

USACHPPM
DEPUTY CHIEF OF STAFF FOR OPERATIONS
HEALTH INFORMATION OPERATIONS (HIO)
WEEKLY UPDATE

6 February 2002

The HIO Weekly Update provides information regarding global medical and veterinary issues of interest to the United States (US) Army. The weekly update does not attempt to analyze the information regarding potential strategic or tactical impact to the US Army and as such, should not be regarded as a medical intelligence product. Medical intelligence products are available at <http://mic.afmic.detrick.army.mil/>. The information in the HIO Weekly Update should provide an increased awareness of current and emerging health-related issues.

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HOT ISSUES

Acquisition of [WMD](#) and Advanced Conventional Weapons (ACW) – [CIA](#)

On 30 January, the [CIA](#) released the “Unclassified Report to Congress on the Acquisition of Technology Relating to [WMD](#) and ACW, 1 January thru 30 June 2001.” The report, released every six months, indicates the following trends for this period: (1) countries are demonstrating greater proficiency in denial and deception efforts, which increases the risk of substantial surprise; (2) proliferators are placing significant emphasis on increasing self-sufficiency; and (3) traditional recipients of [WMD](#) and missile technology will likely emerge as secondary suppliers of technology and expertise to other proliferators, particularly India, Iran, North Korea, and Pakistan. The report indicates the following countries are actively seeking [WMD](#) and ACW capabilities: Iran, Iraq, North Korea, Libya, Syria, Sudan, India, Pakistan, and Egypt. The key suppliers are identified as Russia, North Korea, China and western countries. The report also has a small section on the rising threat of terrorists using [CBRN](#) materials. According to the report, terrorists were most interested in (1) chemicals such as cyanide salts to contaminate food and water supplies or for assassination; (2) other toxic industrial chemicals including chlorine, phosgene, and nerve agents; (3) lesser interest in biological materials to be used for small-scale poisonings or assassinations; and (4) no credible reports exist on terrorists’ acquisition of nuclear materials although gaps in

reporting make this an issue of ongoing concern. The report is at http://www.cia.gov/cia/publications/bian/bian_jan_2002.htm.

Anthrax Laboratory Characteristics – New Mexico Department of Health

The New Mexico Department of Health has posted a laboratory protocol to rule out *Bacillus anthracis* on its website at <http://www.sld.state.nm.us/gm/anthrax.htm>.

Anthrax Treatments – [CDC](#)

On 1 February, *Science* published a report describing two separate approaches under study to use passive immunotherapy to treat future cases of anthrax: (1) purified antibodies, or immunoglobulin, from vaccinated individuals proposed by the [CDC](#) and (2) specially constructed monoclonal antibodies with 40-fold improved affinity from researchers at University of Texas, Austin. The report targets one of the three strategies for anthrax treatments highlighted in an earlier report in *Nature Medicine*: (1) anthrax vaccines – at least three new vaccines based on the [PA](#) protein are under development or study with clinical trials expected to begin in early 2002; (2) antibody-based therapies; and (3) rational drug discovery targeting the two toxins associated with anthrax. The *Nature Medicine* report is at <http://www.niaid.nih.gov/director/lane.htm> and the *Science* reference is Enserink M. Anthrax: ‘borrowed immunity’ may save future victims. *Science* 295, 777 (2002).

Anthrax Vaccine Approved – [FDA](#)

On 31 January, the [FDA](#) approved Hollister-Stier Laboratories LLC in Spokane, Washington as a contract filling facility for the anthrax vaccine adsorbed (AVA). This was the final action necessary to allow [FDA](#) approval of the labeling update and the BioPort Corporation to begin routine distribution of the AVA from its renovated facility. The [FDA](#) approved the Lansing facility where the vaccine is manufactured on 27 December. The [FDA](#) will release three consistency lots of AVA. The [DoD](#) owns all lots of AVA produced by BioPort. On 31 January, the [DoD](#) announced it will continue to vaccinate designated special mission units with the AVA and that a thorough review of all factors will decide future use of the vaccine. [DoD](#) continues to coordinate with [DHHS](#) regarding possible civilian needs for the vaccine, as well as collaboration efforts to develop new vaccine and treatments for agents most likely to be used in a bioterrorism attack. The updated product label and approval letter are at <http://www.fda.gov/cber/products/biopava0131022.htm>. The [FDA](#) press release is at <http://www.fda.gov/bbs/topics/NEWS/2002/NEW00792.html> and the [DoD](#) release is at http://www.defenselink.mil/news/Jan2002/b01312002_bt047-01.html.

