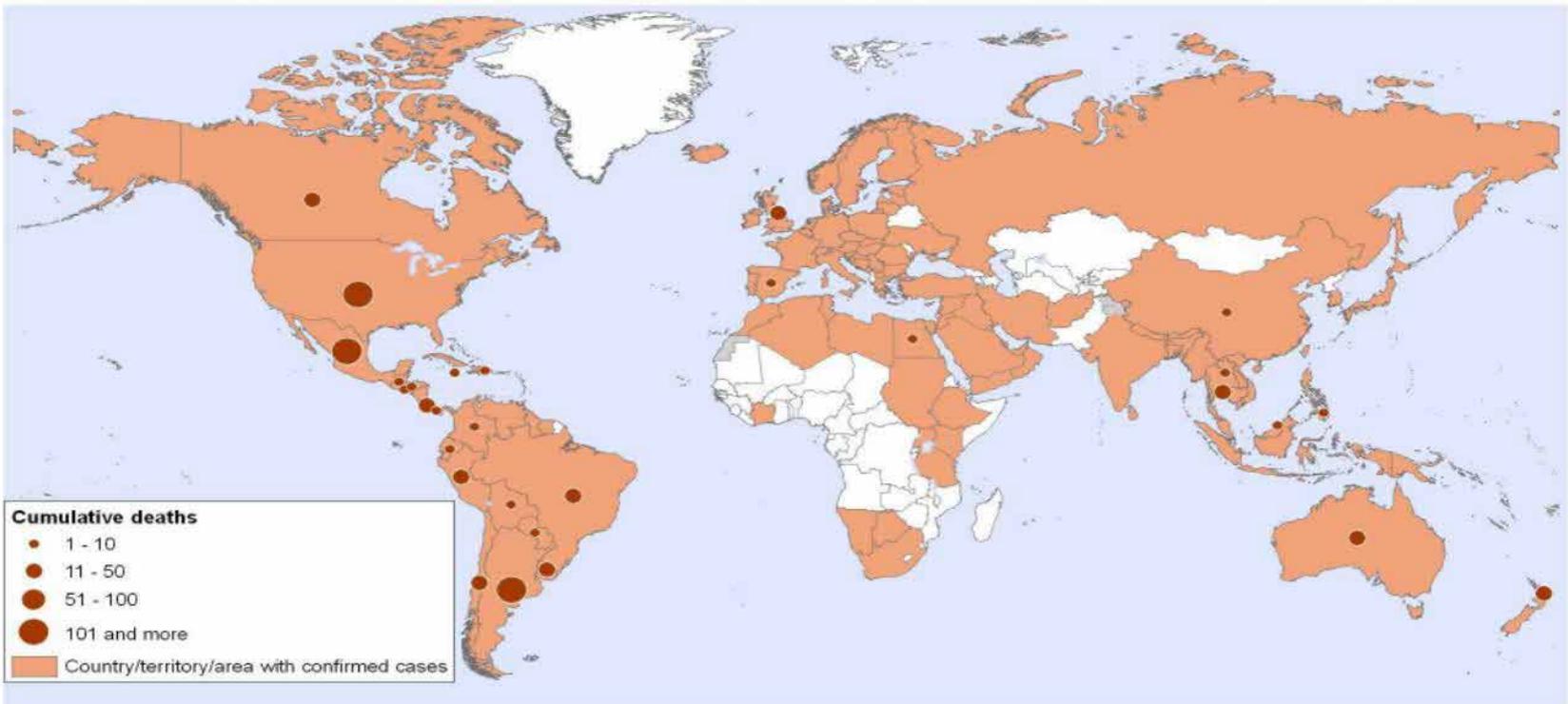


International Global Update novel 2009-H1N1 – 4 AUG 2009



- As of July 27, WHO reports 134,503 cases and 816 deaths
- Countries no longer required to test and report so numbers are underestimate

Pandemic (H1N1) 2009, Status as of 22 July 2009
Countries, territories and areas with lab confirmed cases and number of deaths as reported to WHO



The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted lines on maps represent approximate border lines for which there may not yet be full agreement.

Map produced: 24 July 2009 10:00 GMT

Data Source: World Health Organization
Map Production: Public Health Information
and Geographic Information Systems (GIS)
World Health Organization



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(b)(5)



Laboratory
Antigenic Characterization of Virus Isolates
novel 2009-H1N1- 04 AUG 2009



- **Some variation in reactivity of novel 2009 H1N1 viruses becoming apparent**
 - **Majority of isolates react well with vaccine strain**
 - **Less than 5% of isolates showing 2-4 fold decrease in reactivity compared with A/California/07/2009 vaccine strain**
 - **8 fold or greater reduction would be cause for concern**
- **Increased proportion of low reacting seasonal H3N2 viruses noted by all WHO Collaborating Centers**

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novel 2009-H1N1 – 4 AUG 2009

- **School dismissal monitoring system became operational 8/3**
- **No H1N1-related school dismissals detected**

- **CDC Guidance for School (K-12) Responses to Influenza During the 2009-2010 School Year**
- **Scheduled for public release August 7**
- **Guidance will be accompanied by Executive Summary, Talking Points, Q&As, Communications Toolkit**
- **Preparations ongoing to provide technical assistance**

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novel 2009-H1N1 – August 3, 2009

-
- **Key H1N1 Social Media Stats:**

	Daily (Aug 2)	Total (Apr 22 – Aug 2)
• RSS: Views of H1N1 Flu Feeds	134,115	16.06 M
• YouTube: Views of H1N1 Videos	4,014	1.96 M
• Widgets: Views of H1N1 Widgets	3,014	3.28 M
• Podcasts: Views of H1N1 Podcasts	1,682	680,181
• Twitter: Clickthroughs from Tweets	230	407,531
• Twitter: Followers	4,665	667,716

Tweet summaries:

- First deaths; (South Africa; India)
- Sacramento-area nurse--California's first case of a healthcare worker dying from the swine flu virus
- Seven Swine Flu Cases Confirmed at Coast Guard Training Center
- H1N1 likely to affect schools
- Russian soccer fans urged to drink whiskey to "ward off swine flu" (Yahoo buz)



**Joint Information Center (JIC)
novel 2009-H1N1 – August 4, 2009**



Date	Event	Participants
August 3, 2009	<u>Congressional Recess Packages Distributed</u> Toolkits, Talking Points, Widgets <u>Office of Safety and Drug Free Schools Brief</u>	DHHS/WH Dr. Schuchat
August 4, 2009	<u>Web Cast with Mayors/Locals</u> Elu Summit Content <u>3 News briefings “off the record”</u>	Dr. Schuchat Secretaries: ED, DHHS, DHS
August 6, 2009	ED Stakeholders Meeting <u>New School Guidance</u>	Secretary Duncan PTA, etc.
August 7	News Briefing <u>New School Guidance</u>	Dr. Frieden @ DHHS
Week of August 10	Release Business Guidance	Department of Commerce Interagency Roll Out



