USACHPPM

DEPUTY CHIEF OF STAFF FOR OPERATIONS HEALTH INFORMATION OPERATIONS (HIO) WEEKLY UPDATE

14 January 2002

The HIO Weekly Update provides information regarding global medical and veterinary issues of interest to the United States (US) Army. The weekly update does not attempt to analyze the information regarding potential strategic or tactical impact to the US Army and as such, should not be regarded as a medical intelligence product. The information should provide an increased awareness of current and emerging health-related issues.

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HOT ISSUES

Afghanistan Refugees – UNHCR

On 8 January, the <u>UNHCR</u> in Tajikistan confirmed that the population of Afghan refugees has remained constant despite reports of large numbers of refugees returning home. Most of the refugees here are from the northern province of Konduz. The <u>IRCS</u> reported improved conditions existed for almost 11,000 <u>IDPs</u> at the Mile-46 and Mahkaki displacement camps in southwestern Afghanistan. The prevalence of diarrhea had decreased, but a considerable problem with scabies existed at Mile-46, primarily in children. No furthers deaths from exposure have been reported since six children died at Mile-46 in December. Currently, over 5,000 people are living in 1,000 tents in each of the two camps.

http://www.irinnews.org/report.asp?ReportID=18552&SelectRegion=Central_Asia &SelectCountry=TAJIKISTAN and http://www.irinnews.org/report.asp?ReportID=18652&SelectRegion=Central_Asia &SelectCountry=AFGHANISTAN

Anthrax Suspect Case – American Osteopathic Association

On 9 January, the American Osteopathic Association published an article in which the authors present a case involving a person at high risk for anthrax exposure, who despite being culture negative manifested a change in health status believed to be due to anthrax exposure. The article highlights the need for completion of a full 60-day course of antibiotic treatment and suggests that there may be a new clinical entity of "aborted anthrax infection" suggestively associated with inadequate treatment. The full text is available at http://www.aoa-net.org/Publications/JAOA/anthrax102.pdf.

Antimicrobial Resistance – <u>WHO</u> Updates

Effective January 2002, the WHO has updated two facts sheets regarding antimicrobial resistance: "Antimicrobial Resistance" and "Use of Antimicrobials Outside Human Medicine and Resultant Antimicrobial Resistance in Humans." The documents reference the WHO Global Strategy for Containment of Antimicrobial Resistance published in September 2001, which addressed antimicrobial resistance as a global problem that requires action by all countries. The main message is directed at poor prescribing practices that now threaten to undermine the potency of vital antimicrobials everywhere. The updates are at http://www.who.int/inf-fs/en/fact268.html.

FDA Safety Alert – Serzone (Nefazodone HCL)

On 9 January, the FDA announced addition of a Black Box Warning and strengthening of the WARNINGS, CONTRAINDICATIONS, and PRECAUTIONS sections of the label for Serzone, an antidepressant drug. Rare cases of liver failure leading to transplant and/or death in patients have been reported. A new patient package insert is provided

in the product packaging. The revised label is at

http://www.fda.gov/medwatch/SAFETY/2002/serzone_label.pdf. Patient information is at http://www.fda.gov/medwatch/SAFETY/2002/serzone_PPI.pdf.

