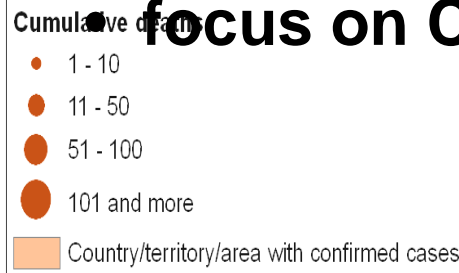


**Pandemic (H1N1) 2009
Update:
New Zealand's Experience**

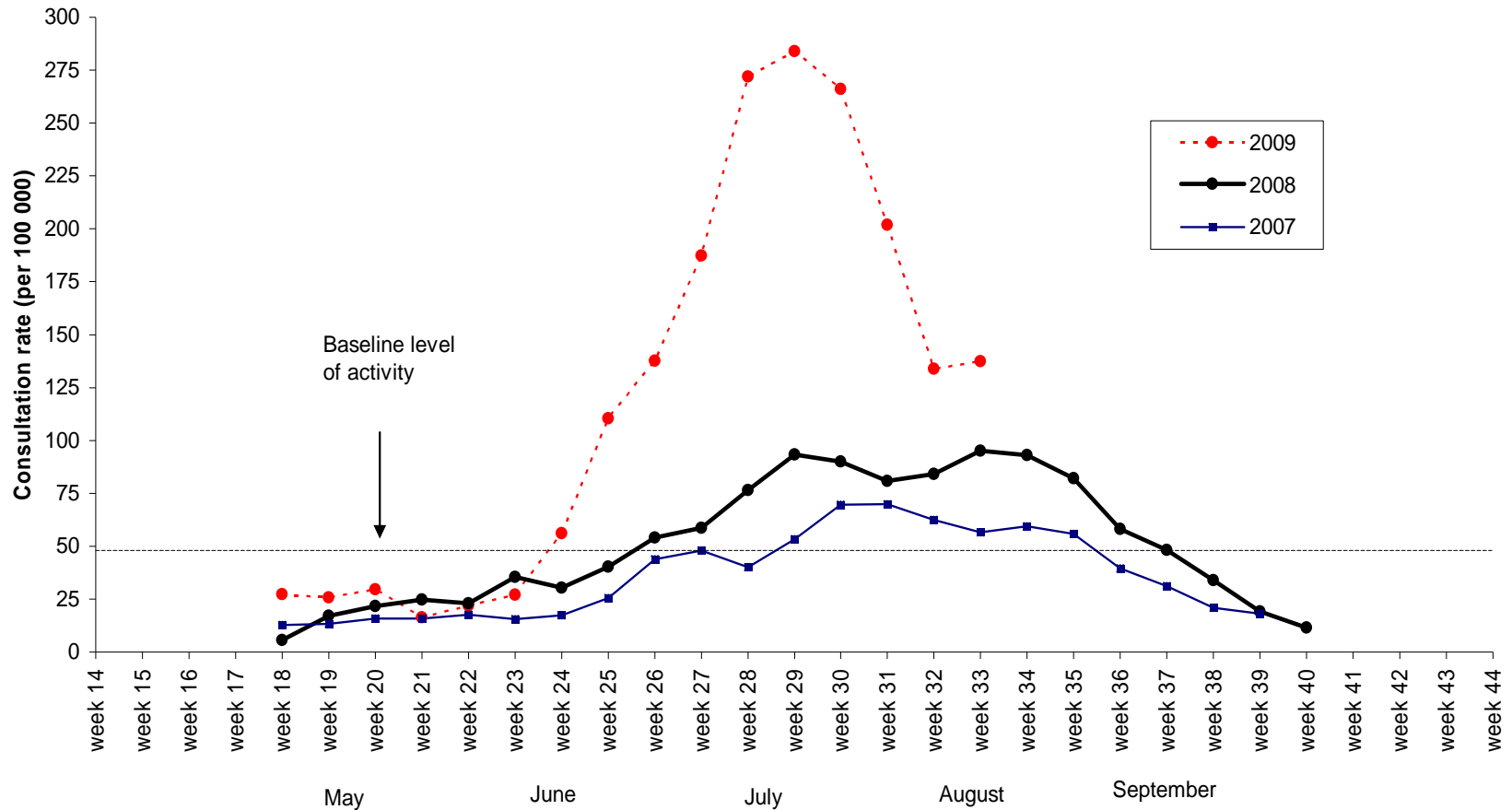
Lance Jennings
Canterbury Health
Laboratories, CDHB

Outline

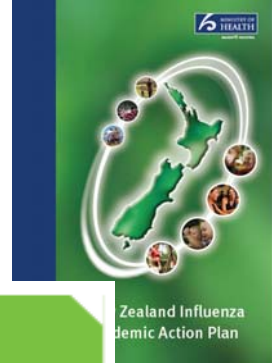
- **New Zealand's Pandemic (H1N1) 2009 pandemic response**
- **Containment Phase “keep it out”**
 - border management
- **Management phase “manage it”**
 - opening of Flu Centres
 - focus on Canterbury region



NZ Weekly ILI Sentinel GP Consultation Rates



NZ Influenza Pandemic Action Plan



WHO Period*	WHO Phase*	NZ Scenario**	Main Strategy	MOH/DHB Alert Code***
Interpandemic period	Phase 1	Scenario 1.1	Planning	N/A
	Phase 2	Scenario 2.1		WHITE (information/ advisory)
Scenario 2.2				
Pandemic alert period	Phase 3	Scenario 3.1		Border management
		Scenario 3.2		
		Scenario 3.3		
		Scenario 3.4		
	Phase 4	Scenario 4.1	Cluster control	YELLOW/RED depending on district/ region and exact situation
		Scenario 4.2		
	Phase 5	Scenario 5.1	Pandemic management	RED (activation)
Scenario 5.2				
Pandemic period	Phase 6	Scenario 6.1	Recovery	GREEN (stand down)
		Scenario 6.2		
		Scenario 6.3		
		Scenario 6.4		
Post-pandemic period	Post-pandemic period			

<http://www.moh.govt.nz/pandemicinfluenza>

NZ Influenza Pandemic Plan outline

Plan for it

- Engage with all relevant agencies

Keep it out

- Border management

Stamp it out

- Cluster control operations

**Enhanced
Surveillance**

Manage it

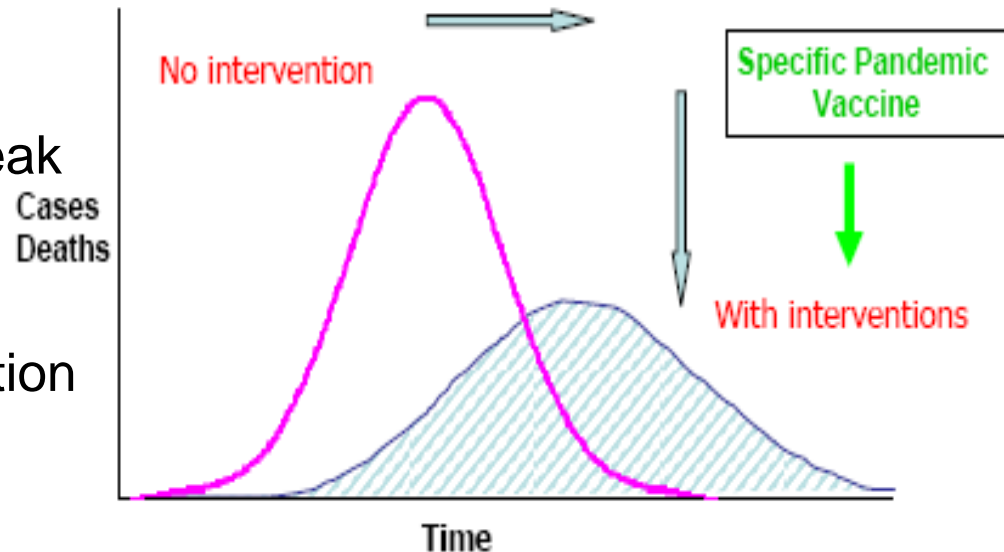
- Public health measures,
- Public gatherings, antivirals