**Activation Deployments
Current Deployments
novel 2009-H1N1 – 04 AUG 2009**



Employees Supporting Response from HDQRTS	International Deployments			Domestic Deployments			Grand Total*
	Deployed	Pending	Potential	Deployed	Pending	Potential	
1750	5	0	0	0	0	200	1955

*Note: Total number of HDQRTS personnel that have worked or volunteered to support the event since 23 April

Current Deployments:	Deployed
Argentina GOARN Epi	2
Argentina Bilateral Epi	1
Australia Bilateral Epi	1
Kenya Bilateral Epi	1
CDC Currently Deployed Total	5

International Deployments in Green Text



**Activation Deployments
Pending and Potential Deployments
novel 2009-H1N1 – 04 AUG 2009**



Pending Deployments: (Approved Missions)	Target Date	Pending
None		0
Pending Deployments Total		<u>0</u>

Potential Deployments	Target Date	Pending
DGMQ US Exit Screening	TBD	200
Potential Deployment Total		<u>200</u>



Staff Rhythm



novel 2009-H1N1 – 4 AUG 2009

Time (EDT)	Meeting	Location
0730	Operations Synchronization Huddle	Executive Conference Room
0815	Director's Update Brief	Executive Conference Room
0900	Fusion Meeting	Executive Conference Room
0930	EMC H1N1 Pandemic Planning	Bldg 21, 3028C
1100	H1N1 Update-Senior Mgnt ESF#8 Conference Call	Conference Call Only
1100	H1N1 Medical Care & Countermeasures Meeting	Executive Conference Room
1330	S3 Meeting (H1N1 Senior Leaders)	Executive Conference Room
1500	H1N1 Budget Synchronization & Strategy Meeting	Executive Conference Room
1600	CSTE – School Dismissal Monitoring	Conference Call Only



**Director's Critical Information Requirements
novel 2009-H1N1 – 4 AUG 2009
24 Hour Immediate Telephonic Notification**



- Illness compatible with novel 2009-H1N1 in any CDC staff or other person involved in the investigation
- Genetic mutation that may make the novel 2009-H1N1 virus resistant to zanamivir
- Request for stockpile assets
- Change/declaration in US Government response or policy
- Threat or damage to any CDC facility (including SNS storage facilities) that affects mission performance
- Significant adverse reactions to antiviral use
- Death or serious injury/illness of CDC employee



**Director's Priority Information Requirements
novel 2009-H1N1 – 4 AUG 2009**



Immediate Telephonic Notification 0700-2200, Otherwise Email

- Threats that might impact CDC operations
- Compromise in CDC's capability to meet deployment needs
- Change in international response actions or strategy
- Significant event regarding US infrastructure/ economy
- Delay in completion of director's tasking or guidance document clearance

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Supporting Documentation

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**Director's Update Brief
novel 2009-H1N1**

**THURSDAY
05 NOVEMBER 2009**

Day 202

Day 32 of Vaccination

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Pre-decision/Draft

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PHER Gap Assessment

- Purpose: indentify and report current strengths and gaps in pandemic H1N1 influenza planning and response capacities and capabilities.
- Data reported used for situational awareness, to improve planning and coordination at the local, state, and federal levels, and to identify and delivery targeted technical assistance



novel 2009-H1N1 – 05 NOV 2009

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State and local health departments used the GAP tool to evaluate H1N1 readiness in 9 areas:

- Mass Vaccination Planning
- Vaccine Distribution
- Vaccine Administration
- Doses Administered and Safety Monitoring
- Countermeasure Delivery
- Community Mitigation Measures
- Emergency and Risk Communication
- Influenza Diagnostic Laboratory Testing
- Influenza Epidemiology and Surveillance



novel 2009-H1N1 – 05 NOV 2009

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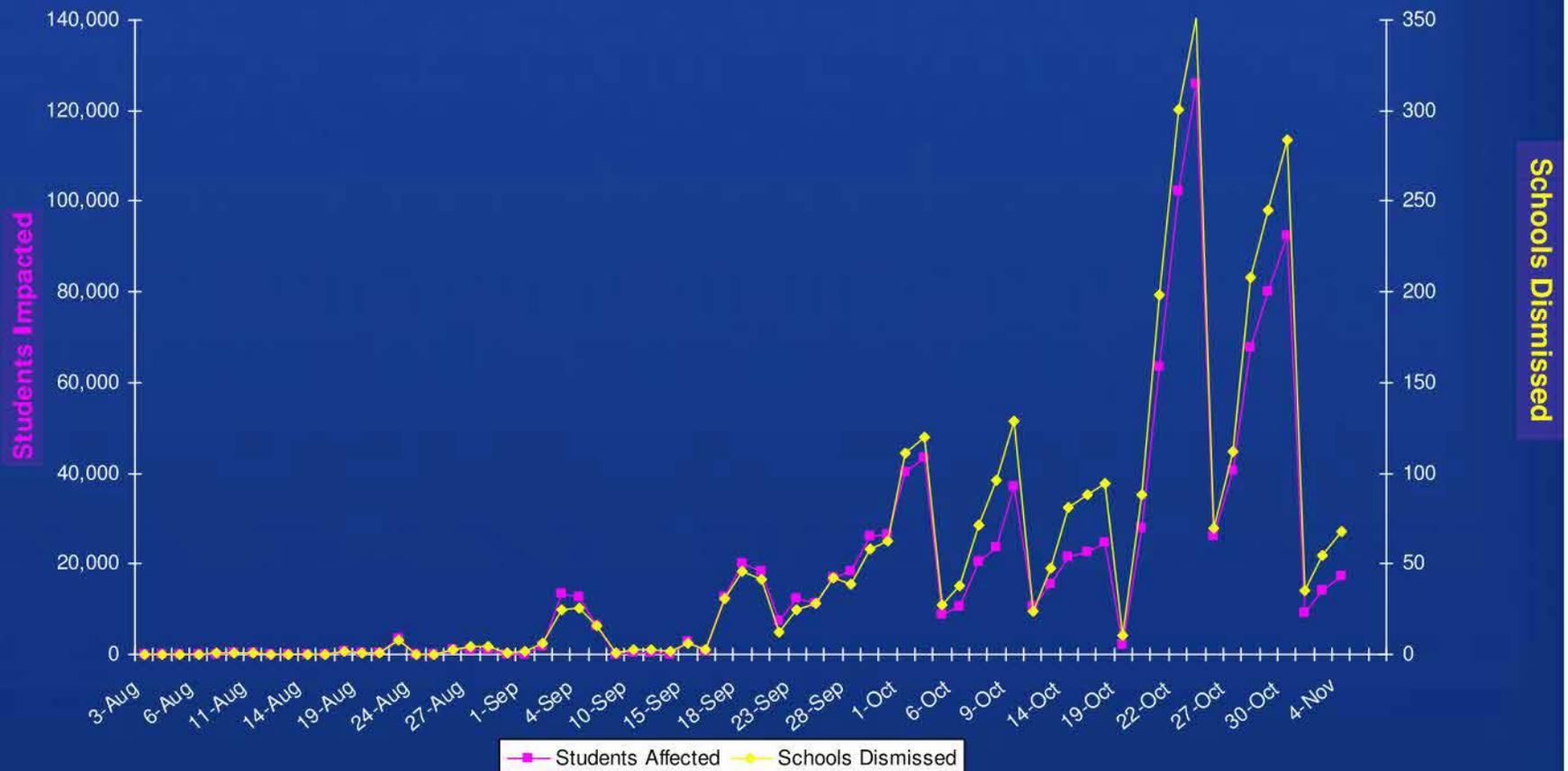
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Community Measures Task Force

