AVIAN INFLUENZA
- ACI Update -

SUMMARY

In the event of an influenza pandemic, airport operators would be obliged to follow the requirements of their national public health authorities. Although decisions regarding health issues generally lie outside the airport operator’s formal responsibility, ACI recommends that all airport operators discuss these issues in detail with their government and local health authorities. Airport operators should develop their own Infectious Disease Plan (not just concerning influenza), integrated into their general Emergency Response and Business Continuity Planning.

The health authorities’ plans, as they relate to airports, should take full account of the airport operator’s comments, in order to minimize disruption to passengers and the flow of goods, although it is clear that in a pandemic situation, severe consequences can be expected.

This first update from ACI covers:

1. Avian Flu – what it is, what it is not and the risks
2. Implications for Air Transport
3. The role of the World Health Organization (WHO)
4. The role of ACI
5. The role of Airport Operators
6. Recommendations for Airport Operators

Website addresses for viewing or downloading documents and presentations mentioned in the text are listed at the end of this bulletin.
1. AVIAN FLU—WHAT IT IS, WHAT IT IS NOT, AND THE RISKS

Since the SARS epidemic, the air transport industry has been extremely aware of the potentially severe effect of outbreaks of any infectious disease on international travel. The current major threat is considered to be the H5N1 influenza virus, known as Avian Flu.

While Avian Flu has not yet developed into a pandemic, medical experts at the World Health Organization (WHO) and elsewhere believe that the world is now closer to another influenza pandemic than at any time since 1968, when the last of the previous century’s three pandemics occurred. In this context, the organization’s findings were presented by WHO medical expert Dr Bradford Kay to the ACI Annual World General Assembly in November 2005, and his presentation is posted on the ACI website.

Quoting from the WHO document *Frequently Asked Questions*:

“Influenza pandemics are remarkable events that can rapidly infect virtually all countries. Once international spread begins, pandemics are considered unstoppable, caused as they are by a virus that spreads very rapidly by coughing or sneezing. The fact that infected people can shed virus before symptoms appear, adds to the risk of international spread via asymptomatic air travelers.”

“The risk of pandemic influenza is serious. With the H5N1 virus now firmly entrenched in large parts of Asia (N.B. as at 5 January 2006, 144 confirmed cases in humans with 76 deaths, including two cases in Turkey), the risk that more human cases will occur will persist. Each additional human case gives the virus an opportunity to improve its transmissibility in humans, and thus develop into a pandemic strain. The recent spread of the virus to poultry and wild birds in new areas further broadens opportunities for human cases to occur. While neither the timing nor the severity of the next pandemic can be predicted, the probability that a pandemic will occur has increased.”

2. IMPLICATIONS FOR AIR TRANSPORT

If an influenza pandemic does materialize, its public health impact is potentially far more significant than that of Severe Acute Respiratory Syndrome (SARS). In the early stages of a pandemic, there would be great pressure on the air transport industry to attempt to delay the international spread of the pandemic, through travel and flight restrictions. The implications for international air transport are enormous. It is important that airport operators be aware of the threat and prepared to react in accordance with guidelines defined by the WHO and national health authorities. Preparedness planning is needed to implement a measured approach and to avoid the risk of over-reaction. This ACI update sets forth basic information and current recommendations for ACI members to review.

3. ROLE OF THE WORLD HEALTH ORGANIZATION (WHO)

The WHO, a United Nations agency based in Geneva, is the global authority on public health emergencies. The WHO has drafted several documents concerning Avian Flu and posted them on the WHO website at www.who.int. This site is regularly updated in light of reported cases and regional/national health authority input. ACI therefore recommends that airport operators review these documents and visit this informative site on a regular basis to check for new reports.

WHO uses a series of six phases of pandemic alert as a system for informing the world of the seriousness of the threat and of the need to launch progressively more intense preparedness
activities. The designation of phases, including decisions on when to move from one phase to another, is made by the Director-General of WHO. Each phase of alert coincides with a series of recommended activities to be undertaken by WHO, the international community, governments, and industry.

Changes from one phase to another are triggered by several factors, which include the epidemiological behaviour of the disease and the characteristics of circulating viruses. The world is presently in phase 3: a new influenza virus subtype is causing disease in humans, but is not yet spreading efficiently and sustainably among humans.

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<th>Inter-pandemic phase</th>
<th>Low risk of human cases</th>
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<td>New virus in animals, no human cases</td>
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<td>Pandemic alert</td>
<td>Higher risk of human cases</td>
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<td>New virus causes human cases</td>
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<td>Efficient and sustained human-to-human transmission</td>
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4. **ROLE OF ACI**

ACI is following developments on Avian Flu closely, and in successive bulletins will be keeping members informed of significant developments and of any new recommendations affecting aviation.

ACI coordinates closely with WHO in several areas of public health to:
- Provide WHO with operational expertise on air transport issues
- Disseminate WHO guidance and best practice on public health issues to its member airports

A globally harmonized approach in defining contingency measures, insofar as possible, will help the industry to avoid confusion in the event of a pandemic. ACI is working with WHO and ICAO on a generic response plan for an Avian Flu pandemic. ICAO has called a meeting of interested organizations on 7-10 February 2006 in Singapore, to draft guidelines for airlines and airports, based on the WHO Global Influenza Preparedness Plan. ACI will participate in the meeting and inform members of the outcome.

