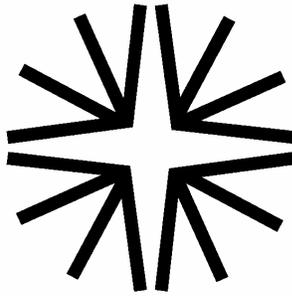


NATO
Euro-Atlantic Disaster Response
Coordination Centre
(EADRCC)
Fax : +32-2-707.2677
eadrcc@hq.nato.int



OTAN
Centre Euro-Atlantique de
coordination des réactions
en cas de catastrophe
(EADRCC)
Télécopie : +32-2-707.2677
eadrcc@hq.nato.int

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INFLUENZA A(H1N1)
EADRCC REPORT No. 4

Message N^o. : OPS(EADRCC)(2009)0036
Dtg : 6 May 2009, 10:00 UTC
From: : Euro-Atlantic Disaster Response Coordination Centre
To : Points of Contact for International Disaster Response in NATO and
Partner Countries
Precedence : Priority
Originator : Duty Officer Tel: +32-2-707.2670
Approved by : Head EADRCC Tel: +32-2-707.2673
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This report consists of : -3- pages

1. In accordance with the procedures at reference, EADRCC has invited nations to share information on national measures taken to prepare for the possibility of an A(H1N1) influenza pandemic.

2. General Situation

2.1. The World Health Organization (WHO) is coordinating the global response to human cases of influenza A(H1N1) and monitoring the corresponding threat of an influenza pandemic. As of 16:00 GMT, 5 May 2009, 21 countries have officially reported 1490 cases of influenza A (H1N1) infection. Further and updated information is available on the WHO webpage at www.who.int.

2.2. Mexico has reported 822 laboratory confirmed human cases of infection, including 29 deaths. The United States has reported 403 laboratory confirmed human cases, including one death.

2.3. The following countries have reported laboratory confirmed cases with no deaths - Austria (1), Canada (140), China, Hong Kong Special Administrative Region (1), Colombia (1), Costa Rica (1), Denmark (1), El Salvador (2), France (4), Germany (9), Ireland (1), Israel (4), Italy (5), Netherlands (1), New Zealand (6), Portugal (1), Republic of Korea (2), Spain (57), Switzerland (1) and the United Kingdom (27).

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3. Summary of measures taken by nation

3.1. Albania. The situation in all country territory is being controlled and monitored from the structures of the Ministry of Health, Ministry of Food and Agriculture, Ministry of Interior, lines ministries and local ones. So far, no suspected cases have been verified in the districts. In Albania there are no travel restrictions. The Minister of Health has promulgated orders, which have established the Pandemic Experts Commission, and the application of the International Sanitary Regulation. This Commission is adapting the measures of the Pandemic Contingency Plan. An amount of pandemic vaccines is available at national stores. The Ministry of Health is taking steps to increase the quantity of medicaments as Tamiflu or Zanamivir.

3.2. In Belgium no cases have been reported until May 5th. Belgium advises to avoid unnecessary travel to Mexico, and to take into account necessary hygiene measures and to follow instructions of local authorities for travellers to Mexico and US. Belgium is upgrading laboratory capacities to tackle the new influenza strain; the existing surveillance network for the detection of seasonal influenza is continuing his activities. Belgium has a distribution plans for antiviral and masks. They have at the stockpile 500.000 doses of Tamiflu, 2.500.000 doses of Bulk API (Oseltamivir phosphate) and 285.000 doses of Relenza.

3.3. In Bulgaria there are no reported cases of influenza A(H1N1) infected patients. In the central warehouse for bio-products of the Ministry of Health is 440 doses anti-viral vaccines for 2008/2009, 82 000 doses of Tamiflu and 160 000 doses of Remantadin. The National Laboratory of Flu and Acute Respiratory Infections to the National Centre for Infectious and Parasitic Diseases is equipped with the necessary equipment, qualified personnel and sufficient quantities of diagnostics and consumables for the diagnosis of human flu viruses. The Ministry of Health has a reserve of available personal protective equipment and it has a Specialized Hospital of Infectious Diseases with the necessary transportation means to provide emergency care and to transport any infected patients.

3.4. Luxembourg. Until May 4th 2009, no suspect or confirmed cases of the New Influenza A(H1N1) have been reported in Luxembourg. The National Crisis Cell is monitoring the situation in cooperation with the Ministry of Health, with other competent ministries and agencies. On May 30th, the decision was taken to implement appropriate prevention preparedness measures of the National Flu Pandemic Plan against outbreak in accordance with the decision of World Health Organization (WHO) to raise the pandemic phase warning alert to 5. The national stocks of Tamiflu are sufficient; those of protective masks will be increased. Public awareness campaign is ongoing. Information is provided by the governmental website www.grippe.public.lu. At Luxembourg airport, the level of sanitary control measures has been raised. Posters and flyers with recommendations and information for the passengers were issued.

3.5. Moldova. No cases have been reported until April 5. The Republican Extraordinary Anti-epidemic Commission's special Decision has been approved and in that has been a requested specific action from the Ministry of Health, the Ministry of Agriculture and Food



Industry, Local Public Authorities, the Ministry of Culture and Tourism and the mass media.

3.6. Norway. The Norwegian authorities have monitored the influenza A(H1N1) continuously since it first became an infection causing international concern. Based on the large amount of information being dispersed, Norway is concentrating on collating information originating from WHO and its direct contact with the Royal Norwegian Embassy of Mexico. National precautions have been made and preparatory efforts have been instigated to improve national contingency both with regard to increasing stockpiles of relevant drugs to address the influenza itself (e.g. Tamiflu) as also the potential to address superimposed or secondary infections. Norwegian stockpiles of Tamiflu were originally significant covering a third of the population. In this context instructions have been issued to restrict the prescription of especially Tamiflu to those who really should receive it. Surveillance of reported febrile episodes has been intensified and the seasonal surveillance of influenza has been prolonged for at least the coming summer season. However, up till now, all reported suspicious cases, including travellers from Mexico, have proven not be influenza A(H1N1), but rather common seasonal influenza.

3.7. In Spain last official update for laboratory confirmed cases is 57. The Minister of Health has been designated as responsible for the management of this specific formal mechanism, and is also responsible to keep the population informed about all proceedings that are taking place. The Biological Alert Network of Laboratories (RE-LAB) has been activated. The "Instituto de Salud Carlos III", a reference centre for communicable diseases, maintains a complete floor available to accommodate any affected by the influenza A(H1N1), and is preparing another floor that, should it be necessary, could be operational immediately. The centre could accommodate up to a hundred patients. In the entry airports passengers arriving from Mexico are controlled by medical personnel. Spain has a reserve of 10 million doses of antiviral drugs.

4. Information sharing

4.1. NATO Allies and Partner nations are invited to provide updated information to the EADRCC on national measures taken to prepare for the possibility of an A(H1N1) influenza pandemic.

4.2. The EADRCC reports will be distributed by fax and e-mail and posted on the password protected CEP website.

5. The Euro-Atlantic Disaster Response Coordination Centre can be reached in the following ways:

Telephone:	+32-2-707.2670
Fax :	+32-2-707.2677
Mobile Phone:	+32-475-829.071
e-mail:	Eadrcc@hq.nato.int
Internet	http://www.nato.int/eadrcc/home.htm