School Dismissal Monitoring System, United States, 08/03 – 11/4, 2009

As of 4 Nov 2009, 68 schools were closed, affecting 17,167 students in 10 states. Since the onset of the pandemic in the U.S., the peak school dismissal day this year was May 5, when 980 schools were closed, affecting 607,778 students.



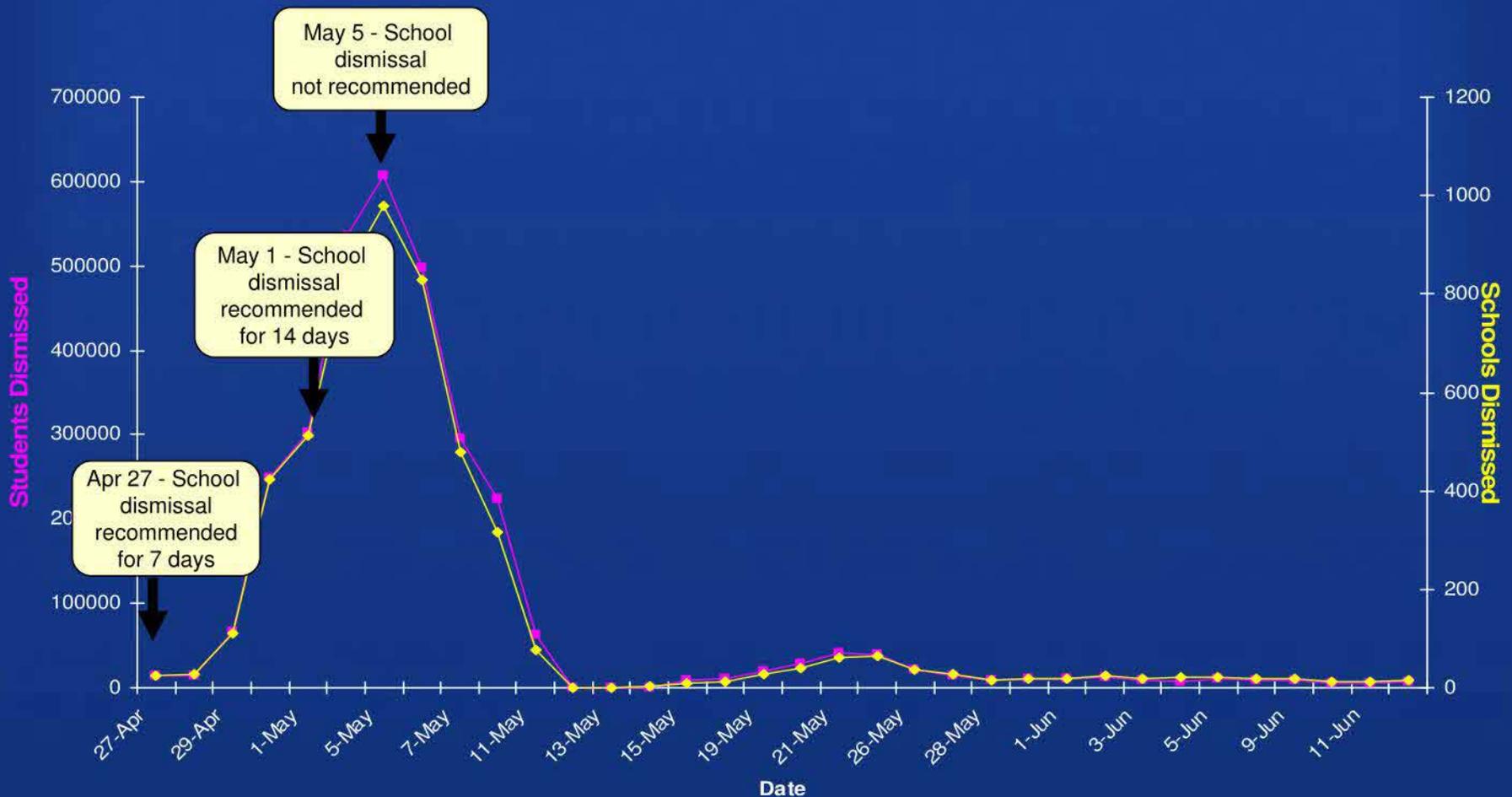
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Community Measures Task Force School Dismissal Monitoring System, United States, 04/27 – 06/12, 2009

- From April 27, 2009 through June 12, 2009, at least 1,351 schools dismissed all students for at least one day.
- At least 824,966 students and 53,217 teachers were impacted by the school dismissals.
- The greatest number of school dismissals occurred on May 5, 2009, when 980 schools and 607,778 students were impacted.



Source: ED and CDC Confirmed School Closing Reports

novel 2009-H1N1 – 05 NOV 2009

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Vaccine Supply & Demand

- **Race For H1N1 Vaccine Is On** (USA Today, 11/3) – “The great H1N1 vaccine hunt has begun, with Americans setting their phones to speed-dial the local health department and pulling kids out of school at the hint shots might be available at a flu clinic.”
- **White House: No Flu Vaccine For Gitmo Detainees** (Associated Press, 11/4) – “White House press secretary Robert Gibbs said that “detainees at Guantanamo Bay are not yet receiving vaccinations against the swine flu.” He “said concern that terrorism suspects at the US naval base in Cuba were receiving vaccines was misplaced.”

