USACHPPM

HEALTH INFORMATION OPERATIONS (HIO) WEEKLY UPDATE

6 March 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. Medical intelligence products are available at http://mic.afmic.detrick.army.mil/. The information in the HIO Weekly Update should provide an increased awareness of current and emerging health-related issues.

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HOT ISSUES

Anthrax - Carcass Disposal

On 1 March, the *New York Times* reported that a judicial decision would be reached soon regarding an attempt by the Texas Natural Resource Conservation Commission to fine a veterinarian, the reported discoverer of the Ames strain of *Bacillus anthracis*, for open pit burning of anthrax-infected carcasses. The <u>WHO's</u> preference for destruction of an anthrax-infected carcass is incineration, which includes directions for pit incineration. However, Texas law reportedly only recently allowed for open-pit incineration of anthrax-infected carcasses in counties with 10,000 or fewer residents. Concern exists regarding the less preferred methods of burial or transporting infected carcasses long distances over public roads to commercial incinerators. The Texas Commission is expected to meet on the issue in July. The report is at http://www.nytimes.com/2002/03/01/health/01ANTH.html.

Anthrax Vaccine Immunization Program (AVIP) - DoD

On 26 February, the <u>AFPS</u> reported that Defense officials anticipate an announcement within one month on the revised AVIP. According to the report, military medical officials expect reports in the near future regarding vaccine safety from the Armed Forces Epidemiological Board and the Institute of Medicine. DoD has ongoing clinical studies with the <u>CDC</u> to determine if the vaccine could be administered intramuscularly (versus subcutaneously) to reduce reaction rates tenfold and if the initial <u>FDA</u>-approved regimen of six shots over 18 months could be reduced to four or five shots over a shorter period of time. Any change would first require FDA approval. The report is at http://www.defenselink.mil/news/Feb2002/n02282002 200202287.html.

Anthrax Ventilation Trial - London Underground

On 27 February, the <u>UK</u> declassified a 1964 Microbiological Research Establishment report on a ventilation trial conducted in the London Underground during July 1963 with *Bacillus globigii* from the window of a Northern Line tube train traveling from Colliers Wood to Tooting Broadway. Air samples and dust swabs indicated that bacterial spores were carried for several miles on the tube system and persisted locally as an aerosol of high concentration for a "considerable" period. Further information is at http://www.pro.gov.uk/releases/feb2002/biological1.htm.

Beryllium - Occupational Exposures

There has recently been a renewed interest in occupational exposures to beryllium. This issue is likely to garner significant media and activist attention. A fact sheet will be

posted on the <u>USACHPPM home page</u> as soon as it is complete and other appropriate information will be made available as it is developed.

Bioterrorism Database - Florida

On 20 February, the Florida Department of Health provided a hands-on demonstration of its Merlin Disease Reporting System. Merlin allows real-time reporting for Florida's 67 county health departments via a web-based application, which then allows state epidemiologists to monitor statewide data as it is being investigated. The report is at http://www.doh.state.fl.us/communications/office/pressreleases/2002/02.19.02MerlinRev.PDF.

Chem-Bio Scientific Research - Increased Security

On 2 March, the British Medical Journal reported that the Pentagon's Defense Technical Information Center and the US Department of Commerce's National Technical Information Service had removed from circulation approximately 7,000 technical documents dealing mainly with the production of biological and chemical weapons in an effort to keep this information out of "hostile hands." The report is at http://bmj.com/cgi/content/full/324/7336/505/c.

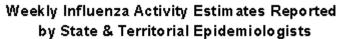
Hepatitis C - Clinical Course

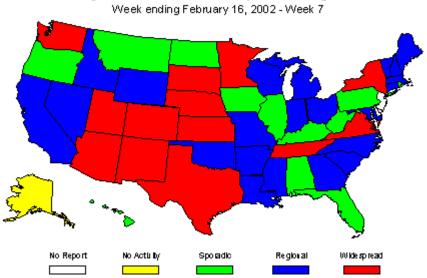
On 23 February, the British Medical Journal reported on a study, which determined that hepatitis C virus (HCV) infection does not have a great impact on all cause mortality during the first 10 years after infection, although infected patients did have an increased risk of dying from a liver-related cause, particularly if excessive alcohol was consumed. The study was unique in that it was a cohort study of 924 transfusion recipients whose exposures were identified through the HCV look-back program and 475 transfusion recipients who tested negative for HCV antibodies. The report is at http://bmj.com/cgi/content/full/324/7335/450.

