

PRESS RELEASE**One year on experts look at the H1N1 response and lessons for the future****Embargoed Monday 12 April 2010 00:01 GMT**

12 APRIL 2010 VIENNA: One year on since the first cases of pandemic H1N1 influenza were confirmed in April 2009, experts gathered at Europe's largest conference on infectious diseases – the European Congress on Clinical Microbiology and Infectious Diseases (ECCMID) - look back at the public health response and identify both lessons learnt and future recommendations.

Speaking at the Congress, Professor Javier Garau, President of the European Society of Clinical Microbiology and Infectious Diseases (ESCMID), who are the organizers of ECCMID stressed; "Predicting the exact nature and development of influenza viruses remain challenging as they are notoriously variable and you have to expect the unexpected with such pandemics". Worldwide at least 16,813 people are confirmed as having died from H1N1, although the true toll is probably many times higher and will take at least a year after the pandemic ends to establish. "In the main Europe has been fortunate so far, greatly helped by the quickness of reporting, the public health response, social distancing precautions, and vaccine production and roll out campaign," said Professor Garau.

With cases now being reported in Southeast Asia and West Africa, the World Health Organization is stepping up its response to pandemic flu in the developing world with the distribution of millions of doses of the vaccine to countries in Africa, Eastern Europe, Asia and the Caribbean.

The response by the global health community has been attacked by some as creating a "false pandemic". However, experts at ECCMID say there is never room for complacency when dealing with pandemic influenza. "It would have been irresponsible not to prepare as we did. Such pandemics don't follow set patterns and each is different. What is crucial is to reflect on the response and adapt our future planning as appropriate", said Professor Garau.

A year ago at ECCMID a late breaking session on H1N1 was organized jointly by ESCMID and *The Lancet*. Speaking at ECCMID this year, the Editor of *The Lancet Infectious Diseases*, John McConnell, said; "Although critics can point to an excessive response to the pandemic, the global health community needs to prepare for the worse with flu and if we don't, we haven't learnt the lessons of history."

Once the H1N1 vaccine was ready there were large variations within Europe in the proportion of populations who were offered and accepted - ranging anywhere from over 60% to zero (Poland did not even offer the H1N1 vaccine). Professor Giuseppe Cornaglia, ESCMID Past President, explained; "A combination of factors appears to have affected people's willingness to accept the jab. The usually mild nature of the illness may have discouraged many people and, for example, when health workers were being offered the vaccination, media reports were playing down the pandemic and people's perception of the virus were changing." This may account for the lack of uptake with parts of the UK, for example, seeing vaccine rates for frontline health workers as low as 23%.

“People should consider the potentially serious consequences of declining flu vaccination, and physicians must make clear the vital protection role and safety of the vaccines, as well as ensuring that frontline health workers comply with recommendations themselves,” urged McConnell.

A key challenge and continuing worry for public health professionals has been the increasingly vocal anti-vaccination lobby in both Europe and the US, which also plays a role in people’s decisions to have the H1N1 jab. ESCMID continues to emphasize the central role vaccines have in protecting people against pandemic flu. “The risk-benefit balance is clearly in favour of the vaccine and no one can afford to be complacent or sceptical about its benefits,” said Professor Cornaglia.

Speaking about future plans for response to the influenza season in Autumn/Winter 2010/2011, Professor Garau explained; “It will be necessary to prepare for more than one scenario, and vigilance will be required.” Seasonal flu following the outbreak of a pandemic is usually worse than the years before because it has essentially become “invigorated” with new genetic material. It has now been agreed that the seasonal flu vaccine for 2010/2011 will contain the pandemic H1N1 strain and recommendations about risk and target groups in Europe are being reassessed.

“Other recommendations for the immediate future must include ongoing surveillance, in particular looking for changes in the H1N1 virus, studies on specific age group immunity, monitoring of the situation in Southern Hemisphere during its 2010 winter season (June – September) and countering anti-vaccine messages and campaigns,” outlined Cornaglia.

H1N1 Facts:

- Worldwide at least 16,813 people are confirmed as having died from H1N1, although the true toll is probably many times higher and will take at least a year after the pandemic ends to establish
- More than 213 countries and overseas territories or communities have reported cases of H1N1
- Some 300 million people have received the H1N1 vaccine
- Spain and the UK were specially affected in Europe. Scotland’s H1N1 death rate was third worst in the world, after Argentina and Latvia
- H1N1 transmission declined in parallel with the closure of schools for the summer holidays, and picked up again in September soon after schools re-opened
- The 20th Century experienced three influenza pandemics (1918, 1957, 1968), which were each different in their nature, impact and who they affected.

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