Vaccine Opposition/Support

- **Swine Flu Vaccine Side Effects To Be Monitored By U.S. Panel** (Bloomberg, 11/3) – “The Obama administration set up a working group of physicians, public health officials, drug executives and researchers to track effects of the vaccine, said Bill Hall, a spokesman for the U.S. Department of Health and Human Services.”
- **Poll: Almost Half Of Americans Reject Swine Flu Vaccine** (McClatchy, 11/4) – “Despite a rising nationwide toll of sickness caused by the H1N1 flu virus and an intensive push by the government to have people vaccinated for it, almost half of Americans say they aren't likely to get the vaccine, according to a new McClatchy-Ipsos poll.”



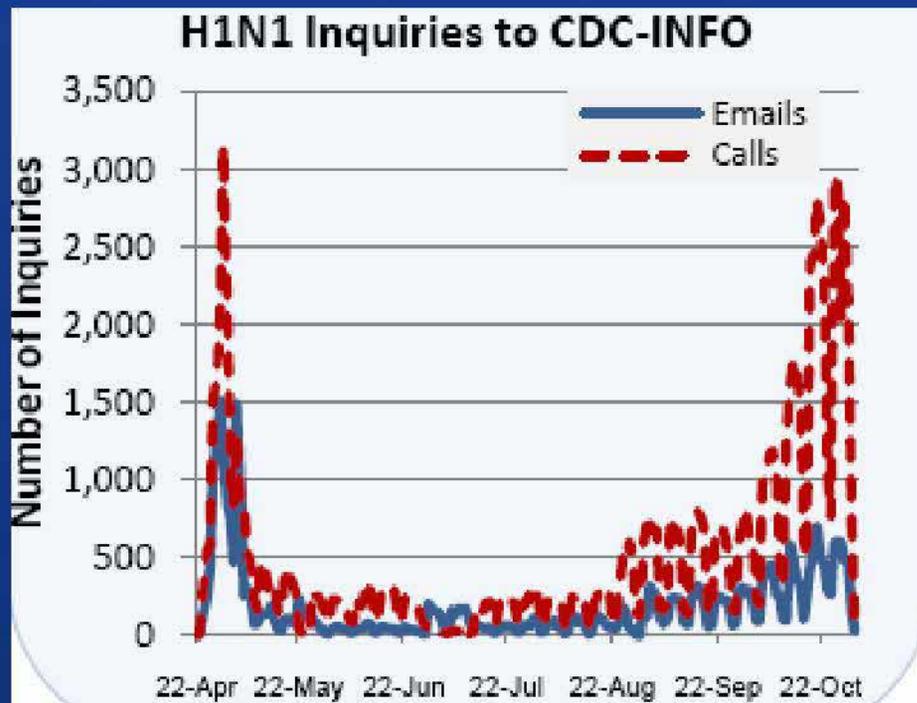
novel 2009-H1N1 – 05 NOV 2009

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Key H1N1 CDC-INFO Stats:

	Nov 1	Apr 22 – Nov 1
Calls Answered (H1N1 Specific)	44	105,378
Emails Received (H1N1 Specific)	29	37,067



novel 2009-H1N1 – 05 NOV 2009

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Key H1N1 Social Media Stats:



	Nov 1	Apr 22 – Nov 1
RSS: Views of H1N1 Flu Related Feeds	94,258	29.907 M
YouTube: Views of H1N1 Flu Related Videos	9,836	2.77 M
Widgets: Views of H1N1 Flu Related Widgets	8,207	4.70 M
Podcasts: Views of H1N1 Flu Related Podcasts	3,631	2.10 M
Twitter: Followers of CDC's Twitter Accounts	2,701	1.09 M
Content Syndication: Views of H1N1 Flu Content	2,004	287,284



novel 2009-H1N1 – 05 NOV 2009

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Joint Information Center (JIC)
Communication Summary *November 5, 2009*
Adverse Events Reported by Media and in Blogs Nov 3-4*

- Total number of reports analyzed for news = 48,597
 - Reporting period: Tuesday, November 3, 2009 12:00 a.m. to Wednesday, November 4, 2009 12:25:55 p.m.
- Total number of reports analyzed for Blogs = 50,120
 - Reporting period: Tuesday, November 3, 2009 12:00 a.m. to Wednesday, November 4, 2009 12:38:28 p.m.

Mid Day Report

- One Twitter report of an individual experiencing lower and upper extremity numbness following H1N1 vaccination. Reportedly will be consulting neurologist
- Blog report of Brooklyn girl going to hospital following H1N1 vaccination without parent permission

http://www.naturalnews.com/027395_swine_flu_hospital_vaccine.html

*Drawn from NCIRD monitoring report



Key Events

novel 2009-H1N1 Declarations:

- WHO: Pandemic Phase 6 (11 JUN 2009 1600 EDT)
 - Outbreaks in at least one country in > two WHO regions
- USG: Public Health Emergency declared (26 Apr 2009)
 - Renewed by HHS Secretary Kathleen Sebelius
- HHS: Downgraded to Phase 1 – Awareness (9 May 2009)



novel 2009-H1N1 – 05 NOV 2009

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Director's Update Brief novel 2009-H1N1

Friday
7 AUG 2009 0815 EDT

Day 112
Week of School Guidance and Intensifying Media

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Pre-decision/Draft

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Key Events



novel 2009-H1N1 – 7 AUG 2009

– **Key events:**

- novel 2009-H1N1 Declarations
 - WHO: Pandemic Phase 6 (11 JUN 2009 1600 EDT)
 - Outbreaks in at least one country in > two WHO regions
 - USG: Public Health Emergency declared (26 Apr 2009)
 - Renewed by HHS Secretary Kathleen Sebelius
 - HHS: Downgraded to Phase 1 – Awareness (9 May 2009)

– **US Cases** (as of 6 August 2009; next update 17 August 2009)