Influenza Surveillance - US

The CDC report for the week ending 16 February (week 7) indicated that during this week overall national visits to physicians for influenza-like illness was 3.6, which is above the national baseline of 1.9%. Deaths attributed to pneumonia and influenza were 8.2, which is below the epidemic threshold of 8.3% for this week. For week seven, laboratory reports indicated 507 (21.1%) of 2,398 respiratory specimens were positive for influenza: 174 influenza A (H3N2), five influenza B, and 328 influenza A viruses with unspecified subtype. Since 30 September, 5,574 (11.6%) of 47,974 submitted specimens were positive for influenza: 5,506 (99%) were influenza A and 68 (1%) were influenza B. Of the 5,506 influenza A viruses, 1,756 (32%) were subtyped with the following results: 1,739 (99%) were influenza A (H3) and 17 (1%) were influenza A (H1) viruses. Laboratory-confirmed influenza has been reported by all 50 states. All influenza A viruses that have been antigenically characterized (224) were similar to the

vaccine strains. Antigenic characterization of influenza B viruses is discussed in the following paragraph. The <u>CDC</u> classified influenza during the sixth week of the 2002 influenza season as in the map below. The report is at http://www.cdc.gov/ncidod/diseases/flu/weeklyarchives/weekly07.htm.





Picture courtesy of the CDC at http://www.cdc.gov/ncidod/diseases/flu/weekly.htm.

Influenza B - US

On 28 February, the CDC reported that influenza B viruses currently circulating worldwide could be divided into two antigenically distinct lineages, B/Yamagata/16/88 and B/Victoria/2/87. Viruses of the B/Yamagata lineage have circulated widely since 1990. The B component in the 2001-02 influenza vaccine has the B/Yamagata lineage. Viruses of the B/Victoria lineage had not been identified outside of Asia between 1991 and March 2001. Since March 2001, B/Victoria lineage viruses have been identified in Canada, China, Hong Kong, India, Italy, Japan, the Netherlands, Oman, the Philippines, Thailand, and the US (HI, MD, NJ, and NY). The CDC has antigenically characterized 28 influenza B viruses received from US laboratories and collected since 1 October: 24 belonged to the B/Yamagata lineage and four belonged to the B/Victoria lineage. Of the 24 B/Yamagata lineage viruses, seven were similar to the current vaccine strain, B/Sichuan/379/99, and 17 showed somewhat reduced titers to ferret antisera produced against B/Sichuan/379/99. The B component of the 2001-02 influenza vaccine is expected to provide lower levels of protection against viruses of the B/Victoria lineage. A final decision has not yet been made in the US regarding the influenza B component of the 2002-03 vaccine. The report is at

http://www.cdc.gov/ncidod/diseases/flu/weeklyarchives/weekly07.htm.

Military Medical Surveillance - GAO Follow Up Report

On 27 February, the GAO released a follow up report to its initial 24 January report on Military Medical Surveillance. This report details DoD advances since the previous report to include (1) allowing the Veteran's Administration (VA) access to selected health data on service members captured by DoD; (2) issuance of clinical practice guidelines (effective 31 January 2002) that were developed collaboratively with the VA to provide a structure for primary care providers to evaluate and manage patients with deployment-related health concerns; and (3) issuance of updated deployment health surveillance and readiness procedures (effective 1 March 2002) that added important procedures for occupational and environmental health surveillance and updated preand post-deployment health assessment requirements. The GAO report also indicated that a "near-term system" is expected to be operational during the third quarter of this fiscal year, which will allow the VA to access laboratory and radiology results, outpatient pharmacy data, and patient demographic information. The report is at http://www.gao.gov/new.items/d02478t.pdf.