Biosafety Level Four Facility – University of Texas Medical Branch

On 25 January, the University of Texas Medical Branch at Galveston broke ground for the first full-sized maximum biological containment facility/Biosafety Level Four (BSL4) laboratory on a university campus in the US. The 12,000-square-foot facility will be

directed by Dr. C.J. Peters and is designed to study tropical and emerging infections. The actual BSL4 laboratory is 2,000 square feet, which sits inside a 10,000 square foot area of high-tech support equipment designed to capture microbes before they exit the structure. The release is at <http://www.utmb.edu/utmbnews/groundbreaking.htm>.

Bioterrorism Preparedness Funding – DHHS

On 31 January, the DHHS announced that it was providing \$1.1 billion to state governments to develop comprehensive bioterrorism preparedness plans, upgrade infectious disease surveillance and investigation, enhance the readiness of hospital systems to deal with large numbers of casualties, expand public health laboratory and communications capacities, and improve connectivity between hospitals, and city, local and state health departments to enhance disease reporting. Critical benchmarks for Bioterrorism Preparedness Planning were also given. The funds come from the \$2.9 billion bioterrorism appropriations bills that President Bush signed into law 10 January. The report is at <http://www.hhs.gov/news/press/2002pres/20020131b.html>.

Defense Budget – 2003

The [AFPS](#) announced that on 4 February the White House released the 2003 Defense Budget request of \$379 billion, an increase of \$48 billion over the fiscal 2002 budget. The budget request included a \$20.1 billion Defense Emergency Response Fund and \$22.1 billion dollars for healthcare costs, which would fully fund military healthcare including the TRICARE for Life program for military retirees over age 65. The budget projected pharmacy costs growing by 15 percent, managed care support contracts by 12 percent, and military treatment facilities by 6.2 percent. Other highlights of the budget included (1) a new high dollar value in procurement to “transform the force;” (2) increase in research, development, testing, and evaluation to accelerate special operations capability; and (3) \$707 million for the Army’s Future Combat System (FCS). Info on the Army’s FCS is at <http://www.darpa.mil/fcs/index.html> and the [AFPS](#) report is at http://www.defenselink.mil/news/Feb2002/n02042002_200202041.html.

Deployment Health – [DoD](#)

On 30 January, the [AFPS](#) reported that beginning on 1 March healthcare providers will ask service members who seek medical care if their visit is related to concerns stemming from a deployment as part of the [DoD](#) Clinical Practice Guidelines for Post-Deployment Health Evaluation and Management. The guidelines are available under the guidelines hyperlink at <http://www.pdhealth.mil/> and the [AFPS](#) report is at http://defenselink.mil/news/Jan2002/n01302002_200201302.html.

Foreign Animal Disease Website – Gray Book

Bayer has recently put the *Foreign Animal Diseases: The Gray Book* on its website with hyperlinks to diseases and appendices, which have information on livestock pests,

laboratory submissions, and disinfection techniques. The website is at http://www.vet.uga.edu/vpp/gray_book/FAD/index.htm.

Influenza Surveillance – [DoD](#)

The [DoD](#) Worldwide Influenza Surveillance Program is a laboratory-based influenza surveillance program managed by the Air Force. As of 31 January, 177 (13%) of 1,366 submitted specimens have been identified as positive for influenza since the start of the influenza season (29 September). Of the isolates, 49 (28%) have been subtyped, and all were influenza A (H3N2), with the exception of one influenza A (H1N1) from Osan Air Base, Korea. During the past week, US Air Force bases in Texas (40%) and McGuire Air Force Base (27%) accounted for the majority of the isolates. The [DoD](#) Surveillance data was presented this week at [FDA's](#) Vaccine and Related Biological Products Advisory Committee where recommendations were made for influenza vaccine composition. Further information, including data from the [CDC](#) and international sites, are available at: <https://pestilence.brooks.af.mil/Influenza/>