US TOTALS	HOSP	DEATHS
CASES	(b)(5)	
SLTTs		
AFFECTED		



International Global Update novel 2009-H1N1 – 7 AUG 2009

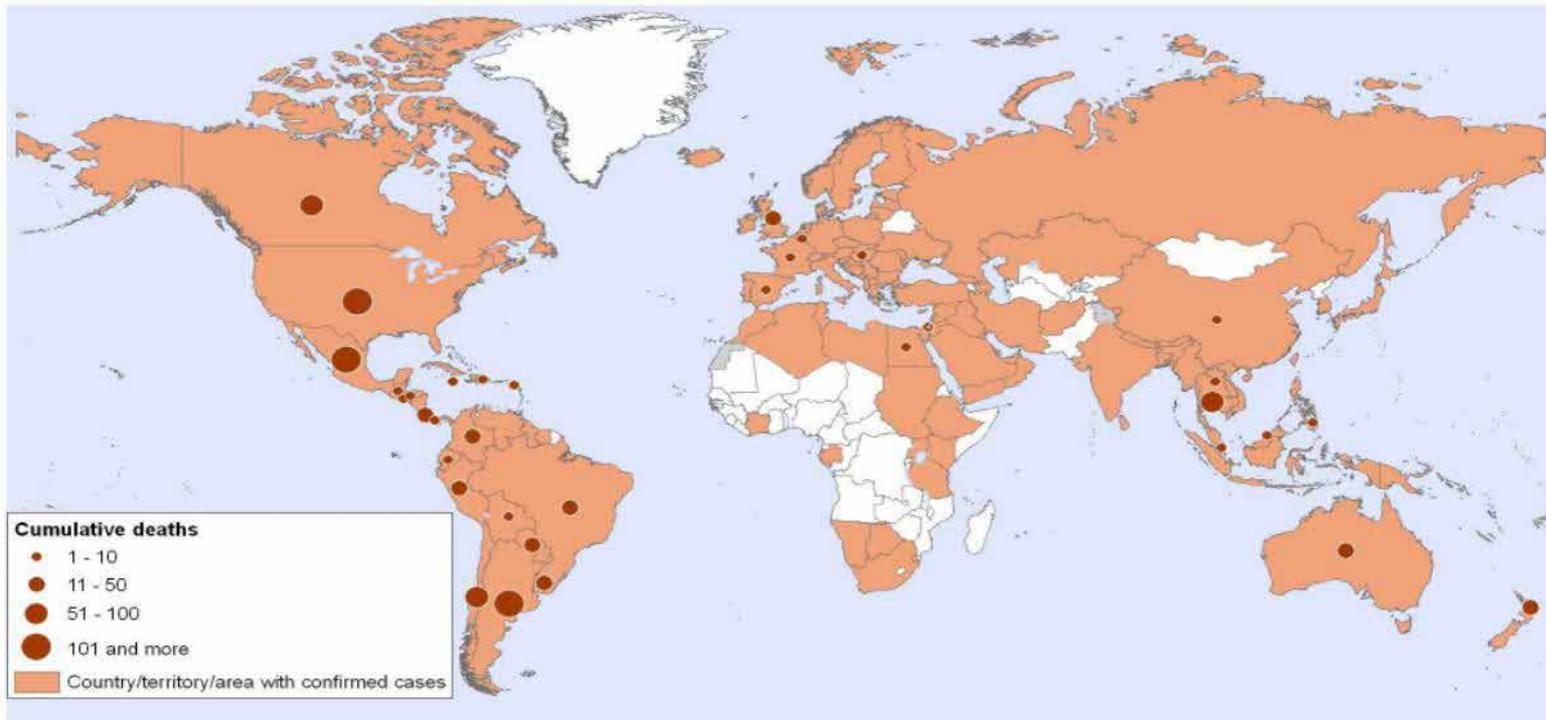


- As of July 31, the WHO has reported 162,380 confirmed cases and 1154 deaths
- Countries no longer required to test or report so numbers are an underestimate

Pandemic (H1N1) 2009

Status as of 31 July 2009

Countries, territories and areas with lab confirmed cases and number of deaths as reported to WHO



The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted lines on maps represent approximate border lines for which there may not yet be full agreement.

Map produced: 04 August 2009 13:00 GMT

Data Source: World Health Organization
Map Production: Public Health Information
and Geographic Information Systems (GIS)
World Health Organization



World Health
Organization

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**International
Country Updates
novel 2009-H1N1 – 7 AUG 2009**



- **Vietnam reports its first death (Aug 3)**
 - A (b)(6) year old woman from Nha Trang City, admitted 30 July and tested positive
 - Taken to the province's General Hospital 3 August with pneumonia and breathing problems, died on the same day
 - 9 year old son tested positive and is being treated at the province's general

- **India reports its first death (Aug 2)**
 - (b)(6) year old girl in Pune, 10 days between onset and suspicion of novel H1
 - Onset 21 July, attended school until 23 July, admitted 27 July, on vent 29 July, 31 July novel H1 suspected and oseltamivir given, sample taken, died 2 Aug

- **Death in Brazilian tourist (Aug 2)**
 - (b)(6) year old female, tour in Orlando
 - 28 July had ILI and saw resort physician, oseltamivir prescribed
 - 31 July ER visit, pneumonia on CXR, rapid flu negative, send home
 - 2 Aug, reportedly died on return flight to Sao Paulo
 - Autopsy planned

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Epidemiology/Surveillance
Synopsis of Influenza Morbidity and Mortality
2009 novel 2009-H1N1 – 07 AUG 2009
Week ending August 4



- **ILI Activity**
 - Percentage of visits due to ILI continues to decline in all regions except Region IV where it is mildly elevated but below baseline.
- **Mortality**
 - The proportion of deaths attributed to pneumonia and influenza was low and within the bounds of what is expected in summer.
- **Hospitalization**
 - H1N1 cumulative hospitalization rates for adults and children remain low and well below the seasonal average of last 4 years.
- **Virologic**
 - Almost 100% of specimens characterized are influenza A.
 - 2 oseltamivir resistant novel H1N1 viruses have been identified from WA
 - Both BMT patients on long term oseltamivir treatment.
- **Geographic spread**
 - 2 states reporting widespread activity and most report only sporadic or local activity

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Epidemiology and Surveillance

H3N2 triple reassortant influenza virus infection in KS



- (b)(6) year old boy with onset of ILI and diarrhea on 7/28
- Diagnosed with influenza A by rapid test, NP swab to state lab inconclusive
- Specimen received at CDC on August 5
 - RT-PCR demonstrated novel swine-origin influenza A (H3N2) virus
- Virus has human H3 HA and N2 NA and internal genes typical for North American classic triple reassortants swine influenza virus
- Visited (b)(6) on July 23, 24 and 25
 - had direct contact with pigs, chickens and cows
 - ~ 30 pigs exhibited
 - no reports of ill pigs or humans at of after the fair
 - majority exhibited pigs to slaughter
- Plan
 - (b)(6) will obtain contact information for exhibitors
 - Survey asking about ILI in pigs and humans for exhibitors
 - Collect NP specimens from any individual or household member currently ill
 - Further investigation in collaboration with state and county if warranted



novel 2009-H1N1- 7 AUG 2009

•First Confirmation of Oseltamivir Resistance in the US

•Two immunocompromised patients in Washington state on long term treatment.