Recover from it

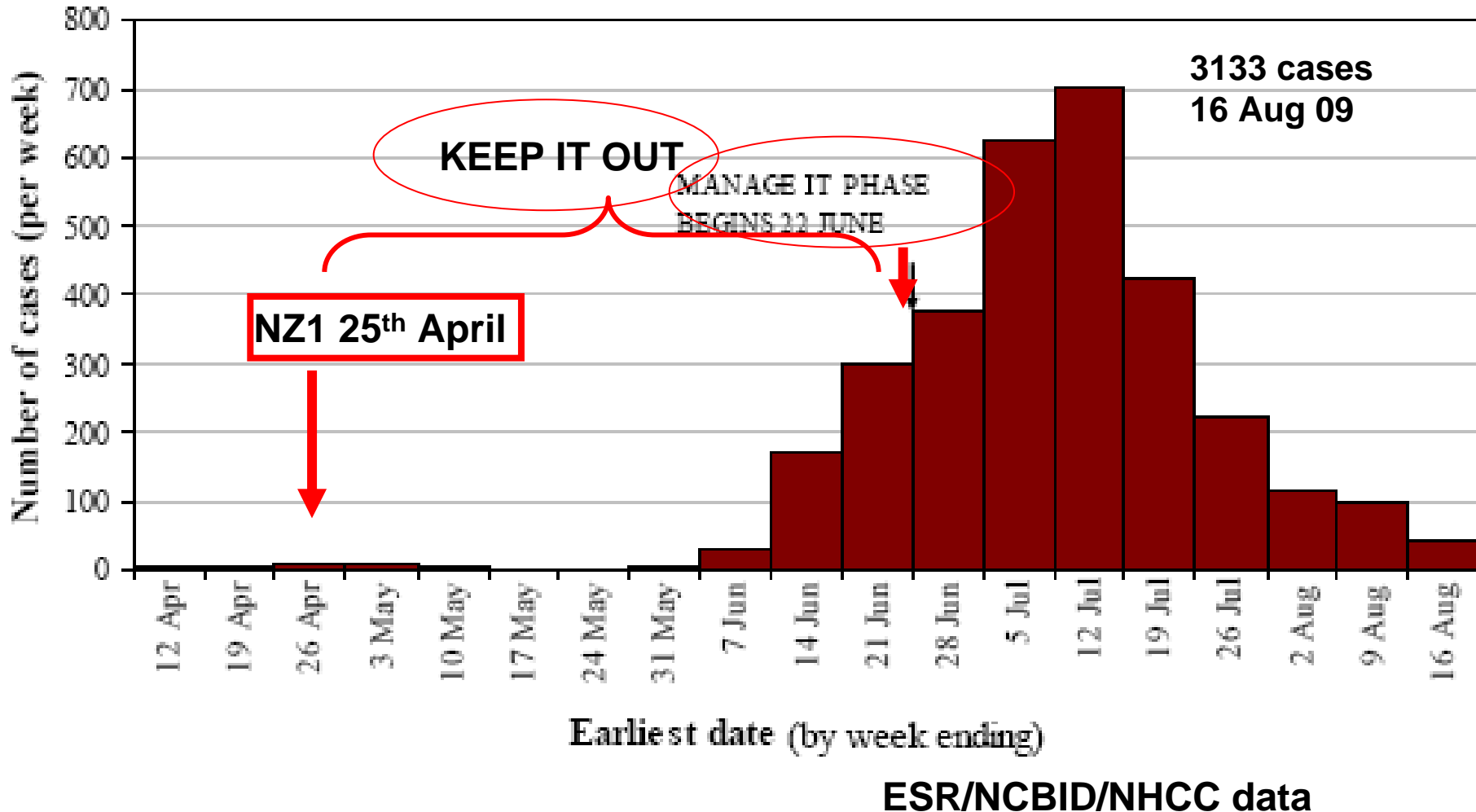
- Return to normal service delivery

Objectives of Action Plan

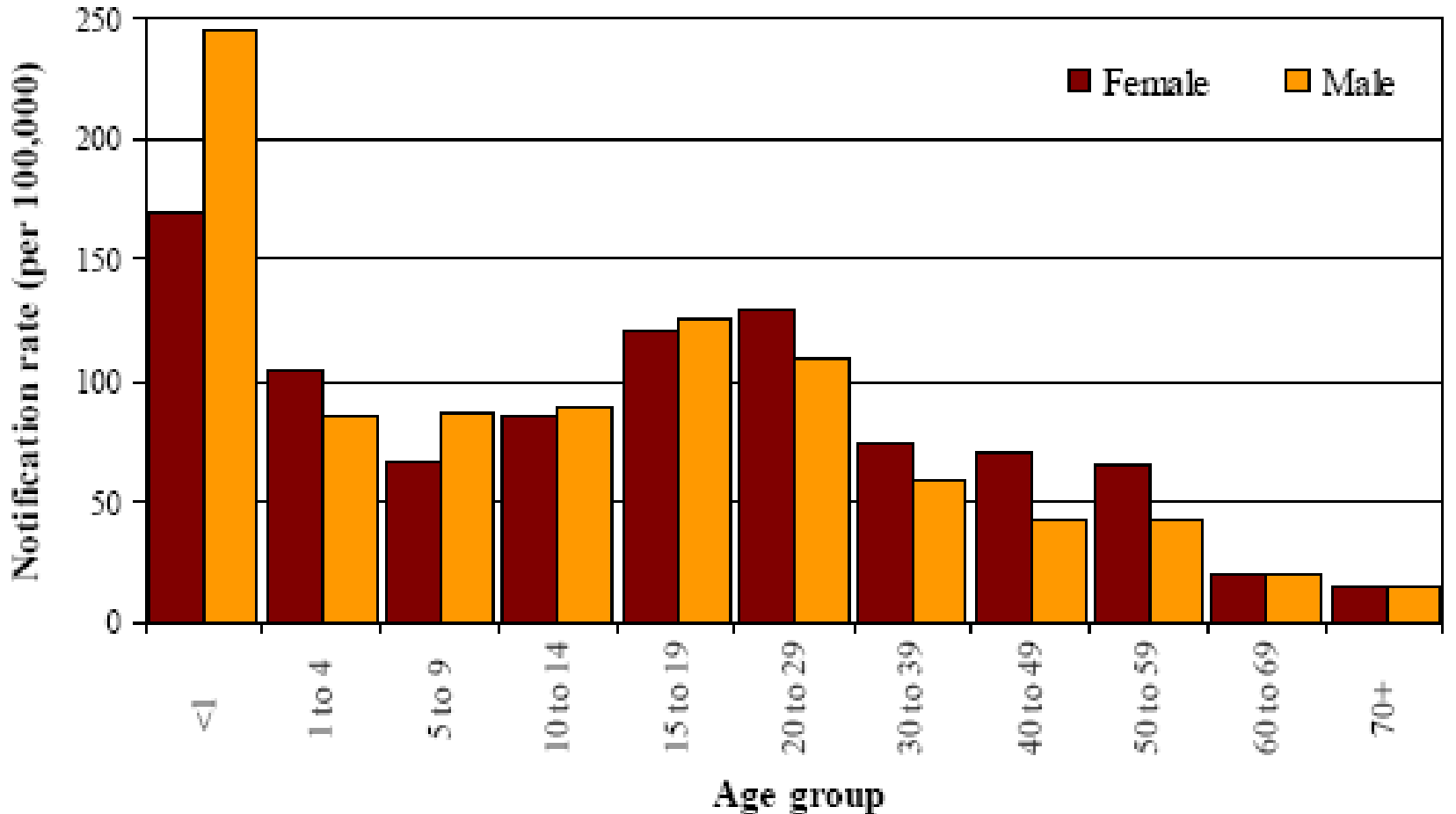
- **Primary Objective**
 - Reduce transmission & so number of infections, illness & deaths
- **Secondary Objectives**
 - Delay & flatten outbreak peak
 - Reduce peak burden on healthcare system
 - Buy some time for preparation & developing pandemic vaccines



Pandemic (H1N1)2009 NZ Epidemic Curve: Important events

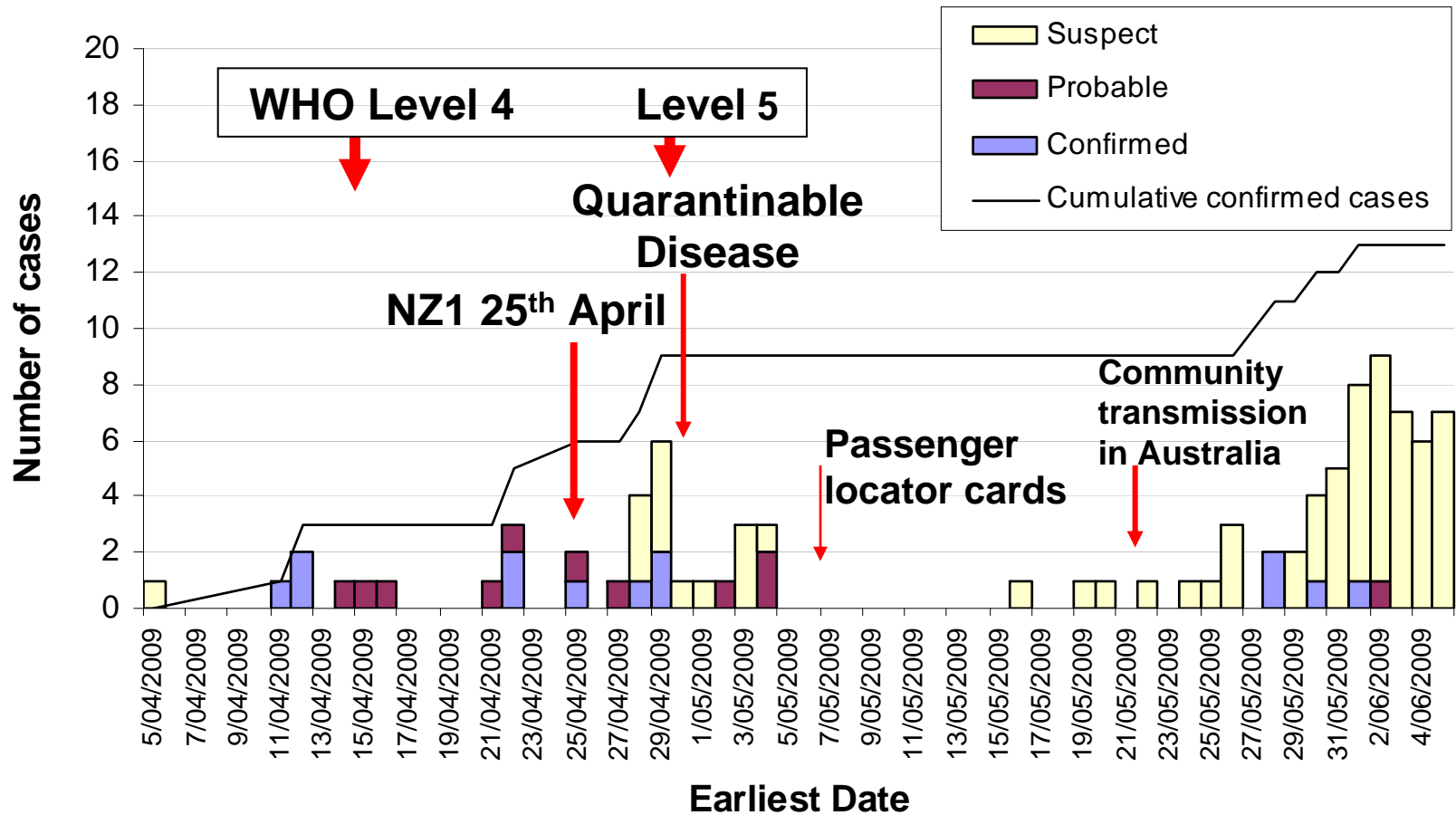


NZ Cases by Age & Sex



ESR/NCBID/NHCC data

'Keep It Out' Phase, April-May 2009



Earliest of date reported, date hospitalised, date of death or onset date, as recorded in EpiSurv.

NHCC data 2009

'Keep It Out' Phase

Depended on:

- Maximising the detection and effective management of infected and potentially infectious people arriving in NZ.
 - Public Health announcement on all incoming aircraft
 - Positive pratique of all incoming aircraft and ships (ie, 100% health status reported from all aircraft).
- Completed passenger locator card to allow contact tracing.
- Public health staff at airports to carry out clinical assessments.
- All suspect cases and contacts managed with treatment and quarantine.

