

Eastern Michigan University – Emergency Management  
2009 Influenza A (H1N1) Outbreak Situation Report

**Situation Update #13**

**Date: 11 September 2009**

**Time: 1:00pm EDT**

Evidence from multiple outbreak sites demonstrates that the H1N1 pandemic virus has rapidly established itself and is now the dominant influenza strain in most parts of the world. The pandemic will persist in the coming months as the virus continues to move through susceptible populations.

Preliminary epidemiologic data on the H1N1 flu suggests significant risk among those in the college setting. As of Wednesday, September 9, 2009, ACHA data shows for the week of August 29th to September 4th, a total of 4,974 cases were reported with just 8 hospitalizations in the 236 colleges and universities reported cases of ILI to ACHA. The nationwide rate was 17.8 cases/10,000 students, more than double the prior week's rate. The highest rates of activity were observed in the Northwest and Southeast regions of the country. Data from some states show 126 to 367 cases per 10,000 students. No deaths were observed among the reporting institutions.

**Eastern Michigan University**

<http://www.emich.edu/uhs/swineflu/>

Eastern Michigan University has initiated comprehensive H1N1 prevention and preparedness activities to minimize impacts caused by both the seasonal flu and the H1N1 virus. EMU's initiatives include providing up-to-date information to faculty, staff, students and parents; contingency planning for continuity of operations in the event of an outbreak; lessons in proper hand washing; offering informational meetings for students and employees; and distributing more than 2,500 bottles of hand sanitizer to students during move-in weekend.

**Key Activities**

- EMU distributed 2,500 bottles of hand sanitizer and informational letter during student move-in day (September 5<sup>th</sup>).
- Parents of first-year students, ages 24 or younger, received a letter outlining medical services, including information about available vaccines, offered by University Health Services.
- Informational letters were distributed to the following target populations:
  - Residence hall students and university apartment tenants
  - New Student Orientation Student Assistants
  - International students
  - Greek community members
  - Faculty and Academic Affairs Administrators
  - Parents of students
- Communications are scheduled to go out to:
  - EMU employees
  - Student athletes
  - Children's Institute families

**Surveillance**

- As of 9/11/09, no cases of H1N1 have been reported on the EMU campus.
- The Michigan Department of Community Health has documented 111 confirmed and probable cases of Influenza Like Illness (ILI) in Washtenaw County as of September 5<sup>th</sup>.
- Overall activity in Michigan is low at this time.

EMU is participating with the American College Health Association in a national surveillance network to report data on a weekly basis that is specific to campus communities. ACHA Pandemic Influenza Surveillance - Influenza Like Illness (ILI) in Colleges and Universities [http://www.acha.org/ILI\\_Surveillance.cfm](http://www.acha.org/ILI_Surveillance.cfm)

EMU's influenza surveillance is a collaborative effort between federal, state and local health departments and other agencies. The campus surveillance effort includes:

- Finding out when and where influenza activity is occurring
- Tracking influenza-related illness
- Tracking what influenza viruses are circulating
- Measuring the impact influenza is having on the EMU campus community

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## Vaccination

- The EMU Snow Health Center is currently providing seasonal flu vaccination services to the campus community. For further information, call University Health Services @734.487.1122.
- Currently, there is no vaccine available to protect against the 2009 H1N1 flu virus. However, a vaccine is currently in production, and initial doses of this vaccine are expected to become available for the public later in the fall.
- CDC's Advisory Committee on Immunization Practices (ACIP) has recommended that certain groups of the population receive the 2009 H1N1 flu vaccine when it first becomes available:
  - Pregnant women because they are at higher risk of complications and can potentially provide protection to infants who cannot be vaccinated;
  - Household contacts and caregivers for children younger than 6 months of age because younger infants are at higher risk of influenza-related complications and cannot be vaccinated;
  - Healthcare and emergency medical services personnel because infections among healthcare workers have been reported and this can be a potential source of infection for vulnerable patients;
  - All people from 6 months through 24 years of age
  - Children from 6 months through 18 years of age because we have seen many cases of novel H1N1 influenza in children and they are in close contact with each other in school and day care settings, which increases the likelihood of disease spread, and
  - Young adults 19 through 24 years of age because we have seen many cases of novel H1N1 influenza in these healthy young adults and they often live, work, and study in close proximity, and they are a frequently mobile population; and,
  - Persons aged 25 through 64 years who have health conditions associated with higher risk of medical complications from influenza.

## Campus Community Mitigation

Community mitigation includes such measures as social distancing (e.g., cancelling events with large crowds, school and daycare closures, etc.) and targeted use of antiviral medications. Isolation and treatment are all effective measures in preventing the spread of influenza. Isolation refers to the separation of persons who have a specific infectious illness from those who are healthy by restricting movement and interaction to stop or minimize the spread of that particular illness.