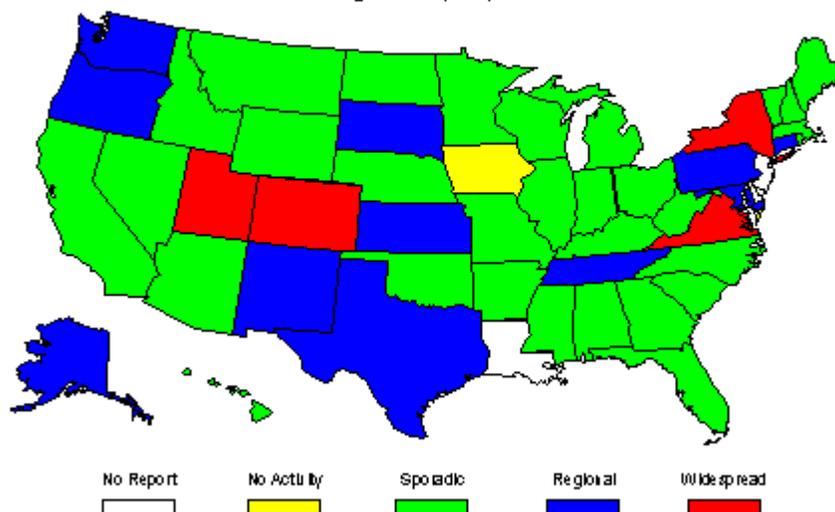
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Influenza Surveillance – US

The report for the week ending 19 January (week 3) indicated that during this week overall national visits to physicians for influenza-like illness were 2.2%, which is above the national baseline of 1.9%. Deaths attributed to pneumonia and influenza were 7.7%, which is below the epidemic threshold of 8.1% for this week. For week two, laboratory reports indicated 167 (13.9%) of 1,200 respiratory specimens were positive for influenza: 51 influenza A (H3N2), one influenza A (H1N1), one influenza B, and 114 viruses with unspecified subtype. Influenza is expected to increase further in the coming weeks with peak activity having occurred in February or later for 15 of the past 25 seasons. Since 30 September, 1,299 (5.0%) of 25,779 submitted specimens were positive for influenza: 1,278 (98%) were influenza A and 21 (2%) were influenza B. Of the 1,278 influenza A viruses, 477 (37%) were subtyped with the following results: 469 (98%) were influenza A (H3N2) and eight (2%) were influenza A (H1N1) viruses. All viruses that have been antigenically characterized (94) were similar to the vaccine strains A/Panama/2007/99 (H3N2), A/New Caledonia/20/99 (H1N1), and B/Sichuan/379/99 (H3N2). The [CDC](#) classified influenza during the third week of the 2002 influenza season as in the map below. The report is at <http://www.cdc.gov/ncidod/diseases/flu/weekly.htm>.

Weekly Influenza Activity Estimates Reported by State & Territorial Epidemiologists

Week ending January 19, 2002 - Week 3



Picture courtesy of the CDC at <http://www.cdc.gov/ncidod/diseases/flu/weekly.htm>.

Malarone Treatment Failure – [UK](#)

On 31 January, the Eurosurveillance Weekly announced the first reported case of Malarone treatment failure. The case involved a [UK](#) resident who visited Lagos, Nigeria without malaria prophylaxis and developed falciparum malaria two weeks later. The patient was treated with a standard three-day course of Malarone. Fever and parasitemia returned 28 days later. Parasites cultured at this point were resistant and showed a single point mutation. The author states that although this case has no implications for prevention or treatment, it does emphasize the importance of monitoring for breakthrough infections and performing genetic analysis of any recrudescing parasites. The report is at http://www.eurosurv.org/2002/pfp/020131_pfp.htm.

Medical Journal Abstracts – Health InterNetwork

The Health InterNetwork provides free journal abstracts to all users without registration from a library of 1,500 scientific publications. Full text access is available free or nearly free to public institutions in developing countries. The collection is due to the cooperative efforts of [WHO](#) and six biomedical publishers in an attempt to reduce the health information gap between rich and poor countries. The website is at <http://www.healthinternetwork.org/scipub.php>.

Smallpox Animal Model – [USAMRIID](#)

[USAMRIID](#) recently reported that its scientists had fatally infected monkeys with smallpox in a study conducted at the [CDC](#). This study was the first time that animals have been infected with the disease. In nature, smallpox only occurs in humans.

Smallpox Recommendations – [WHO](#)

On 1 February, the [WHO](#) published its recommendations regarding smallpox stockpiles in the US and Russia. The following recommendations were made: (1) the [WHO](#) Advisory Committee on *Variola* Virus Research should continue to oversee the *Variola* virus research program, which should be conducted in an open and transparent manner; (2) the research program should be completed as soon as possible, and a proposed new date for destruction set as soon as a consensus can be reached; (3) regular biosafety inspections of the storage and research facilities should be continued in order to confirm strict containment and a safe working environment; and (4) depending on progress, a report on the research should be submitted to the Executive Board and World Health Assembly in two to three years time. The report is at <http://www.who.int/wer/pdf/2002/wer7705.pdf>.

