



U.S. Could Face Half a Million Deaths and Nearly 67 Million Cases if Pandemic Flu Emerges, Stockpile of Antivirals Insufficient

Media contacts: Laura Segal (202) 223-9870 x 278 or lsegal@tfah.org or Michael Earls (202) 223-9870 x 273 or mearls@tfah.org

WASHINGTON, June 24, 2005 – Trust for America’s Health (TFAH) today released state-by-state projections that found over half a million Americans could die and over 2.3 million could be hospitalized if a moderately severe strain of a pandemic flu virus hits the U.S. Additionally, based on the model estimates, 66.9 million Americans are at risk of contracting the disease.

The study also found that the U.S. currently only has stockpiled 2.3 million courses and has placed orders for an additional three million courses of antiviral pharmaceuticals (produced as Tamiflu by Roche Pharmaceuticals), which would likely be available in 2006. This would be enough to cover 5.3 million Americans, leaving over 60 million who could be infected and would not be able to receive medication before an effective vaccine to combat the flu strain is identified and produced.

TFAH’s numerical projections are included in a new report, “A Killer Flu? ‘Inevitable’ Epidemic Could Kill Millions.”

“This is not a drill. This is not a planning exercise. This is for real,” said Shelley A. Hearne, DrPH, Executive Director of TFAH. “Americans are being placed needlessly at risk. The U.S. must take fast and furious action to prepare for a possible pandemic outbreak here at home.”

“The Government Reform Committee has held several hearings over the last few years to let people know that the flu is not something to take lightly,” said U.S. Congressman Tom Davis (R-VA), Chairman of the House Government Reform Committee. “TFAH's report clearly demonstrates that the emergence of a pandemic flu could exact a tremendous toll on U.S. health and economic stability. In order to identify problem areas and prioritize planning and response efforts, the Committee will hold a hearing next week on the threats posed by a potential flu pandemic.”

Dr. Hearne will be testifying Thursday, June 30th, before the House Government Reform Committee on U.S. preparedness for pandemic and annual flu. Some of the TFAH report’s other findings include:

- While estimates find that over two million Americans may need to be hospitalized during a pandemic outbreak, the U.S. currently only has approximately 965,256 staffed hospital beds.
- The U.S. has not adequately planned for the disruption a flu pandemic could cause to the economy, daily life, food and supply distributions, or homeland security.
- The U.S. lags in pandemic preparations compared to Great Britain and Canada based on an examination of leadership, vaccine development, vaccine and antiviral planning, health care system surge capacity planning, coordination between public and private sectors, and emergency communications planning.

TFAH provides a series of detailed recommendations to help ensure the U.S. is better prepared regardless of whether a pandemic occurs as soon as this year or in several years. With a crisis looming, the U.S.

plan for the pandemic should be finalized and the President should designate an official with authority to coordinate the U.S. response across federal agencies. Other top level recommendations include taking:

- Immediate steps of outbreak tracking, stockpiling medical supplies, and developing emergency communications plans;
- Intermediate steps of stockpiling additional antivirals and developing surge capacity plans for hospitals and health care providers; and
- Longer range steps to increase vaccine production and the development of new technologies for vaccines.

As the highest populated state, California could be impacted the hardest, with over 60,875 deaths, 273,090 hospitalized, and over eight million infected people. With 5.3 million courses of antivirals evenly distributed among states, California could face a shortfall of over 7.4 million people infected who could not receive the medication. As the least populated state, Alaska could have 866 deaths, 4,558 hospitalized, 152,328 cases, and an antiviral shortfall of 140,263.

Potential Pandemic Influenza Deaths and Hospitalizations from a Mid-Level Pandemic Flu*