- EMU has installed hand sanitizer along with informational signage at high traffic/contact locations including the student center, computing centers, Halle Library and other locations.
- A Web site listing action steps for preventing the spread of the flu and an FAQs page providing current information and updates. The site can be accessed at <http://www.emich.edu/uhs/swineflu/>
- **CDC recommends that individuals with influenza-like illness remain at home and away from other people until at least 24 hours after they are free of fever (100° F [37.8° C] or greater), or signs of a fever, without the use of fever-reducing medications.**

## Communications

Guidance to the campus community about how to protect themselves is an essential component of influenza prevention. When health risks are uncertain, people need information about what is known and unknown, as well as interim guidance to formulate decisions to help protect their health and the health of others.

- EMU is preparing the campus community for the H1N1 influenza pandemic by developing messages and materials to promote preparedness and prevention. The university is employing public outreach efforts to the campus community through its website, EMU Hotline, informational letters and posters, public outreach to various groups on campus, and by sharing information with the media.
- September 3<sup>rd</sup> press release on EMU H1N1 preparations and interviews with local radio and television outlets.
- September 4<sup>th</sup> letter from Provost to faculty on H1N1 prevention & preparedness.

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## **World Health Organization (WHO)**

**World Health Organization** <http://www.who.int/en/>

*On June 11, the World Health Organization raised the pandemic alert level from Phase 5 to Phase 6 indicating that an influenza pandemic is underway. The novel influenza A (H1N1) virus now will be referred to as “2009 influenza A (H1N1) virus.”*

11 SEPTEMBER 2009 | GENEVA -- WHO issued advice on measures that can be undertaken in schools to reduce the impact of the H1N1 influenza pandemic. Recommendations draw on recent experiences in several countries as well as studies of the health, economic, and social consequences of school closures. Experience to date has demonstrated the role of schools in amplifying transmission of the pandemic virus, both within schools and into the wider community. While outbreaks in schools are clearly an important dimension of the current pandemic, no single measure can stop or limit transmission in schools, which provide multiple opportunities for spread of the virus.

The World Health Organization recommends the use of a range of measures that can be adapted to the local epidemiological situation, available resources, and the social role played by many schools. National and local authorities are in the best position to make decisions about these measures and how they should be adapted and implemented.

WHO continues to recommend that students, teachers, and other staff who feel unwell should stay home. Plans should be in place, and space made available, to isolate students and staff who become ill while at school. Schools should promote hand hygiene and respiratory etiquette and be stocked with appropriate supplies. Proper cleaning and ventilation and measures to reduce crowding are also advised. WHO measures in school settings:

[http://www.who.int/csr/disease/swineflu/notes/h1n1\\_school\\_measures\\_20090911/en/index.html](http://www.who.int/csr/disease/swineflu/notes/h1n1_school_measures_20090911/en/index.html)

## **CDC**

**CDC U.S. Human Swine Influenza Infection website:** <http://www.cdc.gov/swineflu/investigation.htm>

**CDC Guidance:** <http://www.cdc.gov/swineflu/guidance/>

As of September 4, 2009, 9,079 hospitalizations and 593 deaths (16 deaths in individuals 0-4 years, 93 deaths in individuals 5-24 years, 249 deaths in adults 25-49 years, 171 deaths in adults 50-64 years, 57 deaths in adults age 65 and older, and 7 deaths for which age was not reported) associated with 2009 influenza A (H1N1) virus have been identified by CDC and state and local public health departments. <http://www.cdc.gov/h1n1flu/update.htm>

The following influenza activity was reported:

- Widespread influenza activity was reported by Puerto Rico and six states (Alabama, Alaska, Florida, Georgia, Mississippi, and South Carolina).
- Regional influenza activity was reported by 13 states (Arizona, California, Colorado, Kentucky, Louisiana, Maryland, Nebraska, Nevada, New Jersey, North Carolina, Oklahoma, Tennessee, and Virginia).
- Local influenza activity was reported by the District of Columbia and 10 states (Arkansas, Hawaii, Kansas, Montana, New Mexico, Ohio, Pennsylvania, Texas, Washington, and West Virginia).
- Sporadic activity was reported by 19 states (Connecticut, Delaware, Idaho, Illinois, Indiana, Iowa, Massachusetts, Michigan, Minnesota, Missouri, New Hampshire, New York, North Dakota, Oregon, South Dakota, Utah, Vermont, Wisconsin, and Wyoming).
- No influenza activity was reported by two states (Maine and Rhode Island).

## **Internet Resources**

**Washtenaw County H1N1 and Seasonal Influenza Information**

[http://www.ewashtenaw.org/government/departments/public\\_health/school\\_portal/H1N1%20Influenza](http://www.ewashtenaw.org/government/departments/public_health/school_portal/H1N1%20Influenza)

**Michigan Department of Community Health**

[www.michigan.gov/swineflu](http://www.michigan.gov/swineflu)

**Google Map H1N1 Flu Tracking (Colleges and Universities)**

<http://tinyurl.com/HigherEdH1N1Map-Sep09>

<http://tinyurl.com/HigherEdH1N1Map>

**U.S. Government Influenza information**

<http://flu.gov/psa/index.html>