USCENTCOM

Afghanistan Health Sector – [WHO](#)

On 28 January, the [WHO](#) reported that a meeting to discuss reconstruction of the Afghan health sector is scheduled 3-5 February in Kabul. Currently, about 70% of the Afghan population is dependent on international health services. At least six million Afghans have no or very little access to medical care, and 50 of the country's 330 districts have no health facilities whatsoever. A [WHO](#) technical team recently completed a 10-day assessment of the pharmaceutical situation. The team found that the situation had deteriorated dramatically with lack of essential drugs common in public health facilities, although a huge influx of drug donations had temporarily alleviated the recurrent shortages. In Islamabad, the [WHO](#) is planning to provide technical support to train "Lady Health Workers" for the 35-40,000 refugees living in this area. One woman per 3,000 people will be trained in Mother and Child Health issues and communicable disease control. The report is at <http://www.who.int/disasters/repo/7562.doc>.

USEUCOM

[BSE](#)-Infected Regions – Slovakia and Slovenia

On 1 February, the [USDA](#) announced an interim rule that adds Slovakia and Slovenia to its list of regions where [BSE](#) exists. This determination means a continued restriction on the importation into the US of ruminants that have been in Slovakia or Slovenia and of meat, meat products, and certain other products of ruminants that have been in either of those countries. The report is at <http://usinfo.state.gov/cgi->

bin/washfile/display.pl?p=/products/washfile/latest&f=02020102.wlt&t=/products/washfile/newsitem.shtml.

Childhood Immunizations – Netherlands

On 31 January, the Eurosurveillance Weekly reported that the Health Council in the Netherlands advised the minister of health to expand the national vaccination program to include vaccination against (1) group C meningococci through two injections at ages 5 and 6 months or through one injection shortly after the child's first birthday and (2) pneumococci through injections at ages 2, 3, and 4 months of age as soon as the current vaccinations against diphtheria, tetanus, pertussis, polio, and *Haemophilus influenzae* type b are combined into one injection, which is expected for 2002 or 2003 at the latest. The minister of health will reach a decision on how to implement the advice soon. The report is at http://www.eurosurv.org/2002/pfp/020131_pfp.htm.

Ebola / Viral Hemorrhagic Fever – Gabon and Republic of the Congo

On 31 January, the [VOA](#) reported that the [WHO](#) announced the Ebola outbreak in Gabon and the Republic of the Congo is now under control. The [WHO](#) stated the risk is judged to be over because the 21-day incubation period for the viral disease has ended without any additional reports of cases. The death toll remains at 34.

[FMD](#) – Estonia

On 31 January, the [USDA](#) reported that it would publish in the 1 February Federal Register a proposal to add Estonia to the list of regions considered to be free of rinderpest and [FMD](#) at this time. [USDA](#) also proposed to add Estonia to the list of regions that are subject to certain import restrictions on meat and meat products because of their proximity to or trading relationships with rinderpest or [FMD](#)-affected countries.

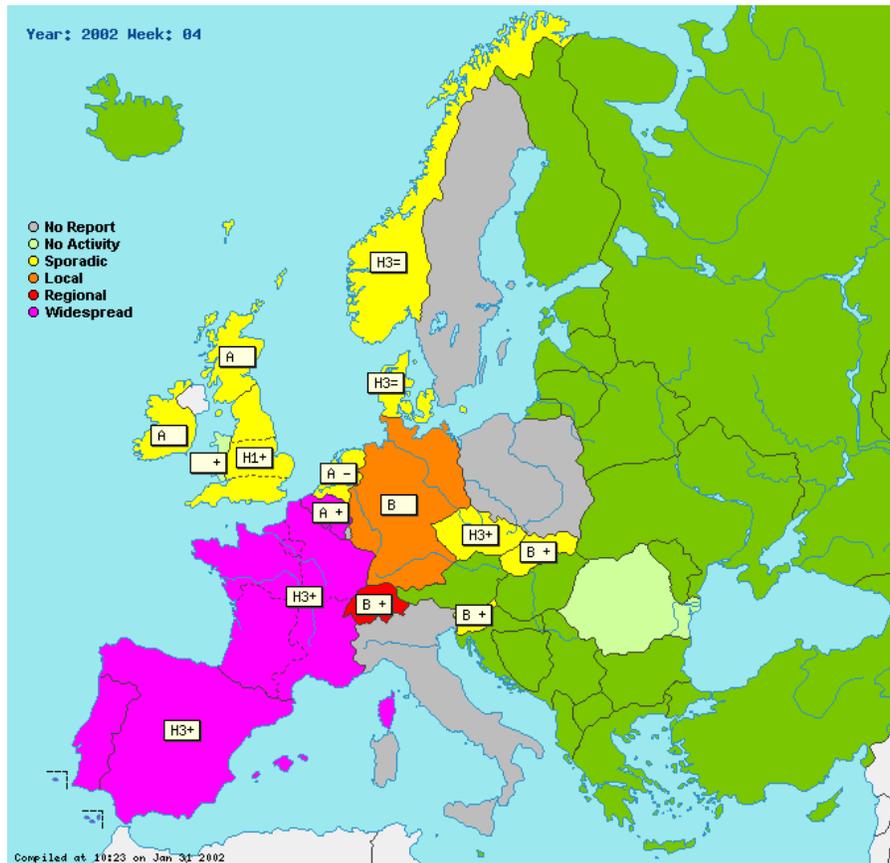
[HIV](#) – [UK](#)