USCENTCOM

Crimean-Congo Hemorrhagic Fever (CCHF) - Pakistan

On 27 February, the <u>UN</u> reported that three people died in Pakistan of what health authorities suspect is CCHF. One of the fatalities was a physician. No further cases have been reported and all remaining healthcare workers who were exposed to the victims are being given prophylaxis and kept in isolation. These and other precautionary measures were taken at the two main hospitals, in Rawalpindi and Islamabad, where the patients were treated. Blood samples were sent to South Africa with results expected within a week to 10 days. The report is at http://www.irinnews.org/report.asp?ReportID=23052&SelectRegion=Central_Asia.

Earthquake - Afghanistan

On 3 March, the National Earthquake Information Center (NEIC) reported that a major earthquake (7.3 magnitude) occurred in the Hindu Kush region about 45 miles south-southwest of Feyzabad or 150 miles north-northeast of Kabul. This is the largest earthquake in this general area since a 7.2 magnitude event in 1983. *The Dallas Morning News* reported that 50 people were reported dead in the Samangan province and seven people in Takhar province and that the earthquake was felt in six countries. On average, five earthquakes occur per year whose epicenters are within 31 miles of this event. The NEIC reported that although human activity, such as mining, have generated some near-surface earthquakes, the depth and magnitude of this event preclude any connection with human activity including the recent bombing. The NEIC report is at http://neic.usgs.gov/neis/bulletin/020303120806.html and *The Dallas Morning News* report is at

http://www.dallasnews.com/latestnews/stories/030402dnintguake.e55dbd9.html.

Water Shortage - Pakistan

On 4 March, the <u>UN</u> reported that water levels at the Tarbela dam, 60 km west of Islamabad, were expected to reach the 1,360 dead-level mark within days. Once the dead-level mark is reached, then water is only released equal to that of the inflow. The Mangla dam, 100 km from Islamabad, was reportedly also under threat. The report is at http://www.irinnews.org/report.asp?ReportID=23524&SelectRegion=Central Asia&SelectCountry=Pakistan.

USEUCOM

Chemical Terrorism - UK

On 2 and 3 March, the *Washington Post* reported that Scotland Yard had intercepted packages containing sodium hydroxide (caustic soda) that were labeled as "aromatic skin lotion," which were sent to Britain's prime minister and a Scottish legislator. The Scottish National Liberation Army claimed responsibility and stated that a total of 16 packages had been shipped. The reports are at http://www.washingtonpost.com/wp-dyn/articles/A29990-2002Mar2.html.

Cholera - Democratic Republic of Congo (DRC)

On 5 March, the WHO reported that 5,021 cases of cholera, including 407 deaths, had occurred in the Katanga Province of DRC since the outbreak began in November 2001. A total of eight health zones in Katanga Province, including the city of Lubumbashi, have been affected. The DRC Minister of Health and health workers from the WHO, Belgium, France, and Spain have set in place outbreak control measures including case management, preventive measures, social mobilization and training, surveillance and operations training activities. The report is at http://www.who.int/disease-outbreak-news/n2002/march/5march2002.html.

