



CT Department of
Emergency Management
and Homeland Security



M. Jodi Rell, Governor



CT Department of
Public Health

STATE OF CONNECTICUT

H1N1 Situation Report

Report Period: October 16, 2009 to October 22, 2009

The Connecticut Departments of Public Health (DPH) and Emergency Management and Homeland Security (DEMHS) are working together to provide a weekly CT Situation Report on what the State of Connecticut is doing in preparation and response to a H1N1 influenza pandemic. This report provides a brief overview of the H1N1 situation in CT, as well as on the national and international levels.

NOTE: According to the U.S. Centers for Disease Control and Prevention (CDC) the start of the 2009-10 influenza season began Sunday August 30, 2009. All statistics provided will be based on this calendar.

CURRENT SITUATION SUMMARY:

I. Connecticut Situation Summary

• Department of Public Health (DPH)

- * Vaccine information:
 - Approximately 127,600 doses of the H1N1 are en route to, or have arrived in, Connecticut.
 - These doses are a combination of live attenuated intranasal sprays, multi-dose vials, and pre-filled syringes.
 - A small number of preservative-free vaccine has been shipped to ob/gyns across the state for administration to pregnant patients.
- * A total of 54 laboratory confirmed test reports of the 2009 influenza A (H1N1) virus have been received for the 2009-10 flu season reporting period. Of these cases:
 - 45.45% are female, 54.55% are male
 - Ages range from under 12 months to 70 years
 - Median age is 20 years
 - 9 patients have been hospitalized for pandemic (H1N1) related illness
 - No H1N1 related fatalities have yet been reported in Connecticut
 - All eight of Connecticut's counties have lab-confirmed cases of H1N1
- * DPH training is in progress in the 5 DEMHS regions on:
 - Pediatric vaccination refresher for nurses and other licensed providers
 - N95 respirator fit testing open to state and local health and safety agencies
- * Albert Geetter, MD; Lynn Sosa, MD and Matthew Cartter, MD of DPH will be leading a statewide call on H1N1 for infectious disease doctors on Thursday, October 22, 2009.
- * **Local Health Update:**
- * Local Health Branch Chief met Oct 21st with all Connecticut Association of Directors of Health (CADH) membership at their monthly meeting.
- * On Oct 21st the Local Health Branch held its weekly conference calls for Local Health Directors on H1N1 Oct 21 and a conference call with local emergency response coordinators.

- * EMS services in the state have noticed a slight increase in the number of patients reporting influenza like symptoms.
- **Department of Emergency Management and Homeland Security (DEMHS)**
 - * Current DEMHS activation level — monitoring (information review and sharing, and outreach mode). H1N1 incident information has been posted for state and local public safety officials on Web EOC.
 - * DEMHS is taking preparatory actions for H1N1 in coordination with the Governor's Office, DPH, DAS and other agencies, including weekly H1N1 situational meetings with DPH, DAS, DOIT, SDE, and the Governor's Office to address policy issues related to H1N1.
 - * DEMHS conducted State EOC Liaison Training on October 21, 2009 at the State Armory to designated state agency liaisons that normally report to the EOC in the State Armory during activations. Training was on State EOC familiarization and WEB EOC.
- **Other State Agencies**
 - * Last Friday, Oct 19th State agencies participated in a conference call entitled “H1N1 for State of Connecticut Agencies and Commissions.” Below are a few highlights from that call:
 - Most state agencies have accomplished 3 important milestones in the effort to maintain the services they can’t stop doing during a time of extraordinary absenteeism due to employee’s being ill or caring for someone who is ill:
 - They have a Continuity of Operations Plan (COOP).
 - They have an Incident Management Team formed around Continuity of Operations.
 - They have a virtual or real emergency command center for purposes of Continuity of Operations.
 - CT has formed a Pandemic Flu A H1N1 operations team with a handful of agencies that include Public Health, Emergency Management and Homeland Security and DAS. This team will work with the Governor’s office to guide and respond to state agencies during a pandemic event. The H1N1 Operations Team will be responsible for communicating recommendations and directions to state agencies such as a) when we believe it is time to stop mass meetings and gatherings of employees; b) when it is time to restrict or alter access the public has to certain spaces; c) when or if employees should wear personal protective equipment.
 - * A Legislative Forum on H1N1 will take place on Wed., November 18, 2009 from 9:30 AM – 11:30 AM in room 2D at the Legislative Office Building
- **Public Information**
 - * Total number of calls into the DPH Hotline since inception: 1,948. For the week of October 11 – Oct. 17, 2-1-1 responded to 45 callers: 32 had questions about the H1N1 vaccine, 10 wanted general information on the H1N1 virus, and 3 callers had influenza like symptoms. For the same timeframe, the 2-1-1 pre-recorded messages were accessed 61 times. The most prevalent inquiry on both 2-1-1 and the DPH Hotline is about finding a site to receive the H1N1 vaccine
 - * Current public messaging remains the same. More vaccine is on the way, check website on a regular basis (www.ct.gov/ctfluwatch) and call hotline and check with the Mass Dispensing Area closest to them.