Homeland Security Updates – Salt Lake City Winter Olympics

On 10 January, The Office of Homeland Security announced their plans to protect an estimated one million-plus visitors and competitors during the 17 days of Olympic events that are scheduled to begin on 8 February. The US Secret Service, under the DOT, is the lead agency for designing, planning, and implementing security at the Salt Lake City Games. All visitors at all venues are subject to metal detectors (nearly 1,000). Biometric scanners will be used to identify athletes and officials, allowing them to enter sensitive areas. Portable x-ray equipment will be used to inspect any mail that appears suspicious. A number of federal agencies are providing support for the Olympics. The DoD is providing 4,500 military members to augment local and federal agencies with logistics, communications, explosives detection, and aviation support. The FEMA's National Emergency Response Team and several of their Urban Search and Rescue Task Forces will provide assistance. The FBI will operate a mobile field laboratory to detect and analyze radioactivity and chemical- and bio-weapons materials. The DOE will have nuclear response teams on alert. The EPA will provide support for state and local HazMat teams. The DHHS will help the FBI coordinate crisis response to any bio-terror threat by deploying 18 five-person medical strike teams and a 36person National Medical Response Team. The <u>CDC</u> will have emergency response coordinators, lab scientists, and other professionals on the ground. The FDA will be responsible for conducting food safety inspections inside the Olympic Village and at other venues.

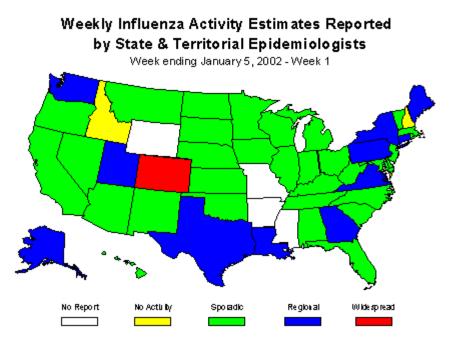
Influenza Surveillance – <u>DoD</u>

The DoD Worldwide Influenza Surveillance Program is a laboratory-based influenza surveillance program managed by the Air Force. As of 3 January, 78 (7%) of 1,143 submitted specimens have been identified as positive for influenza since the start of the influenza season. Of the 78 isolates, 25 (32%) have been subtyped, and all were influenza A (H3N2), with the exception of one influenza A (H1N1). Complete information, including a map-based view of data, is available at: https://pestilence.brooks.af.mil/Influenza/

Note: Some users may experience difficulty accessing this link directly from this document; if this occurs, copy and paste the hyperlink in your browser address bar.

Influenza Surveillance – USA

The current report for the week ending 5 January (week 1) indicates that during this week overall national visits to physicians for influenza-like illness were 2.4%, which is above the national baseline of 1.9% and deaths attributed to pneumonia and influenza were 6.7%, which is below the epidemic threshold of 8.0% for this week. For week one, laboratory reports indicated 94 (7.3%) of 1,281 respiratory specimens tested were positive for influenza: 34 influenza A (H3N2) viruses and 60 viruses with unspecified subtype. Since 30 September, 617 (3.1%) of 19,815 submitted specimens were positive for influenza: 602 (98%) were influenza A and 15 (2%) were influenza B. Of the 602 influenza A viruses, 274 (46%) were subtyped with the following results: 268 (98%) influenza A (H3N2) and 6 (2%) influenza A (H1N1). A slight majority of the 617 total isolates (51%) were reported from the Pacific region with 153 (25%) identified in Alaska and 142 (23%) identified in Hawaii. All viruses were similar to the vaccine strains A/Panama/2007/99 (H3N2), A/New Caledona/20/99 (H1N1), and B/Sichuan/379/99, respectively. During the week the CDC classified influenza in the below-listed state and territorial health departments. The report is at http://www.cdc.gov/ncidod/diseases/flu/weekly.htm.



Map courtesy of http://www.cdc.gov/ncidod/diseases/flu/weekly.htm.

Injury Assessment – World Trade Center

On 10 January, the <u>CDC</u> released a fact sheet on the rapid assessment of physical injuries related to the attack on the World Trade Center (WTC) on 11 September 2001. The attack killed and injured more people than any previous attack on a civilian target in