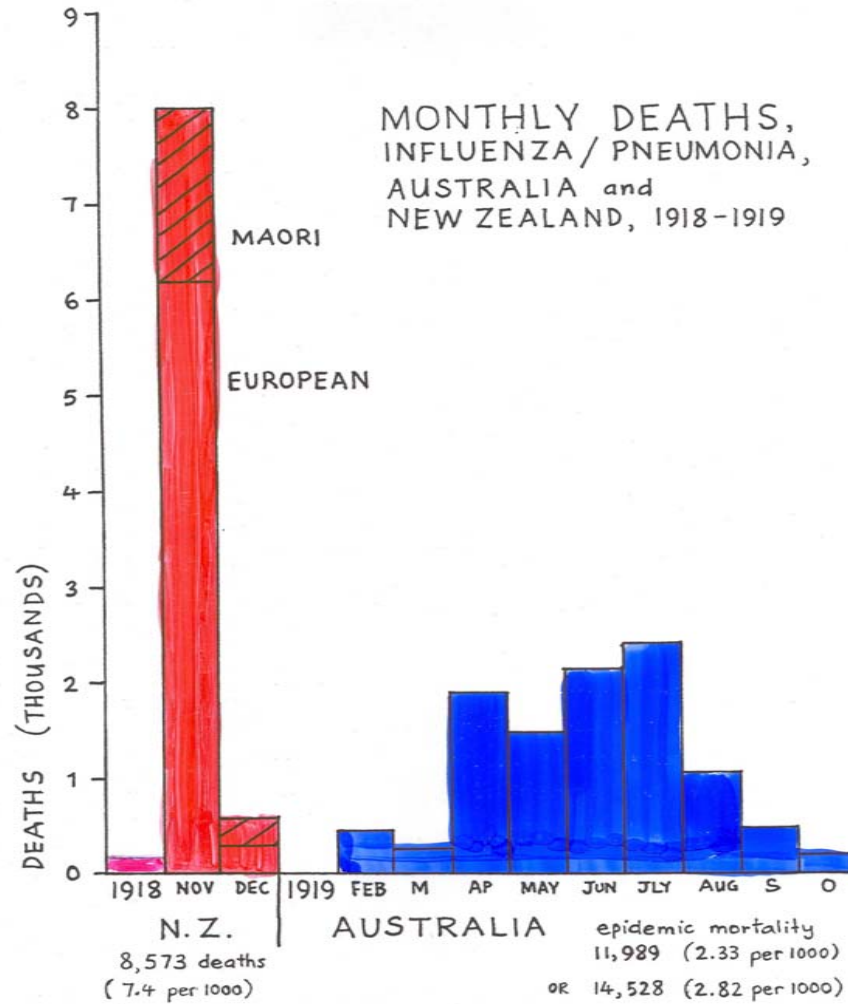
Border Closure/Border Management

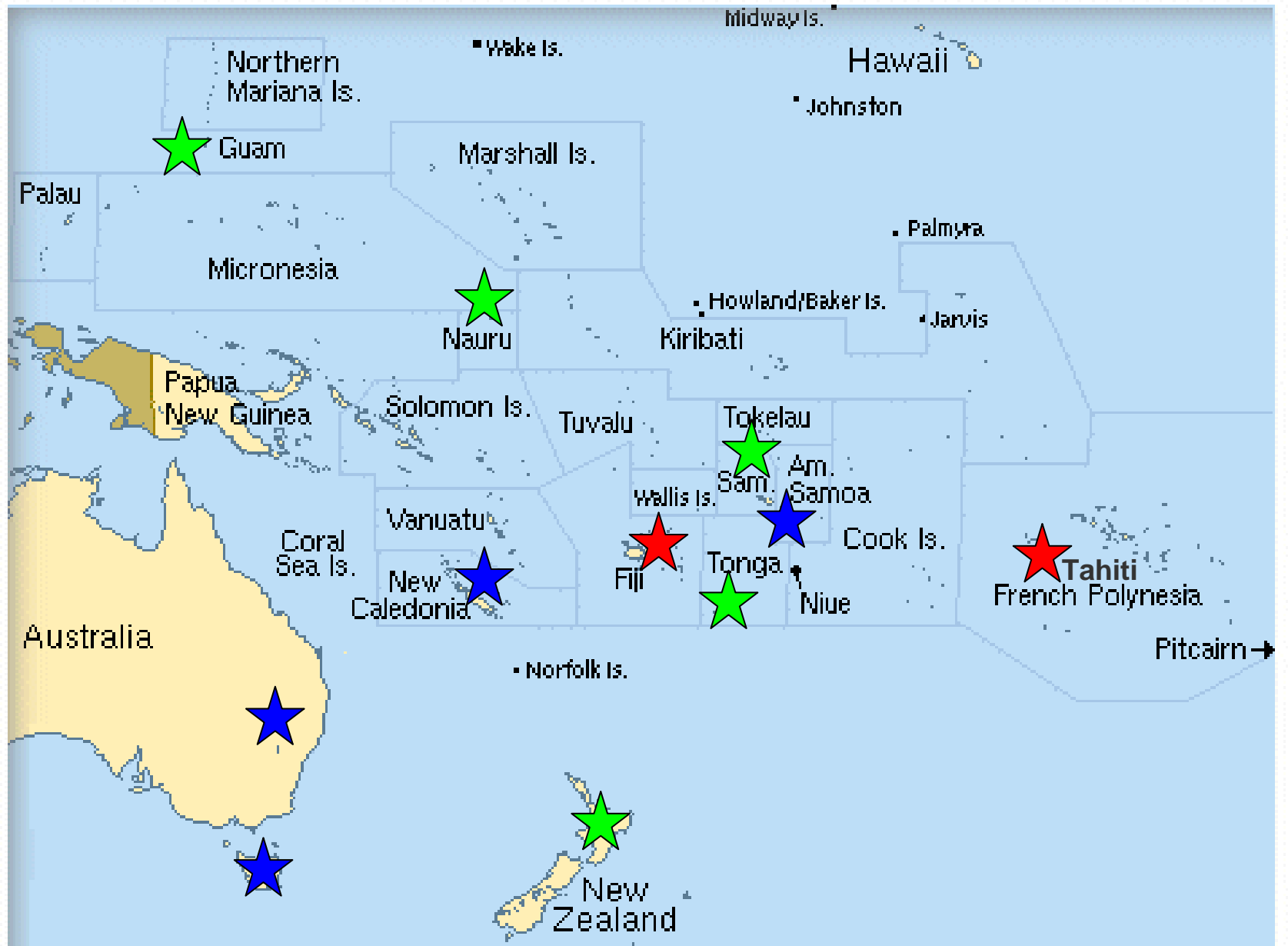
- Effectiveness?
 - “Unless little international travel to a country and almost complete cessation of travel, attempts at border closure will be unsuccessful in preventing entry.”
Interim Guide to Public Health Measures: ‘The ECDC Menu’, 2007
 - Modelling exercises support this unless almost complete and rapidly implemented.
Cooper BS et al. PLoSMed 2007;3;212




WHO

- has placed little emphasis on border closure except for ‘isolated communities’

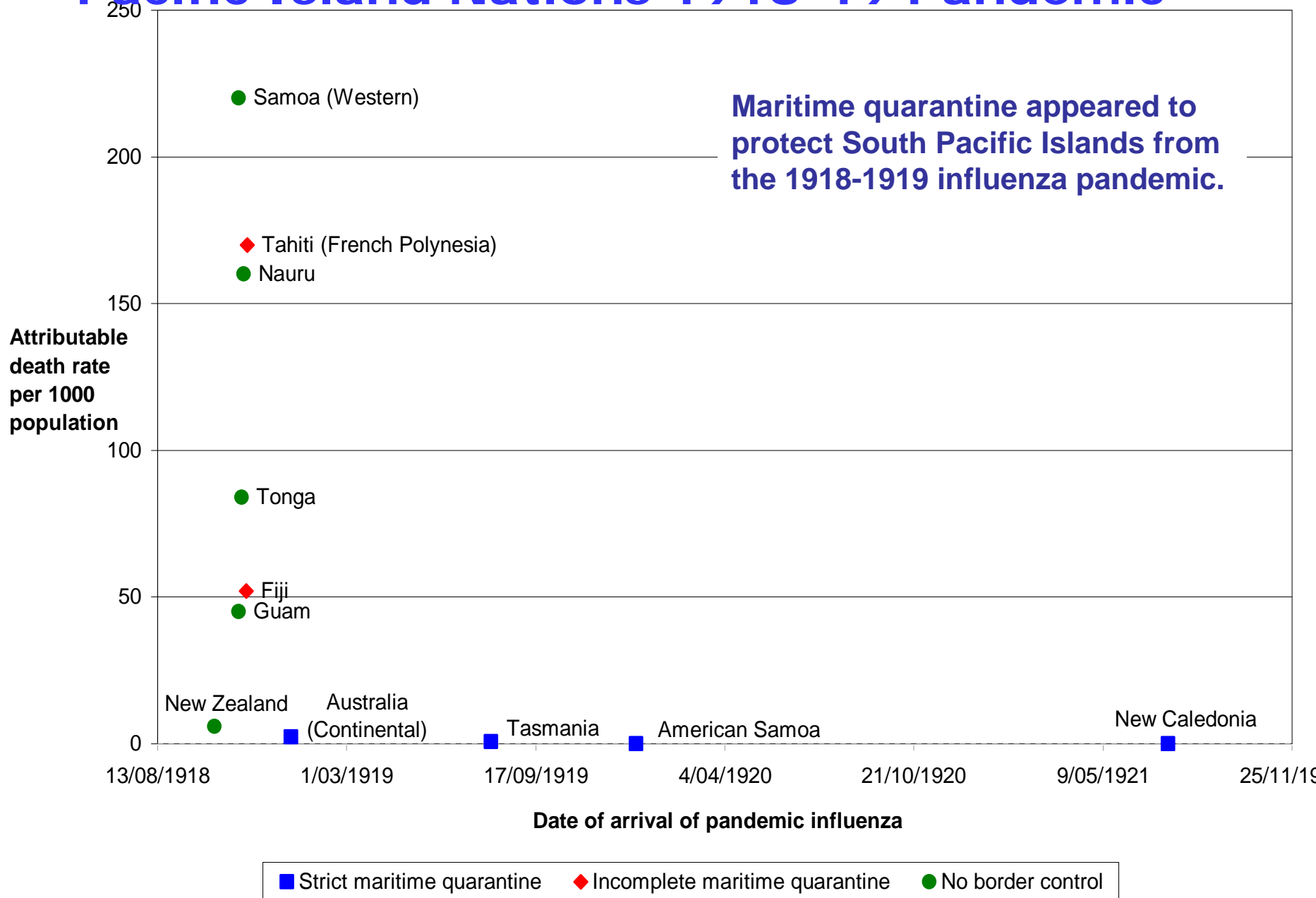
NZ & Australia 1918-19 Pandemic





Key  Strict maritime quarantine  Incomplete quarantine  No border control

Pacific Island Nations 1918-19 Pandemic



Influenza in International Travellers Study

23 June to 12 September 2008

- **18,148 questionnaires were returned**
 - 16.8% were 'symptomatic' .
 - ILI (cough/sore throat + reported fever)
- **Influenza prevalence**
 - 2000 samples from symptomatic travellers
 - 2500 samples from asymptomatic travellers.

Duncan, Priest, Jennings et al. Screening for Influenza Infection in International Airline Travelers. American Journal of Public Health 2009 [In Press].

Priest et al (in preparation)

- **Suggests**
 - during the seasonal influenza season there will be ~ 120 people infected with influenza in every 10,000 arriving passengers.