II. New England States Situation/FEMA Region 1 Update Summary

- * The 24/7 Regional Response Coordination Center at FEMA Region 1 is currently at a Watch/Steady State Activation Level. FEMA Region 1 reports daily to DEMHS and will update DEMHS with H1N1 situational awareness as it becomes available.
- * On Oct 16th the CDC released their national map of Weekly Influenza Activity for the week ending October 10th (2009 week 40). Connecticut, New Jersey, and all of New England except New Hampshire remain at

“regional” flu activity, in contrast to the “widespread” influenza activity being reported by every other U.S. state except Hawaii, Michigan, and South Carolina.

III. National Situation Update Summary

- * A hearing on H1N1 was held October 21, 2009 by the U. S. Senate Committee on Homeland Security and Governmental Affairs, chaired by Senator Joseph I. Lieberman (I-CT). Appearing before the committee were Health and Human Services Secretary Kathleen Sebelius, Homeland Security Secretary Janet Napolitano, and Education Secretary Arne Duncan. For info on the hearing go to www.hsgac.senate.gov/public/
- * The FDA issued an advisory to consumers nationwide to “use extreme care when purchasing any products over the Internet that claim to diagnose, prevent, treat or cure the H1N1 influenza virus.” The FDA purchased and tested products from Internet websites claiming miracle H1N1 cures, or claiming to be selling Tamiflu. In one case, a tablet that the sellers claimed to be Tamiflu was tested and found to be talc powder and acetaminophen.
- * According to the CDC young people continue to be hit especially hard by the 2009 H1N1 virus. More than half of the hospitalizations from 2009 H1N1 flu reported by 27 states from September 1st and October 10th were people age 24 and younger. About 23 % of the deaths reported from 28 states during this period were in this age group. In addition, about 90 % the hospitalizations and deaths from the 2009 H1N1 flu are in people age 64 and younger. With seasonal flu, we usually see the reverse – 60 % of the hospitalizations and 90 % deaths from seasonal flu are in people age 65 and older.
- * The CDC circulated an alert reminding health care providers about early treatment of flu for patients at increased risk of complications. The CDC urges health care providers to start antiviral treatment as soon as possible when flu is suspected in these patients at risk and not wait for laboratory confirmation.
- * 300,000 additional doses of liquid Tamiflu for children were recently distributed through the Strategic National Stockpile. Many pharmacies can create doses appropriate for children from existing supplies through a process called “compounding.” Drug stores across the country, including Walgreens & Wal-Mart, are compounding antivirals locally to meet the needs of young children.
- * Each week the CDC publishes a report called the Flu View that can be found on the CDC website www.cdc.gov/h1n1flu/

IV. International H1N1 Update Summary

According to the European Centre for Disease Prevention and Control (ECDC) the first oseltamivir-resistant strain of influenza A(H1N1)v was detected in Taiwan, according to local media reports. **Oseltamivir** is an antiviral drug that slows the spread of influenza (flu) virus between cells in the body by stopping the new virus from chemically cutting ties with its host cell. The drug is sold under the trade name **Tamiflu**.

V. Non-H1N1 Critical Information

Nothing to report.

Distribution List: CT City, Town & Tribal Nation Chief Elected Officials/Chief Executive Officers
CT City, Town & Tribal Nation Emergency Management Directors
CT City, Town & Tribal Nation Health Department/Districts
CT Emergency Management Association (CEMA) – Executive Board
CT City, Town & Tribal Nation Public Safety – Police & Fire Chiefs
Regional Planning Organizations/Agencies, Council of Governments/Elected Officials
DEMHS Coordinating Council
Regional Emergency Medical Services (EMS) Councils
State of Connecticut Emergency Operation Center (EOC) Liaisons
Security Communications Access Network (SCAN)

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