the US. The study looked at the type and severity of injuries among a sample of survivors who received emergency care at five New York City hospitals during the first 48 hours after the attack. The average age of survivors in the study was 39 years and 66% were male. Among 790 injured survivors, emergency departments treated and released 606 (77%) and 139 (18%) were hospitalized for further treatment. Inhalation injuries were the most common injury (49%) followed by eye injuries (26%), lacerations (14%), sprains and strains (14%), fractures (6%), burns (5%), and closed head injuries (2%). More than half the survivors (56%) were treated for inhalation injuries, eye injuries, or both without other injuries; smoke, dust, debris, or fumes caused most of these injuries. The arrival of survivors at nearby hospitals peaked two to three hours after the first plane hit the WTC. Half of the survivors received medical care within seven hours of the attack, and 282 (75%) of survivors arrived at hospitals by means other than emergency medical transport. Rescue workers - firefighters, police, emergency medical services, and others - accounted for 320 (29%) of the survivors who were treated. Rescue workers sustained significantly more eye injuries than other survivors (39% versus 19%) but fewer burns (2% versus 6%). This emphasizes the need for safety evewear in responding to this type of incident. The fact sheet is at http://www.cdc.gov/od/oc/media/pressrel/fs020110.htm.

Missile Defense Program – Defense Appropriations Bill

The President signed the Defense Appropriations Bill into law on 10 January. The appropriations bill provides money to run the Defense Department and includes an allocation of \$7.8 billion for missile defense programs.

Plague – WHO Updates

Effective January 2002, the WHO has updated the plague fact sheet, which is available at <u>http://www.who.int/inf-fs/en/fact267.html</u>.

Potassium lodide Stockpiles – Maryland

On 11 January, the Maryland Department of Environment announced that Maryland has applied to the <u>NRC</u> for a supply of potassium iodide (KI) to provide one to two doses per citizen living within 10 miles of a nuclear power facility. Approximately 80,000 Marylanders live within 10 miles of two nuclear power plants. The NRC will verify the population data in the request and may arrange for delivery of the stockpile in as early as 30 days. Distribution plans, storage and other logistical details are being developed by a workgroup. As of 20 December, the NRC is making KI available within 30 days to states that request it and that have nuclear power plants located within the state or nearby. NRC regulations require that consideration be given to including KI as a protective measure against radioactive iodines. KI saturates the thyroid gland so that radioactive iodines will not accumlate in the thyroid gland in the event of a nuclear accident. The NRC new release is at <u>http://www.nrc.gov/reading-rm/doc-collections/news/archive/01-135.html</u> and the Maryland news release is at <u>http://www.mde.state.md.us/press/nr_mde-020111.html</u>.

CENTCOM

Earthquake Destruction – Tajikistan

On 9 January, an earthquake measuring 5.4 on the Richter scale occurred in the remote villages of Takhi Akba and Talkhan Chashma in eastern Tajikistan. The earthquake left three children dead, six injured, and 1,350 people homeless in the middle of harsh winter conditions. The earthquake destroyed 90 percent of the buildings in Takhi Akba (pop. 75) and Talkhan Chashma (pop. 1,440). Red Crescent and Red Cross are responding with difficulty due to the severe rockfall caused by the earthquake.

Rotational Policy – Afghanistan

On 10 January, the American Forces Press Service announced that the services are setting the rotation policy for each component. The Navy and Marine Corps will rotate on a normal six-month rotation. The Army and Air Force are studying their rotation issues and expect to announce policies soon.

Travel Warnings – Kyrgyzstan and Uzbekistan

On 2 January, the US State Department extended a travel warning to Kyrgyzstan due to the presence of indigenous militant groups, including a group designated by the Secretary of State as a foreign terrorist organization. On 8 January, the US State Department extended a travel warning to Uzbekistan regarding regional security concerns that exist due to the close proximity to Afghanistan.