•Both patients yielded Oseltamivir-sensitive virus before treatment begun:

(b)(6) yo male sampled 06/04 had sensitive virus
•Specimen taken 07/30 showed resistant virus

(b)(6) yo female sampled 06/21 had sensitive virus
•Specimen taken 07/28 showed resistant virus

•Both resistant viruses had H275Y mutation

•Virus isolates being sent to test for Zanamivir sensitivity and additional molecular characterization



novel 2009-H1N1- 7 AUG 2009

H3N2 Swine Triple Reassortant Virus Isolated from Patient in Kansas

- **Specimen received 08/04 tested as H3+ and swNP+ in KS state lab**
- **rRT-PCR results confirmed at CDC same day**
 - **Possibility of H1N1pdm/H3N2 seasonal reassortant**
- **Nucleotide sequence determined 08/05 showed it to be “old” North American endemic swine triple reassortant lineage**
 - **Similar to viruses isolated in Canada in 2006 and 2008**



Vaccine



novel 2009-H1N1 – 7 AUG 2009

- Interagency Vaccine Prioritization Workgroup Meeting (Monday 8/10/09)

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novel 2009-H1N1 – 7 AUG 2009

- **School guidance being released today**
 - **Previewed with State Health Officers, Education stakeholders**
 - **Working with Peds Desk, ICU, CDC Info, JIC to prepare for technical assistance, questions regarding guidance implementation**
- **New exclusion period recommendation posted on CDC Web site 5Aug5**
- **School Dismissal Monitoring System**
 - **Delay in the start of school year Puerto Rico today, impacts approximately 1519 schools, 544,138 students, and 40,514 teachers**
 - **Reason is to prepare schools (SOPs, supplies, education materials)**
 - **No other H1N1-related school dismissals were detected**

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**Activation Deployments
Current Deployments
novel 2009-H1N1 – 7 AUG 2009**



Employees Supporting Response from HDQRTS	International Deployments			Domestic Deployments			Grand Total*
	Deployed	Pending	Potential	Deployed	Pending	Potential	
1750	3	5	0	0	0	200	1958

*Note: Total number of HDQRTS personnel that have worked or volunteered to support the event since 23 April

Current Deployments:	Deployed
Argentina GOARN Epi	2
Australia Bilateral Epi	1
CDC Currently Deployed Total	<u>3</u>

International Deployments in Green Text

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Staff Rhythm
All Times EDT
novel 2009-H1N1 –7 AUG 2009



Time (EDT)	Meeting	Location
0730	Operations Synchronization Huddle	Executive Conference Room
0815	Director's Update Briefing – DUB	Executive Conference Room
0900	Fusion Meeting	Executive Conference Room
1130	Children's Activities Coordination Call	Executive Conference Room
1230	Coordination with HHS Chief of Staff	Incident Manager Office
1330	Senior Leaders (S3) Meeting	Executive Conference Room
1430	Medical Care & Countermeasures Meeting	Plans Team Room



**Director's Critical Information Requirements
novel 2009-H1N1 – 7 AUG 2009
24 Hour Immediate Telephonic Notification**



- Illness compatible with novel 2009-H1N1 in any CDC staff or other person involved in the investigation
- Genetic mutation that may make the novel 2009-H1N1 virus resistant to zanamivir
- Request for stockpile assets
- Change/declaration in US Government response or policy
- Threat or damage to any CDC facility (including SNS storage facilities) that affects mission performance
- Significant adverse reactions to antiviral use
- Death or serious injury/illness of CDC employee



**Director's Priority Information Requirements
novel 2009-H1N1 – 7 AUG 2009**



Immediate Telephonic Notification 0700-2200, Otherwise Email

- Threats that might impact CDC operations
- Compromise in CDC's capability to meet deployment needs
- Change in international response actions or strategy
- Significant event regarding US infrastructure/ economy
- Delay in completion of director's tasking or guidance document clearance



Priorities



novel 2009-H1N1 – 7 AUG 2009

- Determine extent of outbreak to trigger interventions
- Identify severe disease to inform level of response
- Communicate to Health Care Workers (HCWs), general public, partners to prevent and control disease
- Characterize virus to:
 - Develop vaccine candidates
 - Improve tests
 - Monitor resistance
- Coordinate with government partners to:
 - prepare for vaccine productions
 - allow for joint response
 - support testing and surveillance
 - harmonize guidance and communication

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Supporting Documentation

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Director's Update Brief novel 2009-H1N1



Thursday
12 November 2009

Day 209

Day 39 of Vaccination
Day of estimated cumulative burden

Agenda

Vaccine	10 min
International	5 min
Distribute	5 min
State and Local	5 min

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Vaccine Update

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NACCHO Sentinel Network Supplemental Survey Methodology

- Survey Period: October 29–November 3, 2009
- Three topic areas:
 - assess the impacts of delayed H1N1 vaccine distribution
 - identify other potential barriers to immunization; and
 - gather feedback on two conference calls that the CDC conducts weekly for LHDs.



novel 2009-H1N1 – 12 NOV 2009

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NACCHO Sentinel Network Supplemental Survey Methodology

- “Hot topics” survey and not the routine weekly sentinel network survey
- A total of 138 LHDs received the survey. Of these, 116 responded (response rate of 84%).
- The Sentinel Network represents a convenience sample, not randomized.



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NACCHO Sentinel Network Supplemental Survey Results

- Survey findings suggest that LHDs are facing significant challenges as a result of receiving less than anticipated amounts of H1N1 vaccine.
 - 92% reported that they can not meet the demand
 - 77% report that they have turned people away
 - 88% report that they have changed their vaccine strategy
 - 65% canceled/postponed
 - 50% narrowed the target population
 - 44% changed media strategy
 - 16% did not distribute vaccine



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NACCHO Sentinel Network Supplemental Survey Results

- 85% are providing or plan to provide H1N1 vaccinations via mass vaccination clinics.
- Target Groups:
 - 97% pregnant women
 - 93% healthcare and emergency medical service personnel who have direct contact with patients and/or infectious materials
 - 93% persons who live with or provide care for infants aged < 6 months
 - 93% children aged 6 months to 4 years



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State Coordination Task Force
novel 2009-H1N1 – 12 November 2009

- 20% hired new staff
- 62% are providing antivirals at reduced costs to uninsured
- Anecdotal data on the rising cost of mass vac campaign and amount of re-work



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NACCHO Sentinel Network Supplemental Survey Results

- The survey suggested several additional challenges that some LHDs have faced or may face in the future:
 - Insufficient antivirals
 - Insufficient quantity of N-95 respirators.
 - Public resistance to FluMist (LAIVs).
 - Potential jurisdictional challenges; inconsistencies of neighboring jurisdictions, crossing state/jurisdictional boundaries
 - Future Topics:
 - What is the average number of days from receipt of vaccine to administration (public health mass vac and retail pharmacies)