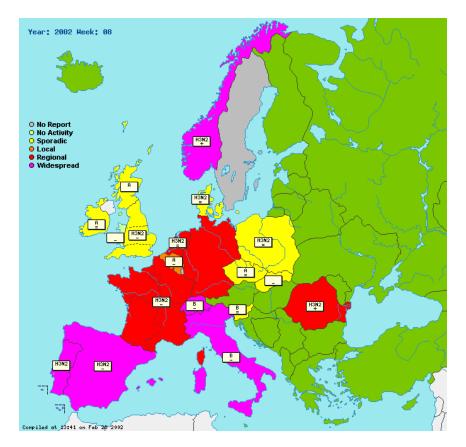
Food Insecurity - Southern Africa

On 22 February, the <u>UN FAO</u> reported that nearly four million people in southern Africa would need emergency food assistance during 2002. Malawi, Zimbabwe, and Zambia, were the hardest hit countries with 33%, 28%, and 24% respective reductions in maize production during 2001 as compared to 2000. Food security in Zimbabwe is also being affected by the general economic crisis that is ongoing, which promotes predictions that further deteriorations in food security may occur during the second half of this year. Reduced harvests, mainly caused by drought, were also reported in southern Mozambique, Swaziland, Lesotho, and Namibia. In Angola, 1.3 million <u>IDPs</u> will likely need food assistance this year as civil war continues. Increased food insecurity with concomitant malnutrition could potentially decrease resistance to disease. The report is at http://www.fao.org/news/global/2002/GW0203-e.htm.

Influenza Surveillance – Europe

For week eight, 18-24 February, the EISS reported widespread influenza activity in five countries: Italy, Norway, Portugal, Spain, and Switzerland. Weekly clinical morbidity rates were increasing in Germany, Norway, and Romania. Influenza A was dominant in 13 networks of which nine reported the dominant subtype was H3N2. Influenza B was dominant in Italy, the Slovenia, and Switzerland. Two influenza viruses were isolated in Europe, which are not in the 2001-02 influenza vaccine: influenza A (H1N2) from England, Scotland, and France and five influenza B/Victoria/2/87-like viruses from Germany (one), Italy (one), and the Netherlands (three). The 2001-02 vaccine should provide a good level of immunity to the influenza A (H1N2) as it is a combination of the two A strains currently contained in the vaccine (H1N1 and H3N2). The 2001-02 vaccine will provide suboptimum protection against the B/Victoria/2/87-like viruses, but data indicates that this subtype comprises only .4% of influenza B viruses isolated thus The report is at http://www.eiss.org/cgi-

files/bulletin v2.cgi?display=1&code=57&bulletin=57.



Picture Courtesy of EISS at http://www.eiss.org/cgi-files/bulletin_v2.cgi?display=1&code=55&bulletin=55.

Pseudomonas Folliculitis - Swimming Pool

On 28 February, the CDR Weekly reported an outbreak of *Pseudomonas aeruginosa* in Yorkshire, England, which began after the weekend of 9-10 February when several

children presented with pseudomonas folliculitis. An environmental investigation at a local swimming pool revealed negative pool water cultures and adequate chlorine levels. However, an inflatable plastic water toy was repeatedly culture positive for *P. aeruginosa* even after disinfection with benzalconium chloride. The inflatable toy was of flexible plastic with a stitched construction, which allowed water to pool on the inside, and a visible biofilm was observed on the surface. The inflatable toy was restricted from use until adequate disinfection techniques could be determined. The report is at http://www.phls.co.uk/publications/CDR%20Weekly/PDF%20files/2002/cdr0902.pdf.

Rapid Alert System for Food Products - Pan-European Food Safety Conference

On 28 February, the <u>UN FAO</u> reported that the first Pan-European Food Safety Conference had concluded with a call for Central and Eastern European countries to join a Rapid Alert System for Food Products, which is operational in the 15 <u>EU</u> member states, Norway, Liechtenstein, and Iceland. Countries participating in the system are obligated to provide information on products that are deemed to pose a serious and immediate risk to the health of consumers to the EU Commission, which then finds and withdraws the product from the market. The recommendations of the conference will be submitted to the UN FAO Regional Conference in May 2002 and the <u>WHO</u>'s Regional Committee for Europe in September 2002 for follow up actions. The report is at http://www.fao.org/WAICENT/OIS/PRESS_NE/english/2002/3000-en.html.