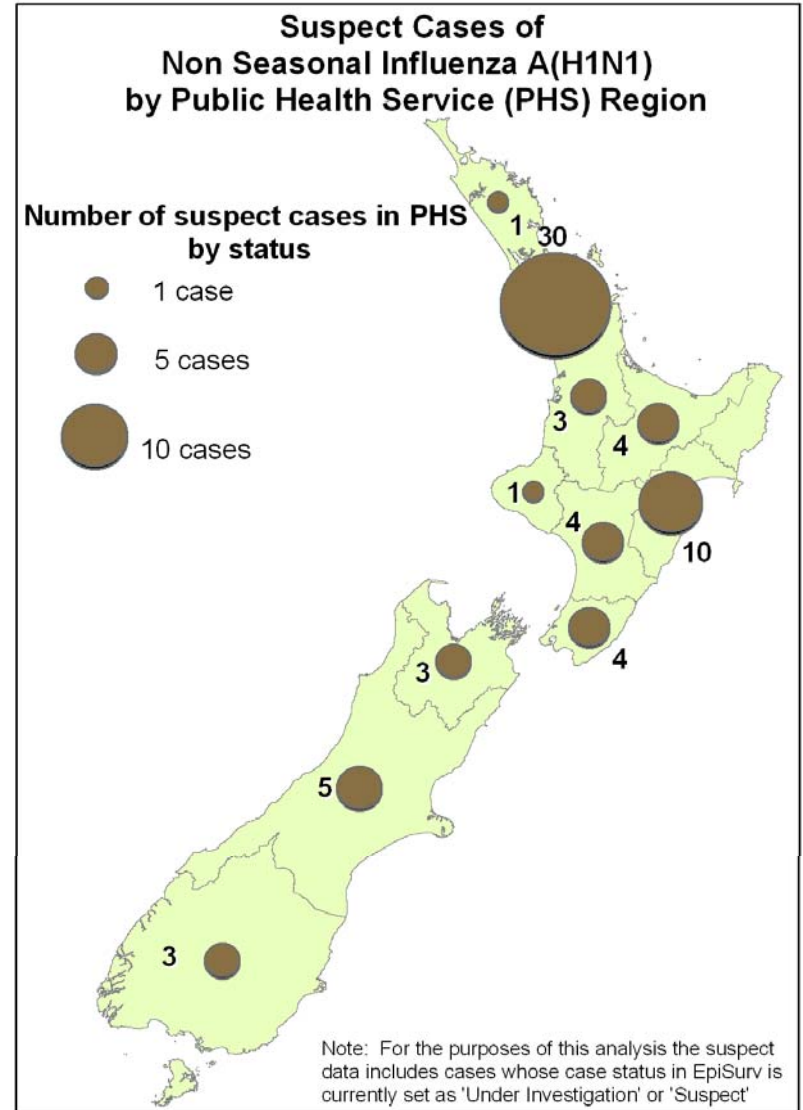
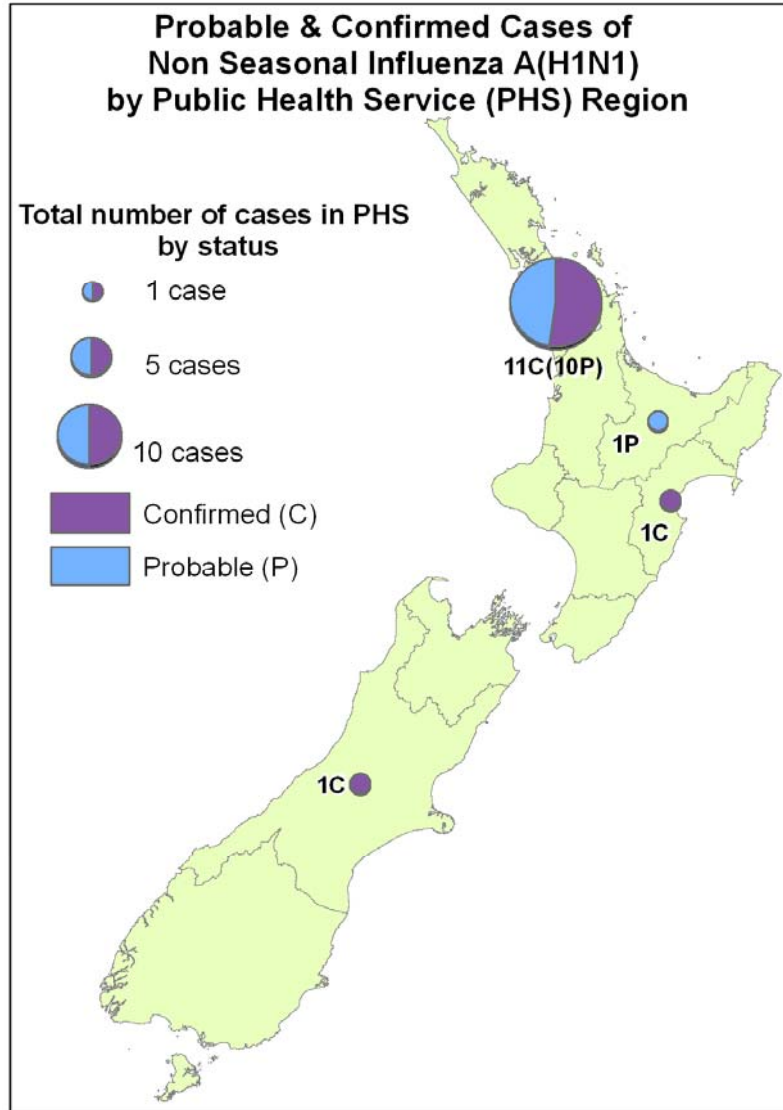
Baker et al. Discussion Paper May 2009

Estimated number of flights and passengers arriving at Auckland International Airport in a typical week (April-May 2009)

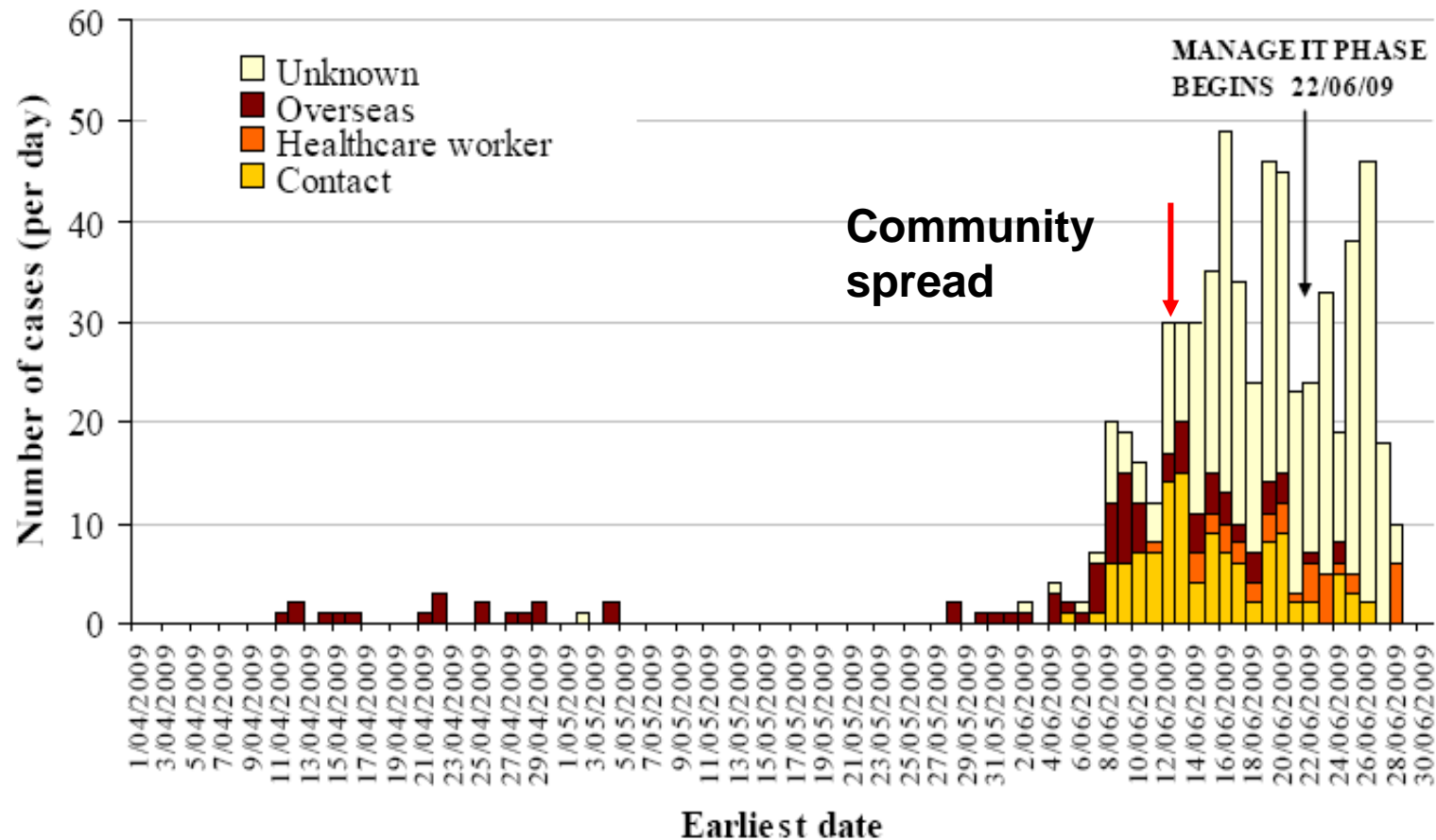
Day	Total		High risk countries ¹	
	Flights	Passengers	Flights	Passengers
Mon	47	7603	4	942
Tues	52	7532	4	1046
Wed	54	7095	3	699
Thurs	51	8399	3	777
Fri	51	8587	5	739
Sat	57	9700	3	810
Sun	66	11895	6	1561
Total	378	60812	28	6574

¹High risk countries = those in North America (April-May 2009)

A(H1N1)2009 Cases 6th June



Cases & Risk Factors April-June

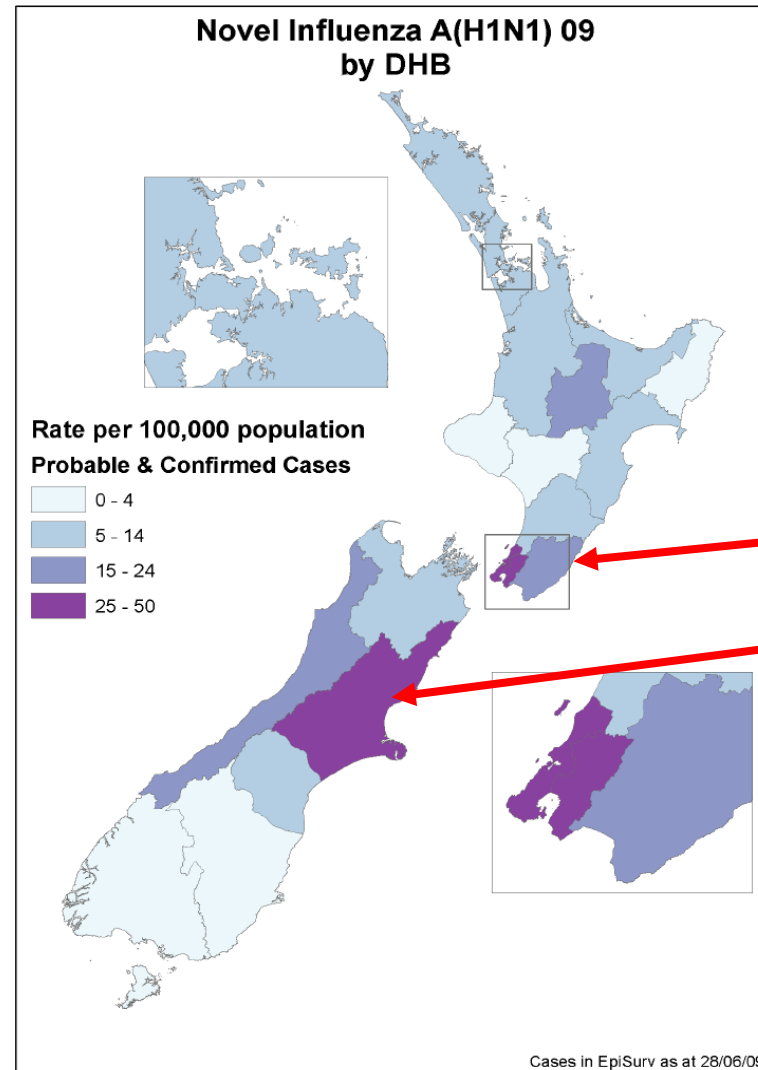


Earliest of date reported, date hospitalised, date of death or onset date, as recorded in EpiSurv.