On 31 January, the [CDR](#) Weekly reported that during 2000, diagnosed [HIV](#) prevalence increased 13% in the [UK](#) since 1999, which also represents an increase of 62% since 1996. Using extrapolations, the prevalence of [HIV](#) in England and Wales is expected to rise from 23,017 in 2000 to 33,920 in 2005. This represents a 47% increase for the time period and a 140% increase since 1996. For 2000, the incidence for newly diagnosed [HIV](#) infections also continued to rise with an increase of 17% since 1999. See report at <http://www.phls.co.uk/publications/CDR%20Weekly/PDF%20files/2002/CDR0502.pdf>.

Influenza Surveillance – Europe

For week four, 21-27 January, the [EISS](#) reported widespread or regional influenza activity with rates above the baseline thresholds at a high intensity in Spain and at a

medium intensity in Belgium, France, Portugal, and Switzerland. Other central and northern European countries remained at low levels with no activity, sporadic, or local activity. Isolations indicate a co-circulation of influenza A (H3N2), influenza A (H1N1), and B viruses, with influenza A (H3N2) dominant in most countries. However, influenza A (H1N1) was dominant in England during this week. Influenza A and B viruses antigenically characterized were related to the 2001/2002-vaccine strain. The report is at http://www.eiss.org/cgi-files/bulletin_v2.cgi?display=1&code=52&bulletin=52.



Picture Courtesy of EISS at http://www.eiss.org/cgi-files/bulletin_v2.cgi?display=1&code=52&bulletin=52.

Integrated Biological Detection System - [UK](#)

On 31 January, Jane's announced the [UK's](#) Defense Procurement Agency began testing of two pre-production models of the Integrated Biological Detection System (IBDS) manufactured by Insys. The IBDS provides enhanced ergonomics and advanced automation over its predecessor. The system is housed in a container, which fits onto a standard four-ton military vehicle that can be deployed upwind of friendly forces. Further info is at http://www.dr.mod.uk/info_ibds.htm.

Legionnaires' Disease – England

On 31 January, the [CDR Weekly](#) released a final report on the community outbreak of Legionnaires' disease in west London that occurred between August and November 2001. Four cases were identified, all in men, with an age range from 31 years to 52 years. Diagnostic confirmation was by urinary antigen detection. An outbreak investigation team found that cooling towers belonging to four different companies were colonized with *Legionella pneumophila* serogroup 1. Control measures were applied to all towers and no *Legionella* could be detected subsequently. One of the cases worked at the industrial site and the others were regularly in the vicinity of the site before onset of illness. No other source of infection was identified. No isolates were obtained from any of the cases to enable comparison with environmental isolates and thus it was impossible to ascertain the source of infection. The report is at <http://www.phls.co.uk/publications/CDR%20Weekly/pages/news.html#Leg>.

Meningococcal Meningitis – Europe

On 31 January, the Eurosurveillance Weekly reported summary data from the sentinel surveillance system for meningococcal meningitis serogroup W135, which is given in the following table. Surveillance began after an epidemic occurred among travelers returning from the Hajj pilgrimage to Mecca in 2000. The report is at <http://www.eurosurv.org/2002/020131.htm>.