USJFCOM

BSE and Regulatory Areas - **GAO** Report

On 26 February, the GAO published "Mad Cow Disease: Improvements in the Animal Feed Ban and Other Regulatory Areas Would Strengthen US Prevention Efforts," dated January 2002. The report recommended (1) strengthening an enforcement of the feed ban; (2) developing a coordinated strategy to identify resources needed to increase inspections of imported goods; and (3) alerting consumers when products may contain central nervous system (CNS) tissue. USDA non-concurred with the final recommendation stating that labeling and warning statements should be reserved for known hazards citing the Harvard Risk Assessment conclusion that the US is highly resistant to the introduction and spread of BSE. GAO's response was that in light of the experiences in Japan and other countries that were thought to be BSE free, it would be prudent for USDA to consider taking some action to inform consumers when products may contain CNS or other tissue that could pose a risk if taken from a BSE-infected animal. This area will likely continue to be an area of debate. The report is at http://www.gao.gov/new.items/d02183.pdf.

Combating Terrorism - GAO Report

On 1 March, the GAO released the report, "Combating Terrorism: Key Aspects of a National Strategy to Enhance State and Local Preparedness." In the report, GAO reiterated its call for development of a national strategy that will improve national

preparedness and enhance partnerships between federal, state, and local governments to guard against terrorist attacks. GAO acknowledged that creation of the Office of Homeland Defense was an important first step and that this office will propose such a national strategic plan later this year. GAO recommended that key aspects of this strategy include: (1) a definition and clarification of the roles and responsibilities of the 40 federal and numerous state and local entities that have roles in combating terrorism; (2) establishment of goals and performance measures to guide national preparedness efforts and ensure a fiscally responsible effort; and (3) use of policy tools, such as grants, regulations, tax incentives, and regional coordination and intergovernmental partnerships to target areas of highest risk, promote shared responsibilities, and track/assess progress toward achieving national goals. The report is at http://www.gao.gov/new.items/d02473t.pdf.

Congenital Malaria - Plasmodium malariae

On 1 March, the <u>CDC</u> reported a case of congenital *P. malariae* diagnosed September 2000 in a 10-week old infant, who had no travel history outside the US but whose parents had emigrated from the Democratic Republic of the Congo (DRC) four to five years earlier. The mother was reportedly treated with chloroquine shortly before leaving the DRC in 1996. Although the infant in this report could have been infected by the bite of a mosquito that had bitten a *P. malariae*-infected person, congenital transmission is a much more likely source of infection. US healthcare providers should be alert to the diagnosis of malaria in ill neonates and young infants, particularly those with fever and should obtain a complete and accurate travel history on the patient and close relatives. Absence of recent foreign travel or a long interval between immigration of the mother and the birth of the infant should not dissuade clinicians from obtaining blood films on the patient to rule out a potentially life-threatening but easily treatable infection. The report is at http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5108a2.htm.

Lyme Disease Vaccine - GlaxoSmithKline

On 27 February, the *Washington Post* reported that GlaxoSmithKline, maker of the only <u>FDA</u>-approved Lyme disease vaccine, would pull Lymerix[®] off the market due to poor sales. The FDA initially approved Lymerix[®] on 21 December 1998 for active immunization of persons 15-70 years of age. The report is at http://www.washingtonpost.com/wp-dyn/articles/A7747-2002Feb26.html.

Methyl Mercury in Seafood - FDA

On 1 March, the FDA announced that it would soon schedule a meeting of its Food Advisory Committee to review issues surrounding methyl mercury in commercial seafood. This review will include a re-examination of FDA's most recent Consumer Advisory, issued in January 2001 and revised in March 2001, for pregnant women and women of child-bearing age who may become pregnant. The advisory recommended that these women should avoid eating the four fish species with the highest levels of methyl mercury: shark, swordfish, king mackerel, and tilefish. It concluded that these

women could safely eat 12 ounces per week of a variety of other fish, with the emphasis on choosing a variety of different species. A recent report by the Environmental Working Group called into question the basis for FDA's Consumer Advisory and the way in which FDA reached its conclusions on methyl mercury in seafood for this group of women. FDA continues to stand behind the process that led to its current Consumer Advisory, as well as the science that supports that advisory. The report is at http://www.fda.gov/bbs/topics/ANSWERS/2002/ANS01141.html and the consumer advisory is at http://www.cfsan.fda.gov/~dms/admehg.html.