Management Phase

- NZ 'Manage it' phase
 - Announced 19th June

(H1N1)2009 by 3 July



Wellington

Canterbury

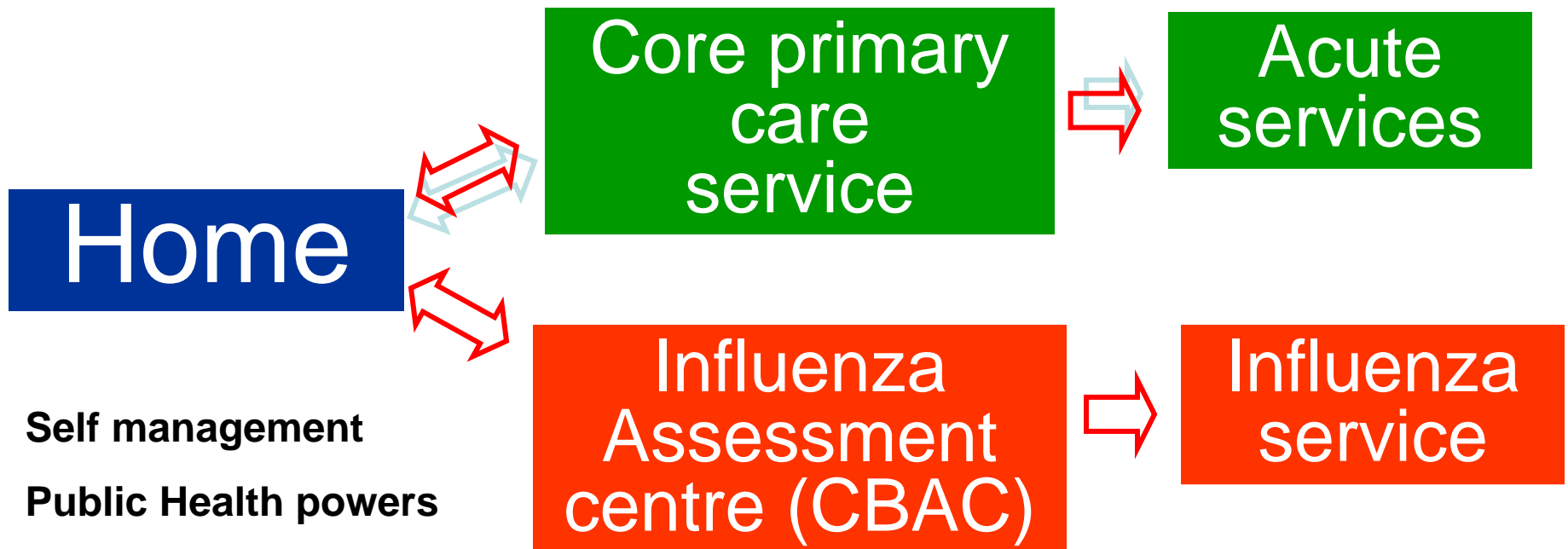
ESR/NZBID 2009

1° & 2° Healthcare Strategy: Separated streamed services

Community

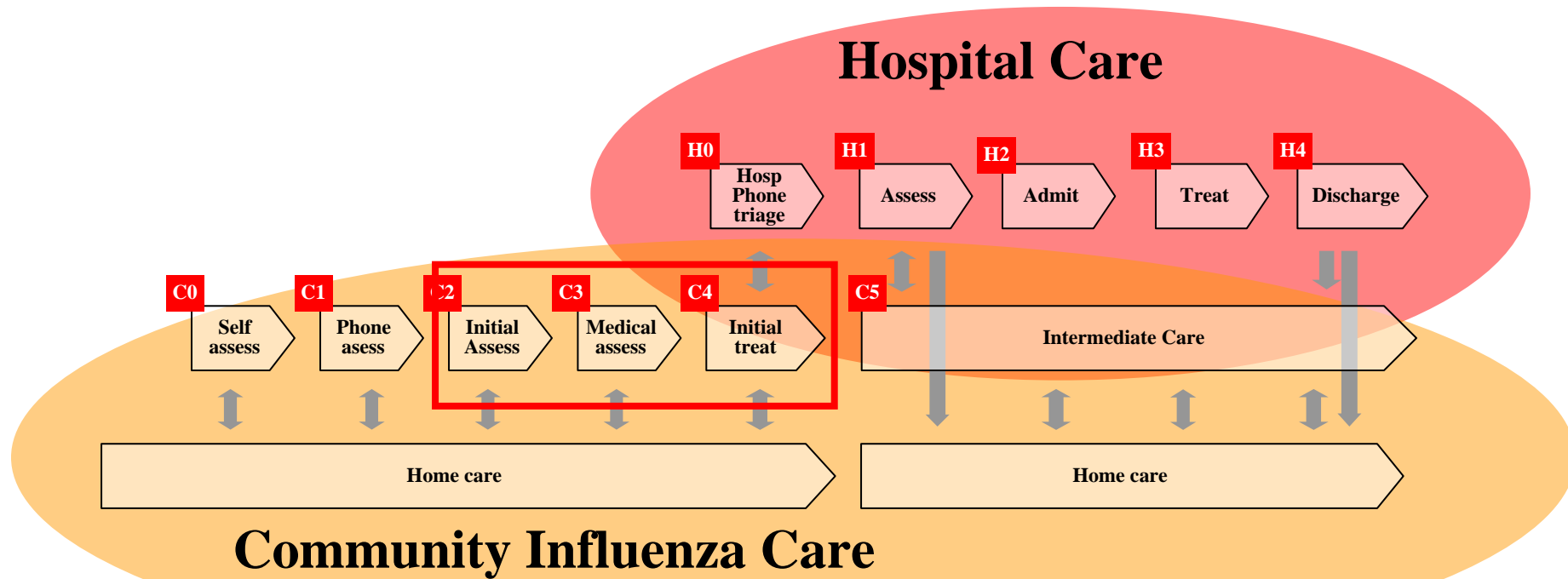
Primary Care

Hospital



Red Stream

Influenza care pathway



Community Support

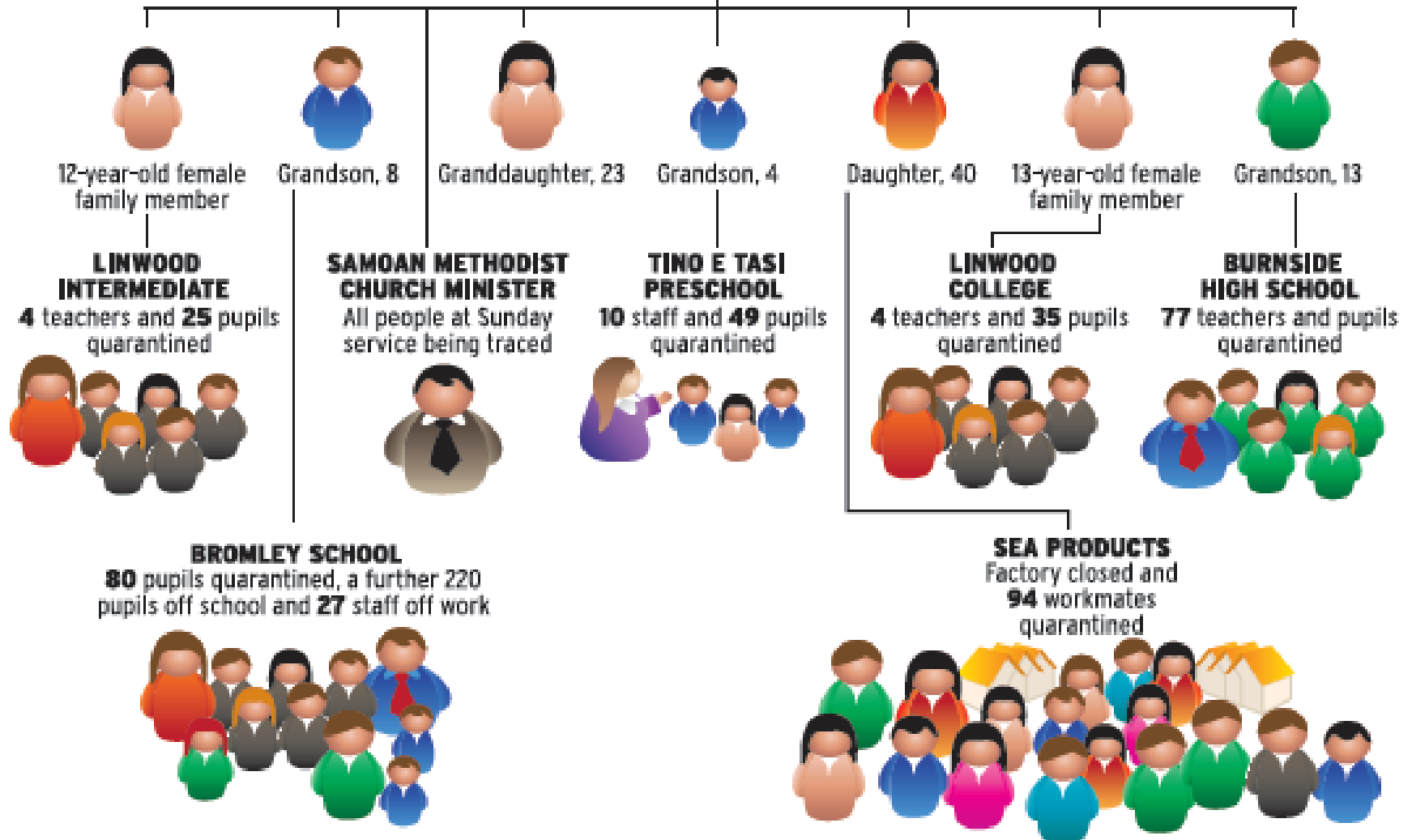
The spread of swine flu

How one person has infected or affected more than 630 people.



