Testimony before the Committee on Homeland Security and Governmental Affairs
United States Senate

U.S. Health Response to a Novel 2009 H1N1 Influenza Virus

Anne Schuchat, M.D.
Acting Deputy Director for Science and Program, Centers for Disease Control and Prevention
Assistant Surgeon General, U.S. Public Health Service
U.S. Department of Health and Human Services

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Good morning, Chairman Lieberman, Ranking Member Collins and other distinguished members of the Committee. I am Dr. Anne Schuchat, Acting Deputy Director for Science and Program at the Centers for Disease Control and Prevention. I thank you for the opportunity to join Secretary Napolitano in updating you on current efforts the U.S. government is taking to respond to the ongoing novel 2009 H1N1 influenza outbreak. Our hearts go out to the people in the United States, in Mexico, and around the globe who have been directly impacted. People around the country and around the globe are concerned with this situation we're seeing, and we're concerned as well. We are responding aggressively at the federal, state, and local levels to understand the complexities of this outbreak and to implement control measures. It is important to note that our nation's current preparedness is a direct result of the investments and support of the Congress and the hard work of state and local officials across the country.

It is important for all of us to understand that flu viruses – and outbreaks of many infectious diseases -- are extremely unpredictable. We know that as our investigation proceeds, what we learn will change. We expect changes in the number of cases, the number of states affected, and the severity of illness. Our goal in our daily communication – to the public, to the Congress, and to the media – is to be clear in what we do know, explain uncertainty, and clearly communicate what we are doing to protect the health of Americans. An equal priority is to communicate the steps that Americans can take to protect their own health and that of their community. As we learn more, these communications and recommendations will evolve.

Influenza arises from a variety of sources; for example, swine influenza (H1N1) is a common respiratory disease of pigs caused by type A influenza viruses. These and other animal viruses
are different from seasonal human influenza A (H1N1) viruses. From laboratory analysis already performed at CDC, we have determined that there is a novel 2009 H1N1 virus circulating in the U.S. and Mexico that contains genetic pieces from four different virus sources. This particular genetic combination of H1N1 influenza virus is new and has not been recognized before in the United States or anywhere else worldwide. Additional testing is being done on the viruses, including a complete genetic sequencing.

CDC has determined that this virus is contagious and is spreading from human to human. It appears to spread with similar characteristics as seasonal influenza. Flu viruses are thought to spread mainly from person to person through coughing or sneezing of people with influenza. Sometimes people may become infected by touching something with flu viruses on it and then touching their mouth or nose. There is no evidence to suggest that this virus has been found in swine in the United States, and there have been no illnesses attributed to handling or consuming pork. Currently, there is no evidence that you can get this novel 2009 H1N1 influenza from eating pork or pork products. Of course, it is always important to cook pork to an internal temperature of 160 degrees Fahrenheit in order to ensure safety.

I want to reiterate that as we look for cases, we are seeing more cases. We fully expect to see not only more cases, but also greater severity of illness. We've ramped up our surveillance around the country to try and get a better understanding of the magnitude of this outbreak.

Let me provide for you an update in terms of the public health actions that are being taken here as well as abroad. On the investigation side, we are working very closely with state and local
public health officials around the country. We're providing both technical support on the epidemiology as well as laboratory support for confirming cases. We are also working with the World Health Organization, the Pan American Health Organization, and the governments of Mexico and Canada on this outbreak. There is a tri-national team that is working in Mexico to better understand the outbreak, and answer critical questions such as why cases in Mexico appear to be more severe than we have seen in the U.S. to date. We are working to assist Mexico in establishing more laboratory capacity in-country; this is very important because when you can define someone as a truly confirmed case, what you understand about how they acquire disease takes on much more meaning.

In terms of travel advisories, CDC continues to evaluate incoming information from the World Health Organization, the Pan American Health Organization, and other governments to determine the potential impact of the outbreak on international travel. On Monday, April 27th, CDC issued a travel health warning for Mexico. With this warning, we recommend travelers to postpone non-essential travel to Mexico for the time being. CDC is also evaluating information from other countries and will update travel notices for other affected countries as necessary. As always, persons with flu or flu-like symptoms should stay at home and should not attempt to travel.