Nucleic Acid Test (NAT) System - Whole Blood

On 28 February, the <u>FDA</u> approved the first NAT system intended for screening donors of whole blood and blood components intended for use in transfusion. This semi-automated system can simultaneously detect the presence of <u>HIV</u> and hepatitis C viral genes rather than antibodies or antigens, thus allowing detection earlier in the infection. The American Red Cross (ARC) reported that they have been using NAT since March 1999 under an investigational new drug protocol. The FDA report is at http://www.fda.gov/bbs/topics/ANSWERS/2002/ANS01140.html and the ARC report is at http://www.redcross.org/press/biomed/bm pr/020228natlicense.

Rash Among Schoolchildren - 14 States

On 1 March, the CDC reported that 14 states (AZ, CT, FL, GA, IN, MS, NY, OH, OR, PA, TX, VA, WA, and WV) have investigated multiple schoolchildren who have developed rashes. The first reported incident occurred 4 October 2001 in Indiana, followed by cases in Virginia that began on 20 November. Subsequent cases began in late January and occurred as recently as 21 February. The number of affected students in each state range from less than 10 to around 600. A few teachers and school staff have been affected, but rarely parents or siblings. Characteristics of the rash vary, but in generally involve an acute onset of maculopapular erythematous lesions, possibly in a reticulated pattern, on the face, neck, hands, or arms that lasts from a few hours to two weeks. Most reports indicate the rash is highly pruritic. Children were afebrile and generally had no other associated signs or symptoms. The rash appears to be selflimiting. About 40 serum samples collected in four states have been PCR or IgM negative for parvovirus B19, 22 nasal swab samples have been negative for enterovirus, and environmental assessments have not identified environmental causes. The state reports do not document a common cause or demonstrate that all children are experiencing the same rash. CDC continues to investigate and requests that dermatologists and other healthcare providers who have examined affected children share their clinical observations, diagnoses, and photographs with a CDC dermatologist at mailto:bdt1@cdc.gov to help CDC assess the likelihood of a common etiology. The report is at http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5108a1.htm.

USPACOM

Avian Influenza - Hong Kong

On 5 March, Reuters reported that another 7,000 chickens were slaughtered on Tuesday morning following an outbreak on a farm in Yuen Long. This is the latest attempt to stop an outbreak of influenza A (H5N1), which was initially identified in early February. Gene sequencing tests have reportedly demonstrated that the virus is different from the H5N1 virus that killed six people in 1997. The report is at http://www.reutershealth.com/archive/2002/03/05/eline/links/20020305elin017.html.

Brain-Wasting Illness Suit - Japan

On 1 March, the <u>VOA</u> reported that the Japanese government and the German company B-Braun Melsungen agreed Friday to pay \$87 million to 20 families, ending a five-year legal battle. The families alleged that their relatives had contracted a "brainwasting illness" from human dura mater transplant material imported from Germany. The court said that the ministry ignored a US warning in 1987, which said that dura mater had been linked to a case of [variant] Creutzfeldt-Jakob disease. Legal observers in Japan see the settlement as a precedent, which will likely be a model for future compensation claims for medically induced diseases in Japan.

Drug-Resistant Leishmaniasis - India

On 2 March, the British Medical Journal (BMJ) reported that up to 60% of leishmaniasis cases in Bihar, the worst affected Indian state, are resistant to the first line drug, sodium antimony gluconate. In response, the Indian Health Ministry announced a control plan that is expected to reduce the incidence to 25% by 2005 and enable elimination of the disease by 2012. A project to screen cows, buffaloes, and rodents in several states for the presence of the leishmania parasite has also been funded after reports of patients who have never traveled or had any contact with people from endemic zones raised suspicions that the parasite may have as yet unidentified animal reservoirs. The report is at http://bmj.com/cgi/content/full/324/7336/505/a.