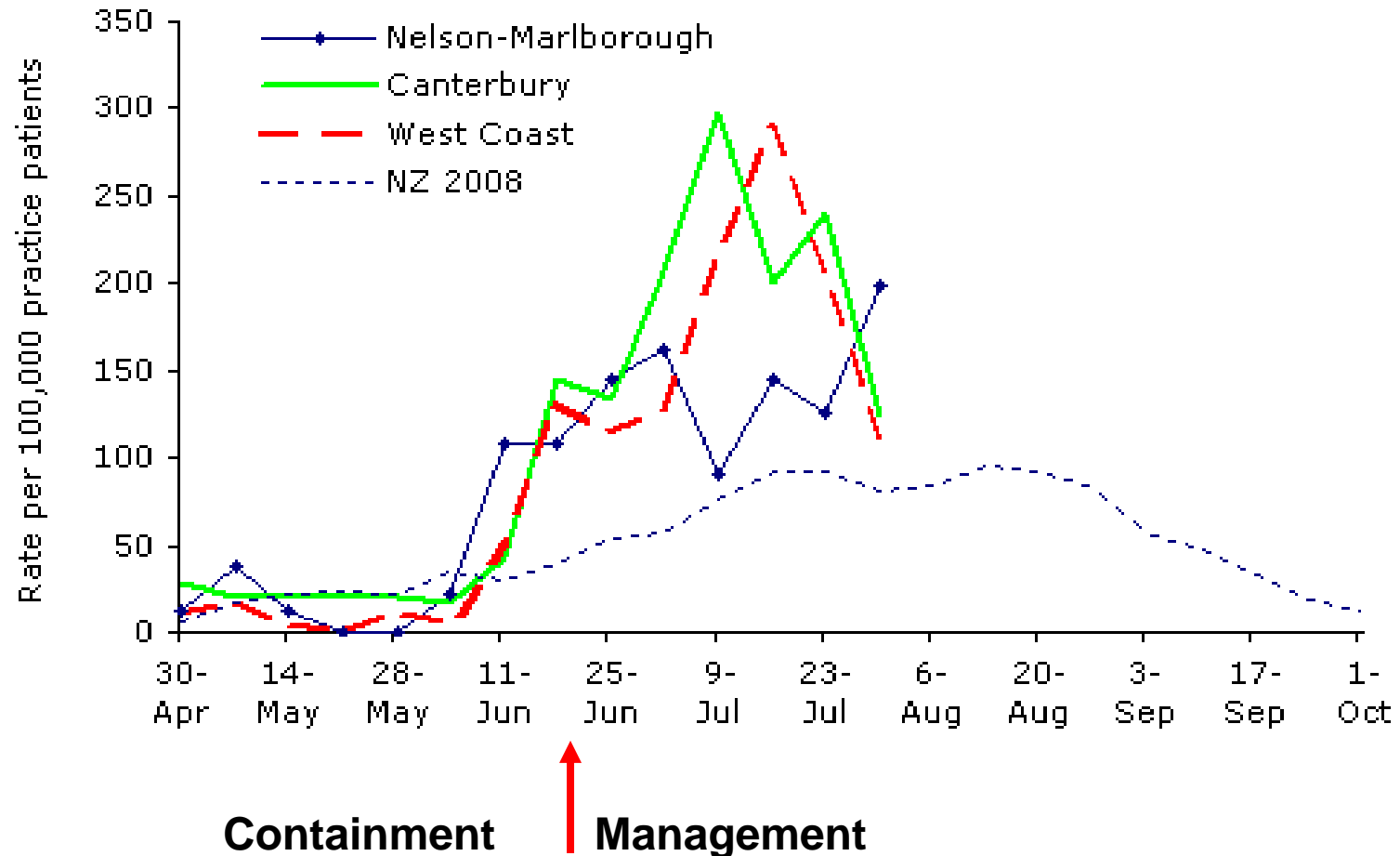
Grandmother returns from Australia with swine flu and infects ...

4th June 2009



The Press, 12th June 2009

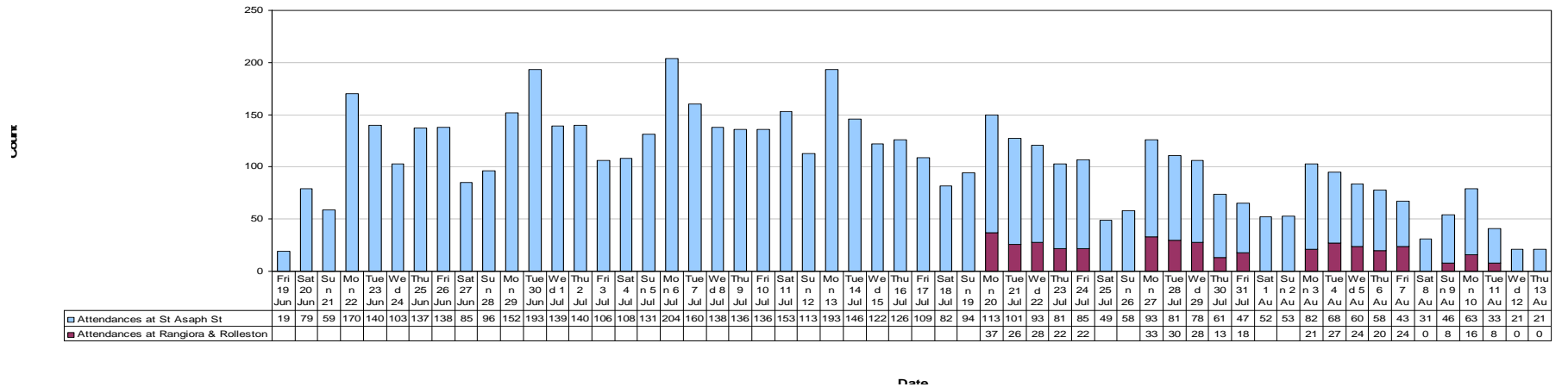
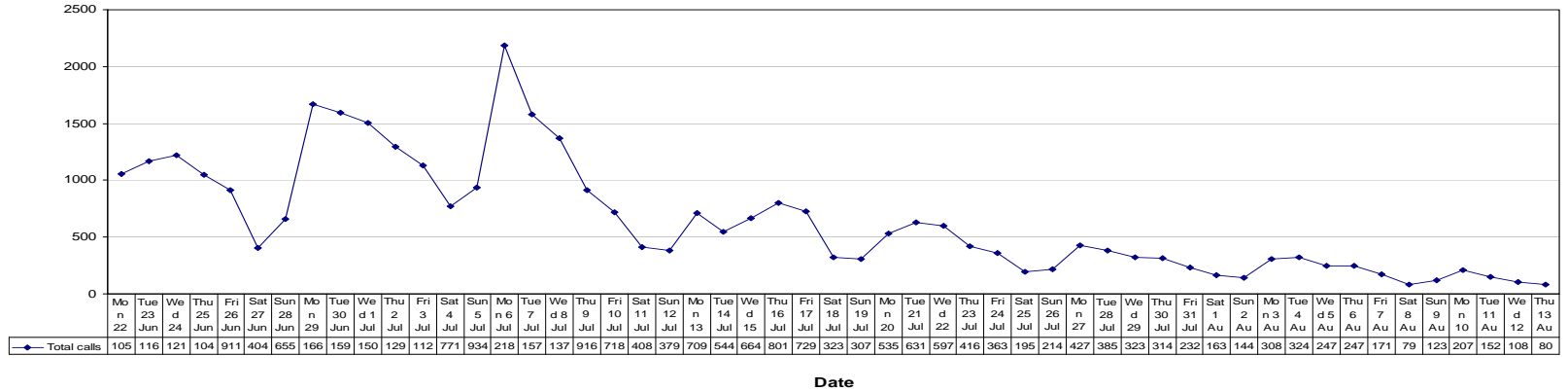
Canterbury: Escalation



St Asaph St Flu Centre

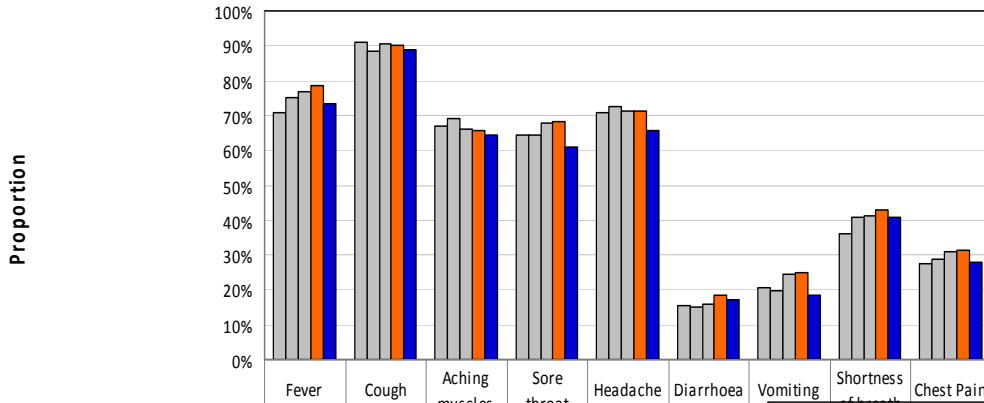


Canterbury Healthline 0800 Calls & Flu Centre Attendances



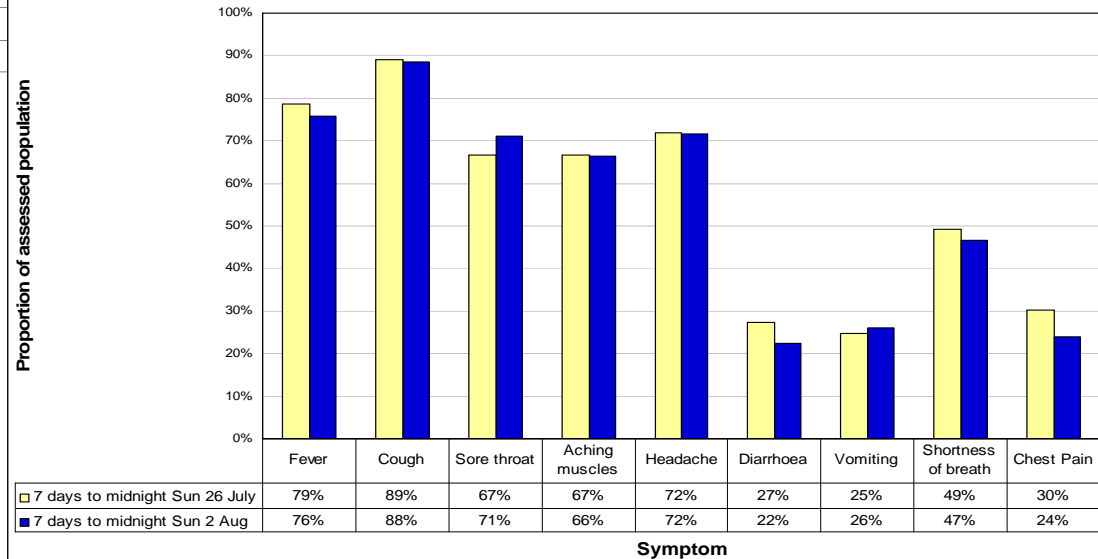
Canterbury: Flu Centre- Symptoms

Symptom prevalence among triaged patients



	48hrs ending Midnight Mon 29 Jun	48hrs ending Midnight Wed 01 Jul	48hrs ending Midnight Fri 03 Jul	48hrs ending Midnight Sun 05 Jul	48hrs ending Midnight Tue 07 Jul
Fever	71%	75%	77%	79%	73%
Cough	91%	88%	91%	90%	89%
Aching muscles	67%	69%	66%	66%	64%
Sore throat	64%	64%	68%	68%	61%
Headache	71%	72%	71%	71%	66%
Diarrhoea	15%	15%	16%	19%	17%
Vomiting	20%	25%	25%	25%	18%
Shortness of breath	36%	42%	42%	43%	41%
Chest Pain	28%	30%	32%	32%	28%