EUCOM

Ebola / Viral Hemorrhagic Fever – Gabon and Republic of Congo

On 9 January, the <u>WHO</u> reported that as of 7 January the number of confirmed cases and deaths of confirmed Ebola has each risen by one since last week. The total number of cases stands at 34 with 21 cases in Gabon and 13 in the Republic of the Congo. There has been one additional death in Gabon since last week bringing the total number of deaths to 25 with 18 in Gabon and seven in the Republic of the Congo. There remain 16 suspect cases in Gabon and 231 total contacts under close observation. On 4 January, the Gabonese goverment announced a quarantine of the Ogooue-Ivindo province. Although health officials are tracking a number of persons in Libreville believe to have been exposed to the disease, no confirmed cases of Ebola have been identified in Gabon outside of the Ogooue-Ivindo province. The <u>WHO</u> team was forced to relocate due to security concerns, which likely impede intervention efforts. On 10 January, the US State Department issued a public announcement advising Americans to avoid travel to Ogooue-Ivindo province in Gabon and in the areas of Congo which border that province. The report is at <u>http://www.who.int/diseaseoutbreak-news/n2002/january/09january2001.html</u>.

Influenza Surveillance – Europe

EuroGROG reported that for the week 31 Dec 01 – 6 Jan 02 influenza activity ranged from none to widespread, and isolates of influenza A (H3N2) and A (H1N1) were reported. For this week, the EISS reported the following influenza activity: widespread in France; regional in Belgium; local in Spain; sporadic in Germany, Norway, Sweden, and Switzerland. The overall influenza season continues to show low intensity of influenza activity in comparison to previous seasons and the influenza viruses isolated so far resemble the strains in the influenza vaccine.

Meningococcal Meningitis C Vaccine Recommendations – England

On 10 January, CDR Weekly reported that the <u>JCVI</u> now recommends meningococcal meningitis C vaccination for people between the ages of 20 to 24 years (born after 7 January 1977). The recommendations come after a review of the epidemiology of the infection, which revealed that this age group has over twice the background rate of the over 20 years old population. The vaccine has already been offered to people less than 20 years of age with successful results in reducing disease. In the US, the CDC has recommended the polysaccharide meningococcal vaccine, which includes group C, for college freshmen who live in dormitories since 20 October 1999. http://www.phls.org.uk/publications/CDR%20Weekly/pages/news.html

National Infectious Disease Strategy – England

On 10 January, the <u>CDR</u> Weekly reported that the Chief Medical Officer for England published the first ever national strategy for combating infectious disease: *Getting Ahead of the Curve – A Strategy for Combating Infectious Disease*, which is at <u>www.doh.gov.uk/cmo/idstrategy/idstrategy/2002.pdf</u>. The document highlights emerging threats and intervention success stories, as well as identifying potential weaknesses in existing defenses. One of the core elements in the national strategy is a new national agency – the National Infection Control and Health Protection Agency, which will include the functions of the <u>PHLS</u>, the <u>CAMR</u>, the <u>NRPB</u>, and the <u>NFCI</u> and other agencies dealing with chemical incidents. The proposed functions of the new agency are to be in place by April 2003. In addition, a National Advisory Panel is to be established, which will identify and assess new and emerging threats. The focus for the infectious disease programs will be on controlling <u>TB</u>, nosocomial infections, antimicrobial resistance, and blood-borne and sexually transmitted viruses. New actions for each of these areas are to be in place by the end of 2002. http://www.phls.org.uk/publications/CDR%20Weekly/pages/news.html.

JFCOM

Cold Weather Protection – OSHA

On 8 January, the OSHA released guidelines to protect workers in cold environments. The trade news release provides guidance and a link to OSHA's Cold Stress Card, which is available in English and Spanish. The cold stress card, English version is at http://www.osha-slc.gov/Publications/osha3156.pdf, and the news release is at http://www.osha.gov/Publications/osha3156.pdf, and the news release is at http://www.osha.gov/Publications/osha3156.pdf, and the news release is at http://www.osha.gov/media/oshnews/jan02/trade-20020108.html

Ephedra / Ephedrine Recall – Canada

On 9 January, Health Canada requested a voluntary recall of certain products containing Ephdra / ephedrine after a risk assessment concluded that these products pose a serious health risk. Adverse events in some products included stroke, heart attacks, heart rate irregularities, seizures, psychoses, and death. Ephedra refers to several related herbs, while Ephedrine is one of many chemical derivatives of this herb. Specific information on the products involved and previous advisories is at http://www.hc-sc.gc.ca/english/protection/warnings/2002/2002_01e.htm.