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Supporting Documentation

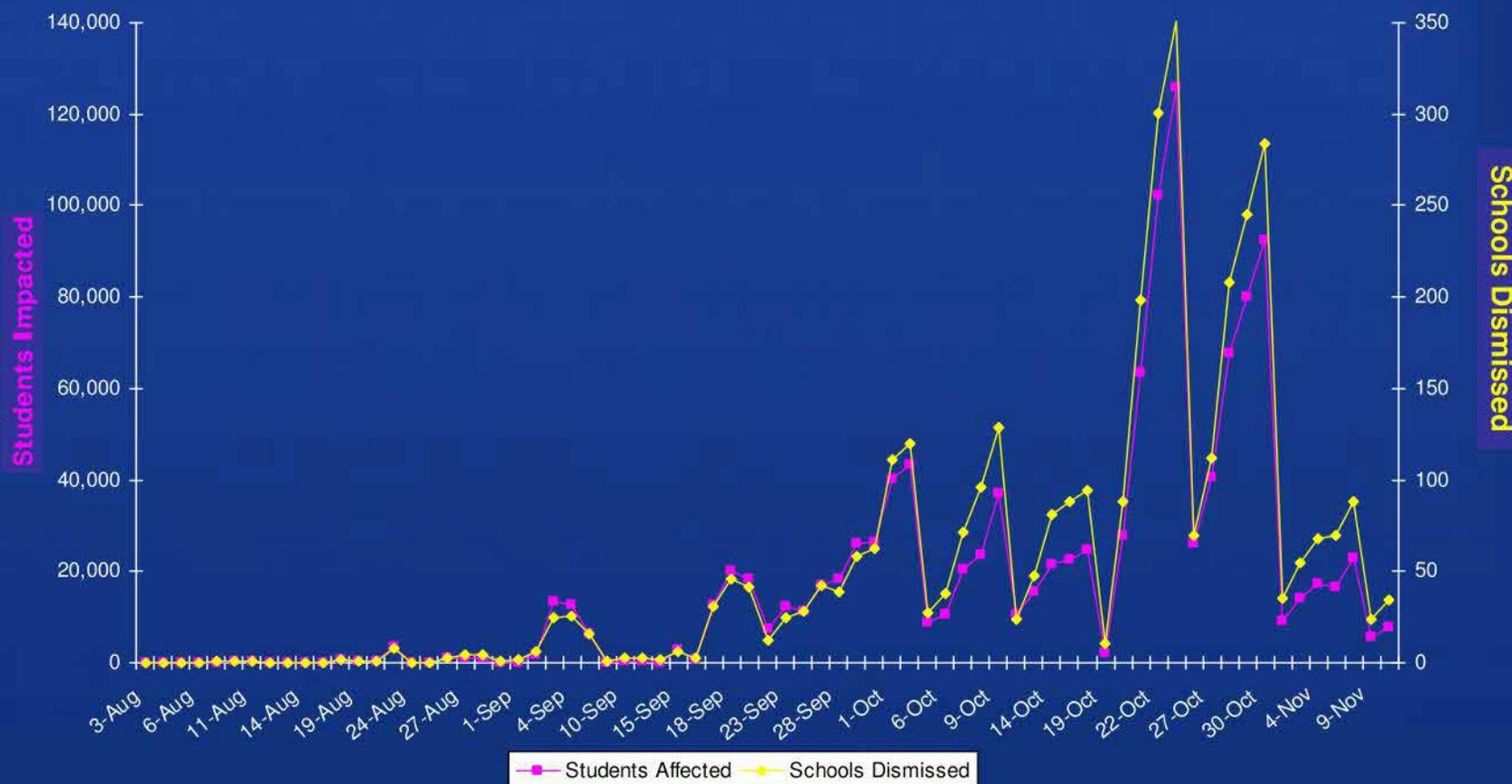
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Community Measures Task Force

School Dismissal Monitoring System, United States, 08/03 – 11/10, 2009

As of 10 Nov 2009, 34 schools were closed, affecting 7961 students in 8 states. Since the onset of the pandemic in the U.S., the peak school dismissal day this year was May 5, when 980 schools were closed, affecting 607,778 students.



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Animal - Human Status of Surveillance for 2009 H1N1 in Companion Animals

- 12 of 36 NAHLN labs requested and were granted a waiver by NVSL allowing them to use NVSL swine 2009 H1N1 assays in non-swine animal species
- Veterinary diagnostic labs are soliciting animal samples from practicing veterinarians
- USDA-APHIS requesting expansion of SIV surveillance funds to cover testing for influenza in other animals, with a focus on companion animals



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H1N1 Vaccine

- **Poll: Drugmakers Most At Fault For Swine Flu Vaccine Shortage** (USA Today, 11/10) – “Americans who are frustrated with shortages of swine flu vaccine place slightly more blame on drug companies than the federal government, a USA TODAY/Gallup Poll showed Monday.”
- **'Anti-vaccine' Attitude Hampers H1N1 Effort** (Washington Times, 11/10) – “Dr. Anthony Fauci urged against complacency and called for people to be persistent in pursuit of the vaccine”

H1N1 Severity

- **Troops In Afghanistan Fight Swine Flu Amid War** (AP, 11/10) - The Public Health Ministry said Monday that 710 of the 779 cases of H1N1 reported since early July have been among Afghan, U.S. and Italian troops. The 11 people who have died from the virus were all Afghans, including one soldier.
- **H1N1 Deaths Underreported?** (CBS, 11/10)
 - “The number of adult deaths from H1N1 may be higher than reported. I visited the Centers for Disease Control and learned during any given week, only 30 states report H1N1 deaths to the government. According to an internal CDC document obtained exclusively by CBS news, the actual number of adults who have died due to H1N1 since September could be almost double that reported. We’re only talking about adults here. Deaths among children are reported by all 50 states.” (WBTV, Charlotte, 11/10)



