

# PHASES 5-6 PANDEMIC

## C. PHASES 5-6

During Phases 5-6 (*pandemic*), actions shift from preparedness to response at a global level. The goal of recommended actions during these phases is to reduce the impact of the pandemic on society.

26. Resolution WHA 56.19 Prevention and control of influenza pandemics and annual epidemics. In: Fifty-sixth World Health Assembly, Geneva, 19-28 May, 2003.  
27. Resolution WHA 56.19 Prevention and control of influenza pandemics and annual epidemics. In: Fifty-sixth World Health Assembly, Geneva, 19-28 May, 2003.  
28. Resolution WHA 56.19 Prevention and control of influenza pandemics and annual epidemics. In: Fifty-sixth World Health Assembly, Geneva, 19-28 May, 2003.  
29. Ethical considerations in developing a public health response to pandemic influenza (WHO/CDS/EPR/GIP/2007.2), World Health Organization, 2007.

### PHASES 5-6 PLANNING AND COORDINATION

#### WHO ACTIONS

- Encourage international assistance to resource-poor countries and/or seriously affected countries.
- Interact with international organizations and agencies inside and outside of the health sector to coordinate interventions.

#### NATIONAL ACTIONS

##### AFFECTED COUNTRIES

- Maintain trust across all agencies and organizations and with the public through a commitment to transparency and credible actions.
- Designate special status as needed, such as declaring a state of emergency.
- Provide leadership and coordination to multisectoral resources to mitigate the societal and economic impact of a pandemic.
- Work for rational, ethical, and transparent access to resources.
- Assess if external assistance is required to meet humanitarian needs.

##### COUNTRIES NOT YET AFFECTED

- Finalize preparations for an imminent pandemic, including activation of crisis committee(s) and national command and control systems.
- Update, if necessary, national guidance and recommendations taking into account information from affected countries.

# 5-6 PANDEMIC

## WIDESPREAD HUMAN INFECTION

### PHASES 5-6 SITUATION MONITORING AND ASSESSMENT

#### WHO ACTIONS

- Coordinate the assessment and monitoring of the disease characteristics and severity, and provide guidance accordingly.
- Monitor the global spread of disease and possible changes in epidemiological, clinical, and virological aspects of infection, including antiviral drug resistance.
- Support affected Member States as much as possible in confirming the spread of human infections and assessing the epidemiological situation.

#### NATIONAL ACTIONS

##### AFFECTED COUNTRIES

##### Pandemic disease surveillance<sup>58</sup>

- Undertake a comprehensive assessment of the earliest cases of pandemic influenza.
- Document the evolving pandemic including geographical spread, trends, and impact.
- Document any changes in epidemiological and clinical features of the pandemic virus.
- Maintain adequate virological surveillance to detect antigenic and genetic changes, as well as changes in antiviral susceptibility and pathogenicity.
- Modify national case definitions and update clinical and laboratory algorithms for diagnosis, as necessary.

##### Monitoring and assessment of the impact of the pandemic

- Monitor essential health-related resources such as: medical supplies; antivirals, vaccines and other pharmaceuticals; health care worker availability, hospital occupancy/availability; use of alternative health facilities, laboratory material stocks; and mortuary capacity.
- Monitor and assess national impact using criteria such as workplace and school absenteeism, regions affected, groups most affected, and essential worker availability.
- Assess the uptake and impact of implemented mitigation measures.
- Forecast economic impact of the pandemic, if possible.

58. Global surveillance during an influenza pandemic, World Health Organization 2009 (to be published 2009 to <http://www.who.int/csr/disease/influenza/>).

59. Assuming a PHEIC has been determined to be occurring as defined by IHR (2005)

60. Especially if non-pandemic strains are still circulating.

61. If medical masks are available and the training on their correct use is feasible, they may be considered for symptomatic persons and susceptible caregivers in household settings when close contact can not be avoided.

62. Infection prevention and control of epidemic- and pandemic-prone acute respiratory diseases in health care, WHO Interim Guidelines. Geneva, World Health Organization 2007. (WHO/CDS/EPR/2007.6)

63. Symptomatic people should self-isolate and avoid using public transport. There is, however, insufficient evidence to date to either support or oppose the closure or restriction of mass transport systems as a measure to reduce disease transmission in the community.

64. If a country decides to cancel, restrict or modify all or certain mass gatherings, this decision should be based on the nature of the gathering and on local disease levels, and should only be implemented once the disease is present in the community.

65. If exit screening is implemented, it should be considered as a time-limited intervention and the isolation and treatment of cases and quarantine of contacts resulting from screening must be carried out in accordance with IHR (2005).