Assessed patients by symptom



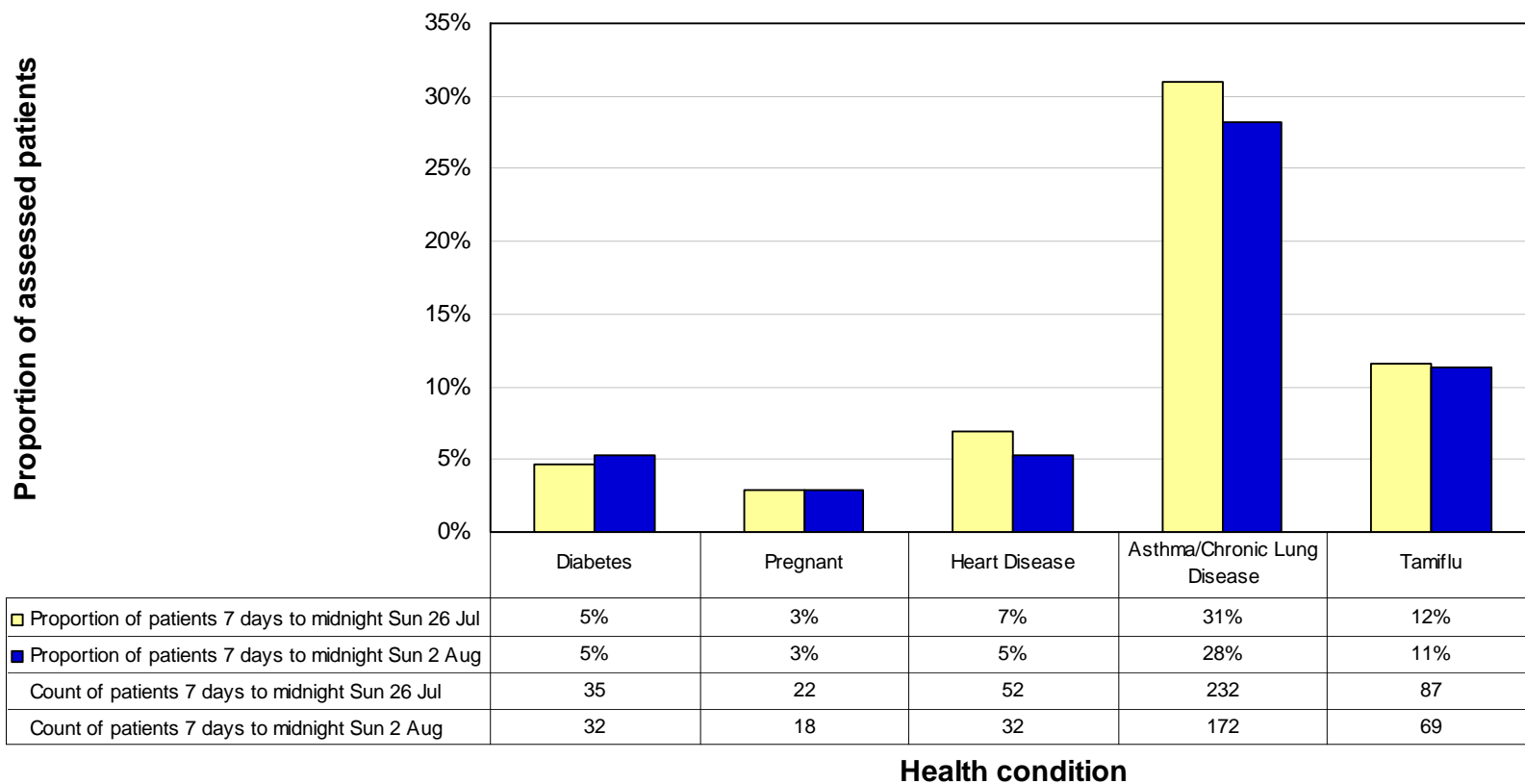
Proportion of assessed population

	7 days to midnight Sun 26 July	7 days to midnight Sun 2 Aug
Fever	79%	76%
Cough	89%	88%
Sore throat	67%	71%
Aching muscles	67%	66%
Headache	72%	72%
Diarrhoea	27%	22%
Vomiting	25%	26%
Shortness of breath	49%	47%
Chest Pain	30%	24%

Symptom

Canterbury: Flu Centre-Health Conditions & Treatment

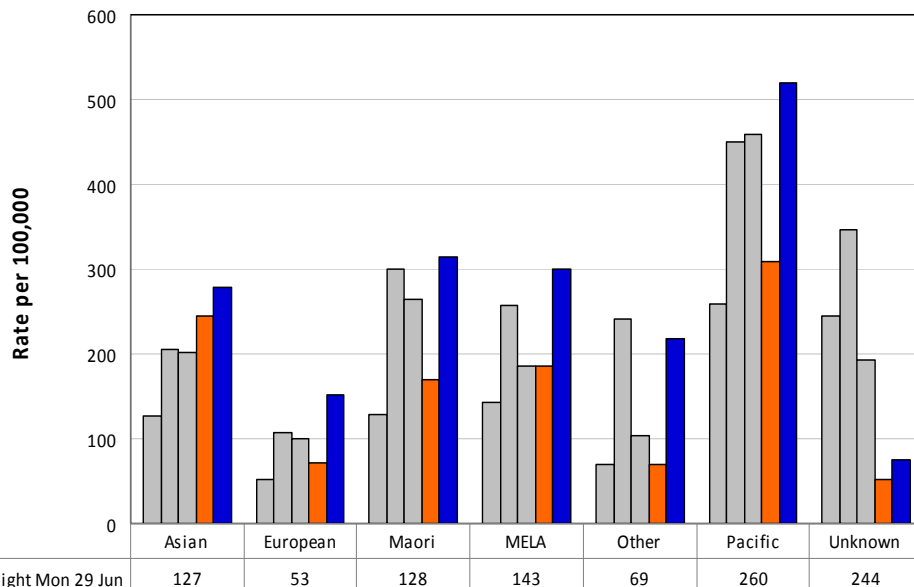
Assessed patients by health conditions and treatment



Canterbury: Flu Centre - Ethnicity

Triaged patients by ethnic group

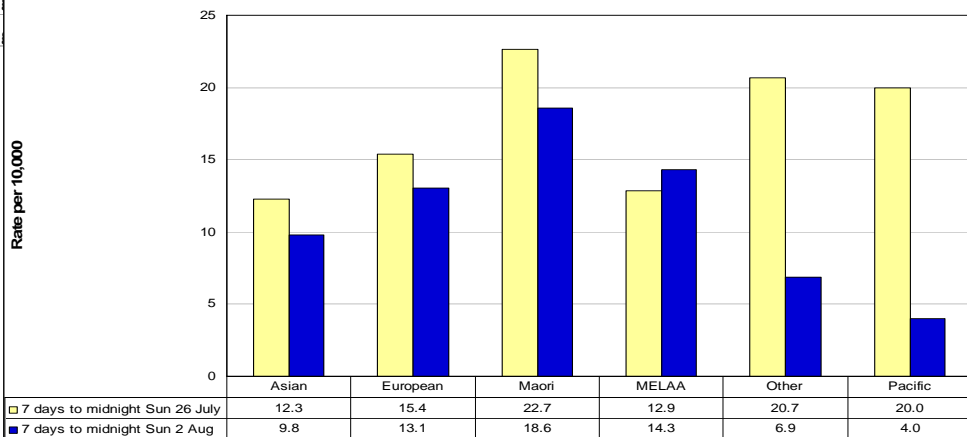
rate per 100,000



<u>National Rates</u>	
42.6	Maori
94.0	Pacific
23.9	Asian
34.4	Other
13.2	European

Assessed Patients by Ethnic Group

Ethnic group-specific rates per 10,000



Ethnic group

Hospital Admissions

National

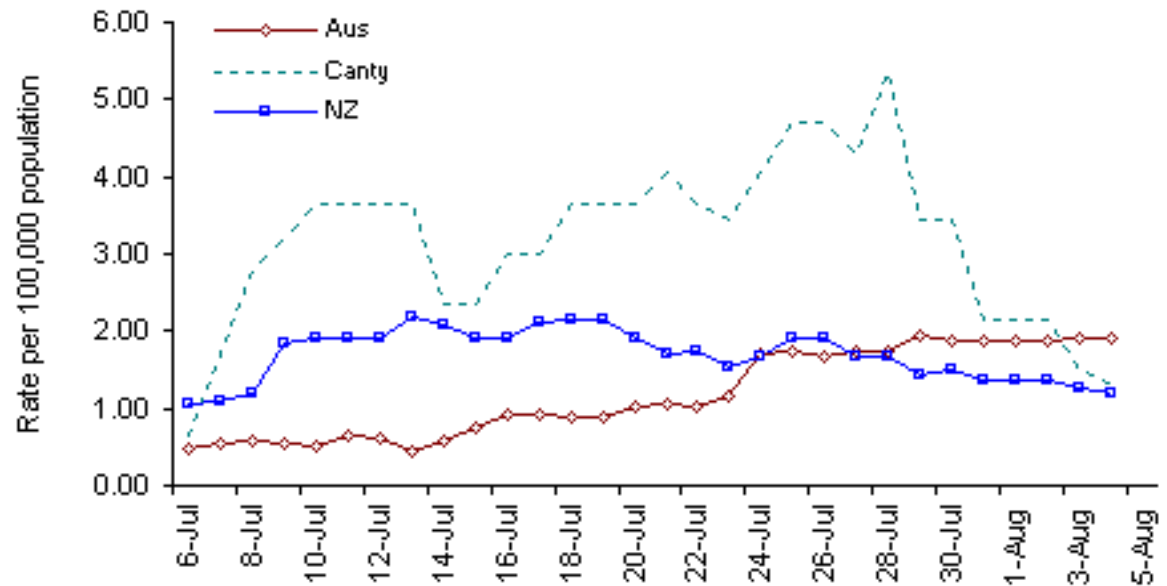
951 hospitalized

233 pneumonia

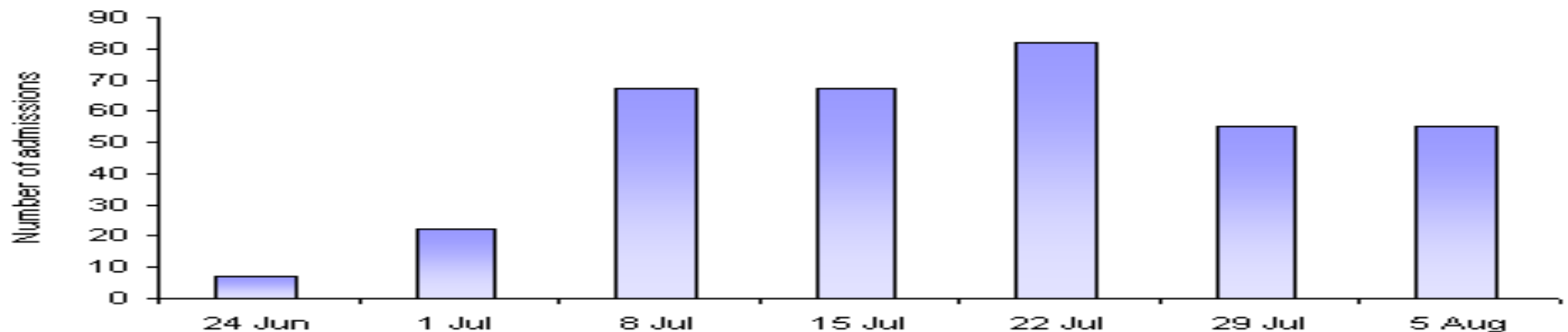
38 ARDS

15 deaths

Daily Rates Of Hospital Patients With Pandemic (H1N1) 09
In Australia And New Zealand