Please contact the below-listed POC for suggested improvements and/or comments regarding this report. This report is also available on the USACHPPM website at http://chppm-www.apgea.army.mil/Hioupdate/.

POC: Barbara E. Davis, DVM, MPH/MCHB-CS-OHD/584-7663 mailto:Barbara.Davis1@APG.amedd.army.mil

ACRONYMNS

ACIP - Advisory Committee on Immunization Practices

AFMIC - Armed Forces Medical Intelligence Center

AFPS – American Forces Press Service

AIDS – Acquired Immunodeficiency Syndrome

APHIS – Animal and Plant Health Inspection Service

BSE – Bovine Spongiform Encephalopathy

CBRN - Chemical, Biological, Radiological, and Nuclear

CDC – Centers for Disease Control and Prevention

CDR – Communicable Disease Report (England)

CIA – Central Intelligence Agency

CME - Continuing Medical Education

CONUS – Continental United States

DARPA – Defense Advanced Research Projects Agency, the central research and development organization for the Department of Defense

DHHS – Department of Health and Human Services

DoD - Department of Defense

DOE – Department of Energy

DOS – Department of State

DOT – Department of Transportation

ECG - Electrocardiogram

EISS – European Influenza Surveillance Scheme

EPA – Environmental Protection Agency

ESSENCE – Electronic Surveillance System for the Early Notification of Community-Based Epidemics

EU - European Union

FAO - Food and Agriculture Organization (of the United Nations)

FBI – Federal Bureau of Investigation

FCC - Federal Communications Commission

FDA – Food and Drug Administration

FEMA – Federal Emergency Management Agency

FMD – Foot and Mouth Disease

FSIS – Food Safety Inspection Service

FTC - Federal Trade Commission

GAO – US General Accounting Office

GEIS – Global Emerging Infections System

HACCP – Hazard Analysis Critical Control Points

HIV/AIDS – Human Immunodeficiency Virus/Acquired Immune Deficiency Syndrome

IAEA – International Atomic Energy Agency

ICBM – Intercontinental Ballistic Missile

IDP – Internally Displaced Persons

ILI – Influenza-Like Illness

ICRC – International Committee of the Red Cross

IRCS - International Red Cross Society

JAMA - Journal of the American Medical Association

JTF-CS – Joint Task Force – Civil Support http://www.jfcom.mil/About/com_jtfcs.htm

K-FOR – Kosovo Forces, a NATO-led international peace enforcement force that entered

Kosovo on 12 June 99 under a <u>UN</u> mandate. <u>http://www.kforonline.com/</u>

MMR - Measles, Mumps, and Rubella

MRSA - Methicillin Resistance Staphylococcus aureus

NAS – National Academy of Sciences

NATO – North Atlantic Treaty Organization

NCI – National Cancer Institute

NEJM – New England Journal of Medicine

NICHD – National Institute of Child Health and Human Development

NIH – National Institutes of Health

NIOSH – National Institute for Occupational Safety and Health

NPIC – National Pesticide Information Center

NRC – Nuclear Regulatory Commission

OIE – World Organisation [sic] for Animal Health

OSHA - Occupational Safety and Health Administration

PA – Protective Antigen

PCBs - Polychlorinated Biphenyls; more info is at EPA: http://www.epa.gov/opptintr/pcb/

PCR - Polymerase Chain Reaction

PHLS – Public Health Laboratory Service

PHS – Public Health Service

PPE – Personal Protective Equipment

RSV – Respiratory Syncytial Virus

TB - Tuberculosis

UK – United Kingdom – England, Northern Ireland, Scotland, and Wales

UN – United Nations

UNHCR – United Nations High Commissioner for Refugees

USAID - United States Agency for International Development

USAMRIID - United States Army Medical Research Institute for Infectious Diseases

USDA – United States Department of Agriculture

USPSTF – United States Preventive Services Task Force

vCJD - variant Creutzfeldt-Jakob Disease

VOA – Voice of America, an international multimedia broadcasting service funded by the US Government

WHO – World Health Organization

WMD – Weapons of Mass Destruction