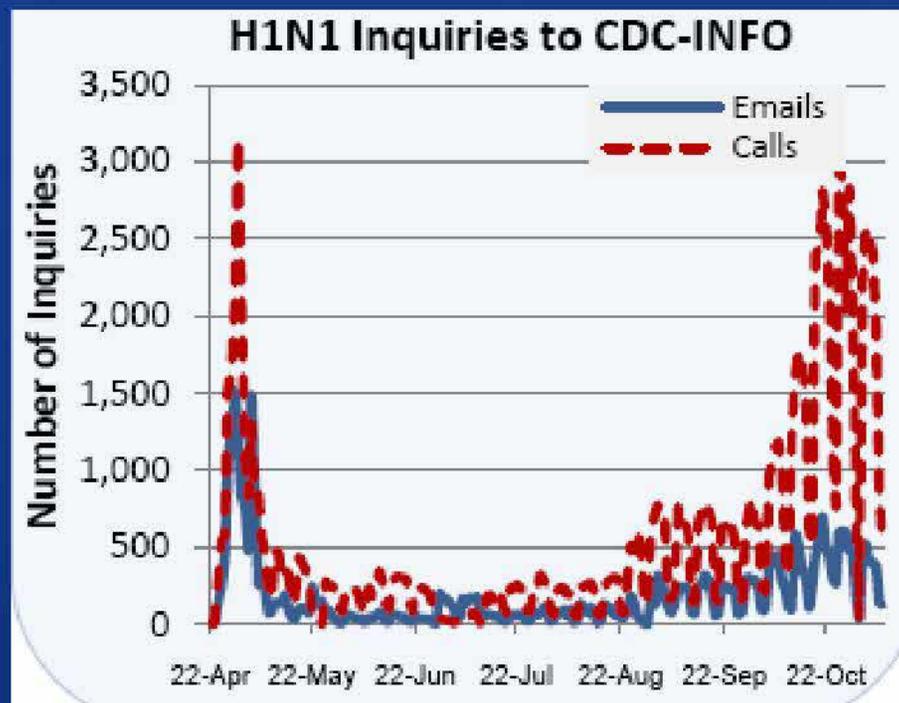
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Key H1N1 CDC-INFO Stats:

	Nov 8	Apr 22 – Nov 8
• Calls Answered (H1N1 Specific)	500	118,776
• Emails Received (H1N1 Specific)	125	39,683



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Key H1N1 Social Media Stats:



	Nov 8	Apr 22 – Nov 8
RSS: Views of H1N1 Flu Related Feeds	152,357	31.22 M
YouTube: Views of H1N1 Flu Related Videos	7,666	2.86 M
Widgets: Views of H1N1 Flu Related Widgets	6,572	4.81 M
Podcasts: Views of H1N1 Flu Related Podcasts	4,769	2.14 M
Twitter: Followers of CDC's Twitter Accounts	2,497	1.11 M
Content Syndication: Views of H1N1 Flu Content	1,479	315,097



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Joint Information Center (JIC)
Communication Summary *November 12, 2009*
Adverse Events Reported by Media (November 10)

- “There was concern in Queens and this is yesterday. **Several children complained that they got sick after getting the swine flu vaccine** so a group of students at P.S. 124 said they felt dizzy, complained of headaches. Some teachers called 911 as a precaution. Three were taken to the hospital and we just heard back from Jamaica hospital, all three of them -- all kids have been sent home. One of the kids actually didn't receive the vaccine. So it unclear whether it was a physical reaction, sort of like a chain initial reaction.” – (WNYW New York, 11/10)
- “**17 students claimed that they had allergic reactions to the vaccine.** Three were taken to the hospital. Turns out though that one of the students didn't get the H1N1 shot. A psychological interaction maybe. Doctors say he likely got sick from nerves. Health officials say that some dizziness and nausea after getting the shot is normal. They insist that parents should not be alarmed.” – (WABC New York, 11/10)



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Activation Deployments *Current Deployments*

Employees Supporting Response from HDQRTS	International Deployments			Domestic Deployments			Grand Total*
	Deployed	Pending	Potential	Deployed	Pending	Potential	
2028	6	4	0	19	0	TBD	2057

*Note: Total number of HDQRTS personnel that have worked or volunteered to support the event since 23 April

Current Deployments:	Deployed
Saudi Arabia H1N1 Surveillance for the Hajj	5
Costa Rica H1N1 Pathology Assistance	1
St Croix VI Health Dept H1N1 Assistance	2
Wash, DC HHS /District Health Dept H1N1 Assistance	3
California State H1N1 Assistance	2
Georgia State H1N1 Assistance	1
Illinois State H1N1 Assistance	2
Kansas State H1N1 Assistance	2
Ohio State H1N1 Assistance	1
Atlanta, GA School Epi	1
Arizona State H1N1 Assistance	1
New Mexico State H1N1 Assistance	1
Maryland State H1N1 Assistance	1
Hawaii State H1N1 Assistance	2
Currently Deployed Total:	<u>25</u>



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Staff Rhythm 12 November 2009

0815	Director's Update Brief	CoS	Bldg 21, ECR
0845	H1N1 Morning Report	IM	Conference Call Only
0930	Vaccine Team Meeting	Jay Butler	Bldg 19, room 117
1030	H1N1 Lab/Epi Meeting	Carolyn Bridges	Bldg 19, room 117
1200	Senior Leaders Huddle	CoS	Bldg 21, ECR
1300	International Influenza Partners	Marc-Alain Widdowson	Bldg 1, EOC 1, ECR
1330	Coord with HHS Chief of Staff	IM	IM Office
1400	DRG Video Teleconference	Phil Navin	Bldg 21, ECR
1430	NACCHO and Local Constituency	Todd Talbert	Bldg 19, G117
1545	Situational Update & Problem Solving	Stephanie Dopson	Bldg 21, ECR
1600	Vaccine Implementation Conf Call	John Theofilos	Bldg 19, room 116
1600	JIC Communications Leadership Meeting	Terrance Johns	Bldg 21, room 11116
1615	Strategy Meeting	Stephanie Dopson	Bldg 21, ECR



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Director's Critical Information Requirements (DCIRs)

novel 2009-H1N1

24 Hour Immediate Telephonic Notification

- Genetic mutation that may make the novel 2009-H1N1 virus resistant to zanamivir
- Clusters of disease of resistant viruses
- Clusters of disease from viruses that have undergone significant antigenic drift
- Request for stockpile assets
- Death possibly related to vaccination
- Death possibly related to antiviral drug treatment
- Change/declaration in US Government response or policy
- Threat or damage to any CDC facility (including SNS storage facilities) that affects mission performance
- Death or serious injury/illness of CDC employee

Updated: 06 NOV 2009



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Director's Priority Information Requirements (DCIRs)

novel 2009-H1N1

Immediate Telephonic Notification 0700-2200, Otherwise Email

- Threats that might impact CDC operations
- Compromise in CDC's capability to meet deployment needs
- Change in international response actions or strategy
- Significant event regarding US infrastructure/ economy
- Delay in completion of director's tasking or guidance document clearance

Updated: 06 NOV 2009



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Key Events

novel 2009-H1N1 Declarations:

- USG: National Emergency declared (24 Oct 2009)
 - To allow Section 1135 [42 USC §1320b–5] waivers to be issued
- WHO: Pandemic Phase 6 (11 JUN 2009 1600 EDT)
 - Outbreaks in at least one country in > two WHO regions
- USG: Public Health Emergency declared (26 Apr 2009)
 - Renewed by HHS Secretary Kathleen Sebelius
- HHS: Downgraded to Phase 1 – Awareness (9 May 2009)



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