Foot And Mouth Disease – US Army Veterinary Corps

A representative from the <u>USDA</u> will address the 2002 Military Veterinary Medical Seminar on 28 February regarding the planned use of US Army veterinarians in the event of an outbreak of <u>FMD</u>.

Nationally Notifiable Disease Revision – CDC

On 11 January, the CDC announced modifications to the Nationally Notifiable Infectious Diseases list, which became effective 1 January. The additions include (1) ehrlichiosis, human, other or unspecified agent; (2) *Streptococcus pneumoniae*, invasive in children less than five years of age; and (3) hepatitis B virus infection, perinatal. Although not required, the CDC recommends reporting cases of *Varicella* (chickenpox). The report is at <u>http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5101a5.htm</u> and the Nationally Notifiable Infectious Diseases list is at <u>http://www.cdc.gov/epo/dphsi/PHS/infdis.htm</u>.

Salmonella Outbreak – Alfalfa Sprouts

The California Department of Education recommends that schools stop serving uncooked sprouts to young children in response to the 16th Salmonella outbreak associated with sprouts. On 11 January, the CDC reported the first outbreak of *S. kottbus* in alfalfa sprouts. The cause of the outbreak was due to inadequate decontamination by a single sprout producer. The seed producer used heat treatment followed by a 2,000-ppm sodium hypochlorite treatment for 15 minutes. The FDA recommends decontamination of seeds with one or more treatments (e.g., soaking in a *20,000*-ppm calcium hypochlorite solution for 15 minutes) approved for pathogen reduction in seeds. Concentrations of 20,000-ppm calcium hypochlorite can impair seed germination, and the CDC cautions that even this level is not completely effective in preventing outbreaks. The CDC updated the 1997 public health advisory reguarding the risks for eating uncooked sprouts, particularly among vulnerable populations (i.e., the elderly, young children, and immunocompromised persons). The CDC and FDA

recommend that persons at high risk for systemic infections not eat raw sprouts. The report is at <u>http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5101a3.htm</u>.

SOUTHCOM

Foot and Mouth Disease – Argentina

On 11 January, the <u>OIE</u> reported that Argentina had completed the second vaccination campaign against <u>FMD</u>, in accordance with the provisions of the national <u>FMD</u> control and eradication plan. The Argentinean Patagonic Region in the north remains a <u>FMD</u> free zone where vaccination is not practiced, while the disease is considered controlled and stable in the remainder of the country. On 3 January, governmental and agricultural representatives signed an agreement to strictly apply the national FMD control and eradication plan.

Task Force – Guantanamo Bay, Cuba

On 11 January, the Armed Forces Press Service reported that Joint Task Force-160 has been activated for detainee operations with assignment to Guantanamo Naval Base, Cuba. The task force includes active duty service members from Fort Hood; Fort Campbell; Roosevelt Roads, Puerto Rico; Camp Lejeune; Dover Air Force Base (AFB); and Charleston AFB. With reserve component personnel, more than 1,000 service members, mostly military police, are expected to provide security for up to 2,000 Al Qaeda detainees. Guantanamo Naval Base will serve as a temporary holding facility for AI Qaeda, Taliban, and other detainees that come under US control during the war on terrorism. The first group of 20 detainees arrived at the base on 11 January.

