

Working Group on Pandemic Influenza Preparedness

March 20, 2008

The Honorable Tom Harkin
Chairman
Subcommittee on Labor, Health &
Human Services, Education &
Related Agencies Appropriations
Room 131 HSOB
United States Senate
Washington, DC 20510

The Honorable David Obey
Chairman
Subcommittee on Labor, Health &
Human Services, Education &
Related Agencies Appropriations
Room 2358 RHOB
U. S. House of Representatives
Washington, DC 20515

The Honorable Arlen Specter
Ranking Member
Subcommittee on Labor, Health &
Human Services, Education &
Related Agencies Appropriations
Room 156 DSOB
United States Senate
Washington, DC 20510

The Honorable James Walsh
Ranking Member
Subcommittee on Labor, Health &
Human Services, Education &
Related Agencies Appropriations
Room 1016 LHOB
U.S. House of Representatives
Washington, DC 20515

Dear Chairman Harkin, Chairman Obey, Ranking Member Specter and Ranking Member Walsh:

On behalf of the Working Group on Pandemic Flu Preparedness, we urge you to support the Department of Health and Human Services' funding request for pandemic influenza preparedness.

The United States must remain vigilant in its efforts to prepare for the likelihood of a pandemic influenza outbreak. Dr. Margaret Chan, Director-General of the World Health Organization, recently stated that, "We must not let down our guard. The whole world has lived under the imminent threat of an influenza pandemic for more than three years. These years of experience have taught us just how tenacious this H5N1 virus is in birds. Countries have made heroic efforts, yet the virus stays put or comes back, again and again. Almost no country with large outbreaks in commercial or backyard flocks has successfully eliminated this virus from its territory. As long as the virus continues to circulate in birds, the threat of a pandemic will persist."

As recently as March 8th, a new human case of the H5NI avian influenza virus was discovered. An 8-year-old Egyptian boy was hospitalized, bringing to four the number of human cases over a two week period. The H5N1 virus, which is endemic in birds and poultry in much of Asia, has spread to Europe and Africa, resulting in the culling of hundreds of millions of birds. It has caused over 230 deaths in humans, with a human case fatality rate of approximately 63 percent. If a moderate or severe pandemic were to spark, the result could be up to 10 million hospitalizations and an estimated 200,000 to 2 million deaths in the U.S.

Therefore, the Working Group respectfully requests your support for the following appropriations included in the President's budget proposal:

- \$312 million for annual, recurring pandemic preparedness activities at the Centers for Disease Control and Prevention (CDC), the Food and Drug Administration (FDA), the National Institutes of Health (NIH), and the Office of the Secretary (OS). These funds, all included in the President's budget proposal, will be used to develop better tests to detect the influenza virus; develop and maintain surveillance; conduct research into the development of new vaccines, therapeutics and diagnostics; and enhance our risk communications.
- \$507 million for the next phase of pandemic preparedness, which includes \$425 million to build vaccine production capacity; \$42 million for the production of egg-based vaccines; and \$40 million for the purchase of medical countermeasures for critical Department of Health and Human Services (HHS) staff and contractors and the Indian Health Service patient population.

The Working Group also supports the following additional appropriations:

- \$350 million for state and local pandemic preparedness activities. In April, HHS will release the final \$24 million of the \$600 million appropriated in FY 2006 for state and local pandemic preparedness activities. As of August 2008, all federal funding for state and local pandemic influenza preparedness activities will have been distributed. This funding has been used to conduct statewide pandemic influenza preparedness summits, assess and address preparedness gaps, develop antiviral distribution plans, review and update State pandemic plans, and conduct exercises at the state and local levels, including mass vaccination using seasonal flu clinics, school closures and medical surge. However, a reliable, annual funding source is needed for ongoing state and local pandemic preparedness activities, including regular exercising of the plans that have been developed, and increased attention to development of surge capacity and related policies. A failure to continue funding for state and local pandemic preparedness will place at risk the progress made through the initial investment.
- \$870 million for one-time funding for vaccine and antiviral purchases, and for the development of rapid diagnostics. In FY 2008, the President requested these funds, which while included in large part in the vetoed FY 2008 Labor/HHS funding measures, were not incorporated into the final FY 2008 omnibus appropriations bill. We urge Congress to provide this funding to help complete the current commitment to treatment options. The \$507 million in the President's FY 2009 request builds on this \$870 million allocation. Failure to provide the \$870 million could well delay completion of the research and development projects already started with earlier no-year funding.
- \$10 million for the National Institute for Occupational Safety and Health (NIOSH) to conduct research on modes of transmission of influenza and to develop the next generation of effective user-friendly personal protective equipment. NIOSH is the premier federal entity responsible for conducting research and making recommendations for the prevention of

work-related illness and injury. According to a 2008 report issued by the National Academies of Sciences' Institute of Medicine, *Preparing for an Influenza Pandemic: Personal Protective Equipment for Healthcare Workers*, (http://www.nap.edu/catalog.php?record_id=11980) there is a critical need to better understand the transmissibility of pandemic influenza and to develop protective technology to prevent healthcare workers from unique risks of workplace exposure and to prevent the progression of a pandemic. The President's proposed FY 2009 cuts to NIOSH research activities are insufficient to support vitally important NIOSH research which would not only protect frontline healthcare worker but also the public.

We have been fortunate that the H5N1 virus has not yet taken a form that is easily transmitted between humans. But again, the threat remains unabated. We appreciate the commitment from Congress and the Administration to making an investment in our country's preparedness. We cannot waiver in this commitment if we are to fulfill our responsibilities to the public to do our utmost to prepare for a potential pandemic.

Thank you for your careful consideration of this request. The Working Group on Pandemic Influenza Preparedness represents a broad-based coalition of organizations that believe that pandemic influenza poses a major threat to the nation's public health, security, and economy, and that the U.S. government's preparedness efforts should be commensurate with the threat. The Working Group appreciates your combined leadership and looks forward to continuing to work with you to better protect our nation from this potentially deadly virus.

Sincerely,

Please direct all inquires or comments to Jeff Levi (jlevi@tfah.org), Kim Elliott (kelliott@tfah.org), or Rich Hamburg (rhamburg@tfah.org). All can be reached by phone at 202-223-9870. Trust for America's Health is committed to sharing information with all members of the Working Group on Pandemic Preparedness or directing specific inquiries to participating organizations.

Allergy & Asthma Network Mothers of Asthmatics
American Academy of Pediatrics
American College of Occupational and Environmental Medicine
American Federation of Government Employees
American Federation of State, County and Municipal Employees
American Federation of Teachers
American Lung Association
American Osteopathic Association
American Public Health Association
American Red Cross
Association of Public Health Laboratories
Association of State and Territorial Health Officials
Asthma and Allergy Foundation of America
California Nurses Association/ National Nurses Organizing Committee

Campaign for Public Health
Center for Biosecurity, University of Pittsburgh Medical Center
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