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## PHASES 5-6 REDUCING THE SPREAD OF DISEASE

### WHO ACTIONS

- Consider and issue any new or revised Temporary Recommendations under IHR (2005), including advice from Emergency Committee as appropriate.<sup>59</sup>
- Facilitate assessment of interventions and update recommendations if needed.
- Facilitate assessment of antiviral susceptibility, effectiveness, and safety.
- Make recommendations for pandemic vaccine composition<sup>60</sup> and switch to pandemic vaccine production if not previously done.
- Facilitate development of national guidelines for national authorities to conduct targeted vaccination campaigns if pandemic vaccine is available.

### NATIONAL ACTIONS

#### ALL COUNTRIES

##### International travel measures

- Take into account WHO guidance and information when issuing international travel advisories and health alerts.

#### AFFECTED COUNTRIES

##### Individual/household level measures

- Advise people with acute respiratory illness to stay at home and to minimize their contact with household members and others.
- Advise household contacts to minimize their level of interaction outside the home and to isolate themselves at the first sign of any symptoms of influenza.
- Provide infection control guidance for household caregivers<sup>61</sup> taking into account the WHO Guidance.<sup>62</sup>

##### Societal level measures

- Implement social distancing measures as indicated in national plans, such as class suspensions and adjusting working patterns.
- Encourage reduction in travel and crowding of the mass transport system.<sup>63</sup>
- Assess and determine if cancellation, restriction, or modification of mass gatherings is indicated.<sup>64</sup>

##### International travel measures

- Consider implementing exit screening as part of the early global response (i.e. first few affected countries).<sup>65</sup>
- Provide advice to travellers.

##### Pharmaceutical measures

- Distribute antivirals, and other medical supplies in accordance with national plans.
- Implement vaccine procurement plans.
- Plan for vaccine distribution and accelerate preparations for mass vaccination campaigns.
- Modify/adapt antiviral and vaccine strategies based on monitoring and surveillance information.
- Implement medical prophylaxis campaigns for antivirals and/or vaccines according to priority status and availability in accordance with national plans.
- Monitor safety and efficacy of pharmaceutical interventions to the extent possible and monitor supply.

#### COUNTRIES NOT YET AFFECTED

- Be prepared to implement planned interventions to reduce the spread of pandemic disease.
- Update recommendations on the use of planned interventions based on experience and information from affected countries.
- Implement distribution and deployment plans for pharmaceuticals, and other resources as required.
- Consider implementing entry screening at international borders.<sup>66</sup>

WHO recognizes individual country considerations will affect national decisions, but, in general, does not encourage:

- Pandemic-related international border closures for people and/or cargo.
- General disinfection of the environment during a pandemic.
- The use of masks in the community by well persons.
- The restriction of travel within national borders during a pandemic, with the exception of a globally led rapid response and containment operation, or in rare instances where clear geographical and other barriers exist.

# 5-6 PANDEMIC

## WIDESPREAD HUMAN INFECTION

### PHASES 5-6 CONTINUITY OF HEALTH CARE AND PROVISION

#### WHO ACTIONS

- Coordinate response with other international organizations.
- Provide guidance to national authorities in assisting clinicians in recognition, diagnosis, and reporting of cases and other critical issues as needed.

#### NATIONAL ACTIONS

- Implement pandemic contingency plans for full mobilization of health systems, facilities, and workers at national and sub-national levels.
- Implement and adjust the triage system as necessary.
- Enhance infection control practices in healthcare and laboratory settings and distribute personal protective equipment in accordance with national plans.
- Provide medical and non-medical support for patients and their contacts in households and alternative facilities if needed.
- Provide social and psychological support for health care workers, patients, and communities.
- Implement corpse management procedures as necessary.

#### FOR COUNTRIES NOT YET AFFECTED

- Prepare to switch to pandemic working arrangements.

### PHASES 5-6 COMMUNICATIONS

#### WHO ACTIONS

- Update national authorities, other partners and stakeholders, and the public on global situation, trends, epidemiological characteristics, and recommended measures.
- Continue to work with partners to promote consistent messages.

#### NATIONAL ACTIONS

- Regularly update the public on what is known and unknown about the pandemic disease, including transmission patterns, clinical severity, treatment, and prophylaxis options.
- Provide regular communications to address societal concerns, such as the disruption to travel, border closures, schools, or the economy or society in general.
- Regularly update the public on sources of emergency medical care, resources for dealing with urgent non-pandemic health care needs, and resources for self-care of medical conditions.