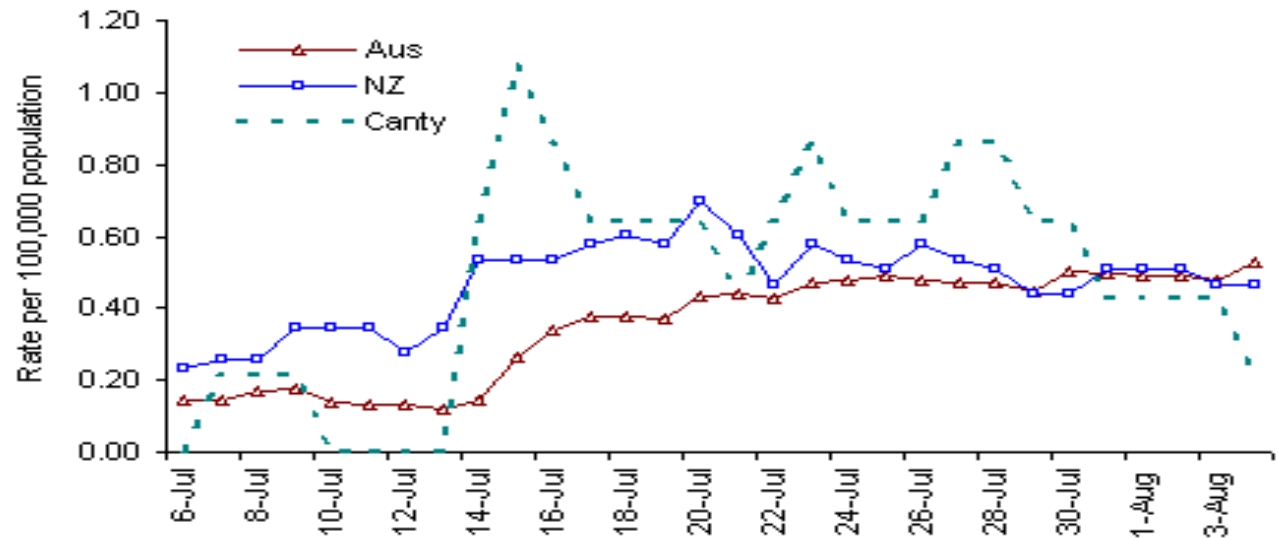


Christchurch Hospital Admissions For Patients
With Influenza-like Illness (From 17 June 2009)

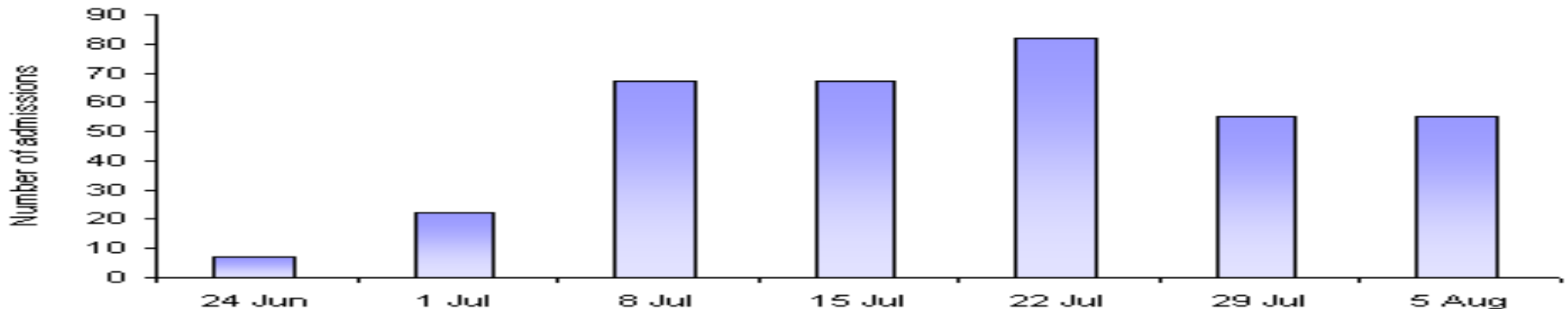


ICU Admissions

**Daily Rates Of ICU Patients With Pandemic (H1N1) 09
In Australia And New Zealand**

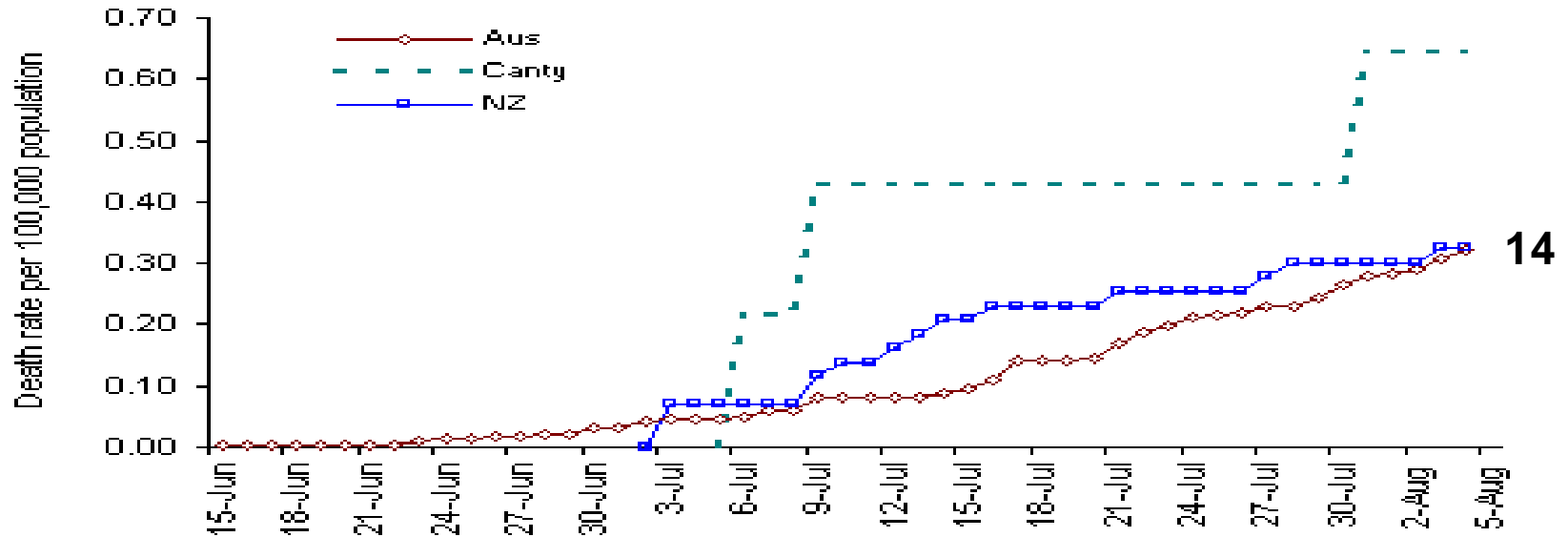


**Christchurch Hospital Admissions For Patients
With Influenza-like Illness (From 17 June 2009)**

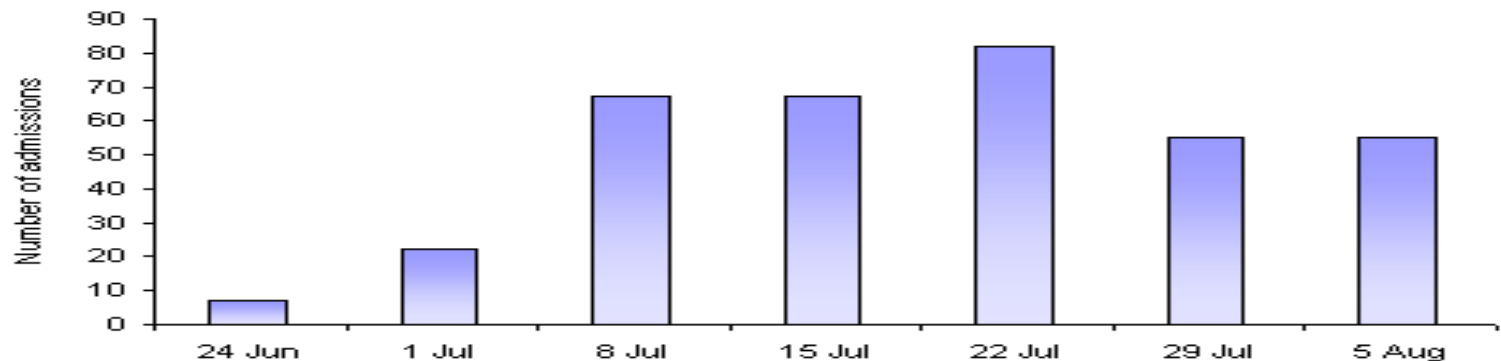


Deaths

**Cumulative Death Rates Due To Pandemic H1N1 09
In Australia And New Zealand**



**Christchurch Hospital Admissions For Patients
With Influenza-like Illness (From 17 June 2009)**



Summary

- Pandemic preparedness framework in place
 - ? Planning fatigue
- Containment in NZ successful (or good luck?)
 - Contained for ~6 weeks
- Movement from containment to management phase
 - Community spread ~ 12th June
 - Political decision
 - Highlights need for flexibility in preparedness plans
- Extended containment phase allowed planning & communication of key messages to public.
 - Stay at home
 - If concerned phone GP or 0800 Healthline
- Major outcome was flattening of epidemic curve
 - Influenza Centres protected General Practices (green & red Streams)
 - Emergency Departments/hospitals not overwhelmed
- ICU's however overburdened