CDC has and will continue to develop specific recommendations for what individuals, communities, clinicians, and others professionals can do. It is important that people understand that there's a role for everyone to play when an outbreak is occurring. At the individual level, it is important for people to understand how they can prevent respiratory infections. Very frequent
hand-washing is something that we talk about time and time again and that is an effective way to reduce transmission of disease. If you're sick, it's very important to stay at home. If your children are sick, have a fever and flu-like illness, they shouldn't go to school. And if you're ill, you shouldn't get on an airplane or any public transport to travel. Taking personal responsibility for these things will help reduce the spread of this new virus as well as other respiratory illnesses.

It is important that people think about what they would do if this outbreak deepens in their community. Communities, businesses, schools, and local governments should plan now for what to do if cases appear in their communities. Parents should prepare for what they would do if faced with temporary school closures, as we are recommending temporary school closures when cases are identified.

We also have additional community guidance so that clinicians, laboratorians, and other public health officials will know what to do should they see cases in their community. All of these specific recommendations, as well as other regular updates, are posted on the CDC web site – www.cdc.gov.

We will continue to provide support to states and communities throughout this outbreak. In addition to the epidemiologic and laboratory support that CDC provides, CDC maintains the nation’s Strategic National Stockpile of medications that may be needed in this outbreak. As part of our pandemic preparedness efforts, the U.S. Government has purchased extensive
supplies of antiviral drugs – oseltamivir and zanamivir – for the Strategic National Stockpile.
Laboratory testing on the viruses so far indicate that they are susceptible to oseltamivir and zanamivir. We are releasing one-quarter of the states’ share of antiviral drugs and personal protective equipment to help states prepare to respond to the outbreak, along with the necessary emergency use authorities to facilitate their effective use. Distribution has been prioritized for the states where we already have confirmed cases. In addition, the Department of Defense has procured and strategically prepositioned 7 million treatment courses of oseltamivir.

Whenever we see a novel strain of influenza, we begin our work in the event that a vaccine needs to be manufactured. The CDC is working to develop a vaccine seed strain specific to these viruses – the first step in vaccine manufacturing. This is something we often initiate when we encounter a new influenza virus that has the potential to cause significant human illness. We have isolated and identified the virus and discussions are underway so that should we need to manufacture a vaccine, we can work towards that goal very quickly. HHS has also identified the needed pathways to provide rapid production of vaccine after the appropriate seed strain has been provided to manufacturers. As this progresses, HHS operating divisions and offices including CDC, NIH, FDA, and ASPR/BARDA will work in close partnership.

In closing, we are simultaneously working hard to understand and control this outbreak while also keeping the public and the Congress fully informed on the situation and our response. We are working in close collaboration with our federal partners including our sister HHS agencies and other federal departments. While much has happened to date, this will be a marathon, not a sprint, and even if this outbreak is a small one, we can anticipate that we may have a subsequent
or follow-on outbreak several months later. Steps we are taking now are putting us in a strong position to respond.

The government cannot solve this alone, and as I have noted, all of us must take constructive steps. If you are sick, stay home. If children are sick, keep them home from school. Wash your hands. Take all of those reasonable measures that will help us mitigate how many people actually get sick in our country.

Finally, it is important to recognize that there have been enormous efforts in the U.S. and abroad to prepare for this kind of an outbreak and a pandemic. The Congress has provided strong support for these efforts. Our detection of this strain in the United States came as a result of that investment and our enhanced surveillance and laboratory capacity are critical to understanding and mitigating this threat. While we must remain vigilant throughout this and subsequent outbreaks, it is important to note that at no time in our nation’s history have we been more prepared to face this kind of challenge. As we face the challenges in the weeks ahead, we look forward to working closely with the Committee to best address this evolving situation.