TB and Air Travel – WHO Guidelines

Tuberculosis rates in Afghanistan are among the highest in the world. Air transportation of a high-risk population, such as the Afghan detainees, may warrant additional precautions. The WHO published "Tuberculosis and Air Travel: Guidelines for Prevention and Control" in 1998. The guidelines indicate that to date, no case of *active* TB has been identified as a result of exposure while on a commercial aircraft. However, some evidence exists, primarily from a CDC study, which indicates that transmission of *Mycobacterium tuberculosis* may occur during long (i.e., more than eight hours) flights. The CDC rated the risk of *M. tuberculosis* transmission on an aircraft as low risk. Ventilation systems of jet aircraft function optimally during flight, but during takeoff and landing, airflow can be decreased. When the plane is delayed on the ground, there may be little or even no ventilation or air movement; thus, ground delays should be kept as short as possible, preferably less than 30 minutes. The WHO guidelines are at http://www.who.int/gtb/publications/aircraft/PDF/98_256.pdf and the CDC report is at http://www.cdc.gov/mmwr/preview/mmwrhtml/00036502.htm.

Travel Warning – Argentina

On 3 January, the US State Department issued a travel warning for Argentina regarding political and economic uncertainty that resulted in sometimes-violent demonstrations. Although public security has been largely restored, and a new President, who is to serve until 2003, has been sworn in, the political, social, and security situation are likely to remain fluid.

STRATCOM

Nuclear Posture Review – Defense Press Service

On 9 January, the assistant secretary for international security policy provided unclassified information regarding the recently released classified Nuclear Posture Review, the first review of US nuclear deterrence since 1994. The new policy will change the US strategy from that of a threat-based approach to a *capabilities-based* approach. Thus, the focus is now on how the US will fight, not who or when. The US Cold War nuclear "triad" - submarine-launched missiles, land-based ICBMs, and nuclear-capable bombers - will change under the capabilities-based concept. The new triad involves (1) the Cold War triad augmented by (2) defensive systems and (3) a responsive infrastructure. Defensive systems include non-nuclear strike forces that will reduce the dependency on nuclear forces for the offensive strike leg of the nuclear component. The US currently has about 6,000 warheads in the nuclear arsenal. Under the new plan, the arsenal drops to 3,800 by fiscal 2007 and between 1,700 and 2,200 by fiscal 2012. The plan calls for Peacekeeper ICBMs to begin retirement this year. Four Trident submarines are being removed from strategic service, the Air Force's B-1 bomber will no longer be nuclear capable, and most importantly, the US will remove some warheads from operationally deployed ICBMs and submarine-launched missiles.

New USACHPPM Products

Staying Healthy Guides

Staying Healthy Guides for (1) Balkans and (2) West Africa are now available at <u>http://chppm-www.apgea.army.mil/deployment/stayinghealthyguides.asp</u>.

Cold Injury Prevention Website

Cold injury prevention resources are consolidated at <u>http://chppm-www.apgea.army.mil/coldinjury/</u>.

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ACRONYMNS

- CAMR Center for Applied Microbiology and Research (England)
- CDC Centers for Disease Control and Prevention
- CDR Communicable Disease Report (England)
- DHHS Department of Health and Human Services
- DoD Department of Defense
- DOE Department of Energy
- DOT Department of Transportation
- EISS European Influenza Surveillance Scheme
- EPA Environmental Protection Agency
- FBI Federal Bureau of Investigation
- FDA Food and Drug Administration
- FEMA Federal Emergency Management Agency
- FMD Foot and Mouth Disease
- ICBM Intercontinental Ballistic Missile
- IDP Internally Displaced Persons
- ILI Influenza-Like Illness
- IRCS International Red Cross Society
- JCVI Joint Committee on Vaccination and Immunisation [sic] (England)
- NFCI National Focus for Chemical Incidents (England)
- NRC Nuclear Regulatory Commission
- NRPB National Radiological Protection Board (England)
- OIE World Organisation [sic] for Animal Health
- PHLS Public Health Laboratory Service
- TB Tuberculosis
- UNHCR United Nations High Commissioner for Refugees
- USDA United States Department of Agriculture
- WHO World Health Organization