ACI has also worked closely with WHO on the revision of the publication International Health Regulations. The new edition, adopted in May 2005, notably provides the legal basis for the new WHO global monitoring system for all infectious diseases, as well as international response mechanisms.

5. **ROLE OF AIRPORT OPERATORS**

Airport operators should follow the requirements of their national public health authorities, which are normally based on WHO recommendations. It is important to note that at this time WHO has made no recommendation to defer non-essential travel and no recommendation for entry or exit screening.
Two valuable reference publications produced by WHO, which include recommendations applicable to airport operators and which are available from the website are: Responding to the Avian Influenza Pandemic Threat - Recommended Strategic Actions and The WHO Checklist for Influenza Pandemic Preparedness Planning.

At this stage, WHO recommendations possibly impacting international travel include the following (from Annex 1 of the WHO Global Influenza Preparedness Plan):

• Information for the public on risks and risk-avoidance
• Advise travellers of outbreaks and recommend that travellers to areas experiencing outbreaks of avian influenza avoid contact with poultry farms and live animal markets
• Advice to travellers on how to behave if ill after travel in an affected area
• Recommendation that ill travellers postpone travel
• Self-health monitoring and reporting if ill, but no restrictions on movement
• Hand-washing and household disinfection of potentially contaminated surfaces
• Advise health authorities of countries of origin, destination and transit if a person on board a flight is ill
• Voluntary home confinement of symptomatic persons
• Face masks for symptomatic persons and persons seeking care

6. RECOMMENDATIONS FOR AIRPORT OPERATORS

In the interim, ACI recommends that each airport operator, working under the guidance of its governmental health authorities, should draw up a plan, covering issues such as:

CONTACTS
• point of contact with responsibility for preparedness at the airport
• government health authority point of contact
• internal communication points of contact within airport operator, and external links with:
  o air traffic management
  o airline companies
  o local public health authority
  o police
  o security
  o local hospital(s)
  o handling agents
  o airport retailers

PUBLIC RELATIONS
Develop method(s) of communicating with passengers and the local community in an informative and measured manner, e.g. airport website (including relevant web links to, for example, WHO, IATA, ICAO), leaflets and public address systems or monitors for passengers at airport. This is an important aspect of preventing the spread of misinformation and preventing over-reaction.

SCENARIOS and PLANNING
Develop plans for dealing with different scenarios, in conjunction with government and local health authorities, concentrating on the most likely problems and issues for that particular airport (especially for large airports):

• Diversion of incoming aircraft
• Recall of departed aircraft
• Screening arriving passengers who have flown from an outbreak area
• Action by airport in event of an inbound aircraft notifying of a suspected case on board
  o Remote aircraft parking area (to be designated)
  o Cases, contacts, other passengers
  o Transit passengers
• Airline schedules - air traffic management issues

Decisions regarding these issues generally lie outside the airport’s formal responsibility - this paragraph only recommends that airport operators discuss the issues with government and local health authorities, in order that these authorities can develop plans which are as acceptable as possible to the airport operator, and which minimize disruption to passengers and the flow of goods.

SCREENING OF PASSENGERS
Screening (usually by means of temperature checks for symptoms) is not generally recommended by the WHO as it is seen as inefficient (due to passenger volume and the fact that symptoms such as an elevated temperature only appear some time after the person has been infected). WHO suggests that only in circumstances such as entry screening to isolated communities (e.g. islands) and exit screening of infected areas should screening of this kind be considered. The WHO Global Influenza Preparedness Plan provides further detail. The emphasis would probably be on screening passengers only when an actual or suspected case is identified (whether this be outbound from an infected country, or inbound, when an actual or suspected case is identified on board).

Issues that would need to be discussed include:
• How screening should be carried out (e.g. temperature measurement, symptom assessment, health status questionnaire)
• Where it should occur in the airport
• How/where to quarantine those suspected of being infected
• How/where to quarantine those in contact with those suspected of being infected
• Protection of medical personnel
• Hospital facilities, transport of patients
• Tracing of contacts

These decisions generally lie outside the airport’s formal responsibility. This paragraph only recommends that airport operators discuss the issues with government and local health authorities in order to develop acceptable plans. Screening services and related equipment would be provided by the health authorities, at their own costs, including the cost of airport infrastructure and space in the airport.

STAFF
Bearing in mind the advice of government and local health authorities, issues include:
• Operating airports with greatly reduced staffing numbers
• Prophylactic drug stockpile for staff and when to use
• Training
• Drills/exercises to test preparedness plans

CONCLUSION
ACI will keep its members advised of all developments and recommendations relevant to airports through successive bulletins. At present, the need is for effective contingency planning, making contact and working with government health authorities and all other partners at the airport. Decisions regarding health measures lie outside the airport’s formal responsibility, but airport
operators should discuss the issues and share their industry knowledge with government and local health authorities so that these authorities can develop plans which are acceptable to the airport operator and which minimize disruption to passengers and the flow of goods.

ACI will work with ACI regional offices so as to make effective use of their health contacts at regional level. ACI also recommends that airport operators regularly check the WHO website for status updates concerning Avian Flu.

For any questions or additional information, contact ACI Director David Gamper by email at dgamper@aci.aero.

URL addresses for documents referenced in the text:


Responding to the Avian Influenza Pandemic Threat - Recommended Strategic Actions http://www.who.int/csr/resources/publications/influenza/WHO_CDS_CSR_GIP_05_8-EN.pdf

