



Glen Abbot Ltd.

Swine Flu Briefing 20 – 15/06/2009

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Current Situation:

Well as predicted last week the WHO have declared that there is a pandemic and they have moved to Phase 6.

The move was overdue as technically this had been reached a number of days before, but the WHO delayed to ensure they did not cause a panic.

I have not updated the numbers today as the WHO website is still showing results from last Friday.

One key factor from the statement from Margaret Chan, Director-General of the WHO, is just who is being most commonly hit by the illness. I quote here:

We know that the novel H1N1 virus preferentially infects younger people. In nearly all areas with large and sustained outbreaks, the majority of cases have occurred in people under the age of 25 years.

In some of these countries, around 2% of cases have developed severe illness, often with very rapid progression to life-threatening pneumonia.

Most cases of severe and fatal infections have been in adults between the ages of 30 and 50 years.

This pattern is significantly different from that seen during epidemics of seasonal influenza, when most deaths occur in frail elderly people.

Many, though not all, severe cases have occurred in people with underlying chronic conditions. Based on limited, preliminary data, conditions most frequently seen include respiratory diseases, notably asthma, cardiovascular disease, diabetes, autoimmune disorders, and obesity.

At the same time, it is important to note that around one third to half of the severe and fatal infections are occurring in previously healthy young and middle-aged people.

Without question, pregnant women are at increased risk of complications. This heightened risk takes on added importance for a virus, like this one, that preferentially infects younger age groups.

This confirms what many of us have said that the group most likely to be ill (and therefore off work) are the late teens to those below 50. So whilst the strain we currently have is mild, it does not mean that businesses should be complacent.

UK Position

Sadly the UK has suffered its first death of a swine flu related patient.

The Scottish Government in a statement on Sunday said: "With regret, we can confirm that one of the patients who had been in hospital, and had been confirmed as suffering from the H1N1 virus, has died today. "The patient had underlying health conditions."

This is the first fatality outside the Americas.

Over 1,200 people in the UK have now been diagnosed with H1N1.

The Scottish Government are changing their approach as the number of cases increases (Scotland has a disproportionately high level of cases in the UK) and moving away from their containment strategy.

Here is part of a statement to the Scottish Parliament by Health Secretary Nicola Sturgeon:

'.....Yesterday's meeting of COBRA therefore agreed a number of refinements to build more flexibility into our approach and better target the measures for containing the virus towards those who are at greatest risk.

These refinements will now be applied in those areas of the country where they are deemed appropriate by public health assessments. They include:

- the use of clinical diagnosis rather than laboratory testing where there is a high probability due to close contact with confirmed cases that symptomatic people are positive;*
- continued antiviral treatment of all those who have the virus but more targeted use of antiviral prophylaxis, based on local risk assessment and limited to contacts considered most at risk of contracting the virus - in practice that will be mainly household or household-like contacts, or in a school context, those at surrounding desks; and*
- the restriction of contact follow up to those most at risk.....'*

What Next?

Well the move to Phase 6 was really just a technical adjustment of the level the WHO see through monitoring so it does not mean the virus is more dangerous or spreading alarmingly.

The Southern Hemisphere are now heading into their peak flu season and for businesses in that area there should be increased monitoring of sickness levels and regular meetings of pandemic committees to ensure that you are prepared to act quickly if there has to be a change in working practices.

In the Northern Hemisphere we will continue to see the disease spread, but during summer the speed should not increase dramatically. Monitoring is the main task and someone in the organisation should have that role. Flu pockets are a distinct possibility and there is the risk on any area being hard hit for a period of time.

What would be a good plan at the moment is to hold a pandemic exercise to test out your plan. A plan cannot be considered complete unless a test has been carried out. Testing is a great way to see if there are any gaps and also it allows those with key roles to see how they will have to respond.

Future Briefings

Given that changes are now happening I will issue briefings in line with the spread. Weekly is probably still suitable at this stage but I will increase if necessary. All briefings are available at our website:

www.glenabbot.co.uk

Training and Consultancy

We provide specific pandemic training courses both publicly and bespoke to companies. If you are interested please contact me directly or email Geoff Howard at Continuity Shop (goward@continuityshop.com).

We can also help organisation review or create plans so if you need any assistance please contact me via this email or Andrew Sinclair on Andrew.sinclair@glenabbot.co.uk. Our office number is 01738 580580.

Yours sincerely



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