State	Projected Dead	Projected Hospitalized	Number of Cases	Number of Cases Without Tamiflu
Alabama	8,886	38,591	1,079,789	994,263
Alaska	886	4,558	152,328	140,263
Arizona	9,223	39,675	1,138,742	1,048,547
Arkansas	5,350	22,660	630,705	580,749
California	60,875	273,090	8,067,075	7,428,119
Colorado	7,192	32,978	973,161	896,081
Connecticut	7,054	29,932	817,465	752,717
Delaware	1,507	6,560	182,895	168,409
District of Columbia	1,155	4,974	132,241	121,767
Florida	35,737	142,386	3,663,486	3,373,318
Georgia	13,655	62,912	1,871,561	1,723,323
Hawaii	2,446	10,571	296,651	273,154
Idaho	2,279	10,157	302,558	278,594
Illinois	23,720	103,738	2,973,962	2,738,408
Indiana	11,817	51,711	1,466,027	1,349,910
Iowa	6,233	26,090	713,106	656,624
Kansas	5,373	22,946	654,335	602,508
Kentucky	7,930	34,748	977,031	899,645
Louisiana	8,334	37,148	1,087,942	1,001,771
Maine	2,651	11,333	310,513	285,918
Maryland	9,958	44,500	1,273,572	1,172,698
Massachusetts	13,136	56,038	1,529,313	1,408,183
Michigan	19,622	86,005	2,443,473	2,249,937
Minnesota	9,304	40,786	1,171,387	1,078,607
Mississippi	5,362	23,531	682,625	628,558
Missouri	11,274	48,240	1,350,515	1,243,546
Montana	1,804	7,787	219,703	202,301
Nebraska	3,441	14,697	414,218	381,409
Nevada	3,243	14,455	419,202	385,999
New Hampshire	2,333	10,301	293,177	269,956
New Jersey	16,980	72,791	2,013,212	1,853,755
New Mexico	3,244	14,504	432,438	398,186
New York	37,701	162,490	4,534,307	4,175,165
North Carolina	14,987	65,637	1,856,296	1,709,267
North Dakota	1,371	5,795	160,221	147,530
Ohio	23,197	99,979	2,796,583	2,575,078
Oklahoma	6,833	29,376	829,273	763,590
Oregon	6,724	29,047	810,872	746,646
Pennsylvania	27,185	112,658	3,004,915	2,766,910
Rhode Island	2,234	9,263	246,857	227,305
South Carolina	7,474	32,983	940,045	865,589
South Dakota	1,559	6,599	184,493	169,880
Tennessee	10,875	47,678	1,342,050	1,235,752
Texas	35,124	160,648	4,859,834	4,474,909
Utah	3,393	15,906	514,787	474,013
Vermont	1,185	5,213	147,245	135,582
Virginia	13,104	58,872	1,683,499	1,550,157
Washington	10,910	48,610	1,402,591	1,291,498
West Virginia	4,049	17,014	453,947	417,992
Wisconsin	10,620	45,842	1,292,419	1,190,053
Wyoming	915	4,086	119,936	110,436
U.S. Totals	541,433	2,358,089	66,914,573	61,614,573

** Projections are based on CDC's FluAid 2.0 program. The estimated deaths are for a pandemic strain three times more lethal than the 1968 pandemic, on which the default FluAid numbers are based. The hospitalization rate is three times the default 1968 rate. The "Dead" and "Hospitalized" numbers represent the "most likely" FluAid projection at a 25% rate of contraction. The "Number of Cases" is the projected number of residents contracting the flu, based on a 25% rate of contraction. State population numbers are from FluAid, using U.S. Census data gathered in 1999. Updated population data were not used to ensure consistency with estimated "Dead" and "Hospitalized" numbers. "Number of Cases Without Tamiflu" is based on state-by-state proportional distribution of the 5.3 million courses of Tamiflu ordered or currently in U.S. federal government possession. For example, California, with approximately 12% of the U.S. population, receives 12% of the Tamiflu in the above projection.*

TFAH's analysis, based on the estimates of the severity of the current strain circulating in Asia, follows warnings issued by the Centers for Disease Control and Prevention (CDC) and the World Health Organization (WHO) about the severity of the pandemic, "killer flu" threat. The projections are based on a modeling program developed by the CDC using WHO estimates that approximately 25 percent of countries' populations could become infected and descriptions of the severity of the strain as likely to be in the range between the levels of the extremely severe 1918 influenza pandemic and the relatively mild 1968 pandemic. Some scientists believe the current avian flu strain is on the more severe side of the possible range. The more mild and more severe estimates are also included in the appendix of TFAH's report. TFAH's calculations and related flu materials are available online at: www.healthyamericans.org

Trust for America's Health is a non-profit, non-partisan organization dedicated to saving lives by protecting the health of every community and working to make disease prevention a national priority.