Country	Eight Week Period (27 January 01 – 28 December 01)				Cumulative Total 1 March 01 – 28 December 01
	Pilgrim	Contact	No Known Hajj Contact	Total	
France	0	0	1	1	23
Germany	0	0	2	2	8
Ireland	0	0	0	0	0
Netherlands	0	0	0	0	5
Spain	0	0	0	0	1
UK	0	1	4	5	47
TOTAL	0	1	7	8	84

USJFCOM

Chlorpyrifos Products Cancelled – [EPA](#)

On 25 January, the [EPA](#) published a cancellation order for pesticide products containing chlorpyrifos registered by six companies: Dragon Chemical Corporation, Contact Industries, The Scotts Company, Amvac Chemical Corp., Amrep, Inc., and Drexel Chemical Company. These products were registered for use in or around the home. The cancellation order follows up on a 5 December 2001 notice of receipt of request for registration cancellations and is effective immediately. No further sale or distribution of products may occur. However, products already sold may continue to be used according to label directions. The list of affected products is in the Federal Register

notice, which may be found at <http://www.epa.gov/fedrgstr/EPAFR-CONTENTS/2002/January/Day-25/contents.htm>. Information on the assessment of chlorpyrifos and the agreement with registrants designed to reduce risks to children that resulted in these cancellations is available at <http://www.epa.gov/pesticides/op/chlorpyrifos.htm>.

Chromate Copper Arsenate (CCA)-Treated Lumber – [EPA](#)

On 31 January, *USA Today* reported that CCA-treated lumber would be phased out over the next two to three years under a pending federal agreement due to the presence of arsenic. The CCA-treated lumber has been used in decks, playgrounds, and fences. Last October, the [EPA](#) convened a public meeting of an independent panel of scientific experts, which recommended polyurethane be applied to the lumber to reduce leachable and dislodgeable CCA chemicals. Other sealants did show promise, but the panel recommended further evaluation. The panel also advised the following: additional traction may be necessary on floors and decks; coating should be clearly visible to assess wear; inspections for wear should be conducted periodically; decks should be sealed once per year; and areas of high-wear should be sealed more frequently if the coating is visibly removed. The preliminary risk assessment is scheduled for release in Spring 2002. The panel's report is at <http://www.epa.gov/scipoly/sap/whatsnew.htm>.

Dry Cleaning – Occupational Health Website

On 1 February, [NIOSH](#) initiated a website that consolidates occupational health references concerned with the commercial dry cleaning industry, which is at <http://www.cdc.gov/niosh/drycleaning/drycleaning.html>.

Horse Transport Rules – [USDA](#)

As of 5 February, the [USDA](#) will impose several new rules on the care of horses destined for slaughter. The regulations are well timed as outbreaks of [FMD](#) and [BSE](#) have caused shortages of various types of meat overseas. As a result, horsemeat has increased in value, and the number of horses slaughtered in the US has risen. The news release is at <http://www.avma.org/onlnews/javma/feb02/s020102b.asp>.

Irritable Bowel Syndrome (IBS) – [FDA](#)

On 23 January, the [FDA](#) released a letter to the IBS patient community regarding the status of Lotronex (alosetron HCl) tablets. Lotronex was voluntarily withdrawn from the market on 28 November 2000 after the [FDA](#) had received numerous reports of serious and fatal gastrointestinal adverse events in patients. The [FDA](#) initially approved Lotronex on 9 February 2000 for use in the treatment of IBS in women whose predominant bowel symptom is diarrhea. The [FDA](#) also announced that an Advisory Committee would meet regarding this medication on 23 April. A patient representative

will serve on the committee. The patient letter is at http://www.fda.gov/cder/drug/infopage/lotronex/dear_patient.htm.

Influenza Diagnostics / Treatments - US

On 1 February, the [CDC](#) reported that influenza activity is expected to continue to rise during the upcoming month. The best protection remains vaccination and about 10 million doses of 2001-02 influenza vaccine remain available. The [CDC](#) reported that immunofluorescence and enzyme immunoassay tests are available in some laboratories and commercially available rapid influenza diagnostic tests are available for both physician's offices and laboratories. Of the available rapid tests, one detects only influenza A viruses, one detects and distinguishes between influenza A and B viruses, and three tests detect but do not distinguish between influenza A and B. Four prescription antiviral medications are approved for treatment of influenza A virus infections: amantadine, rimantadine, oseltamivir, and zanamivir. Two prescription medications are approved for treatment of influenza B infections: oseltamivir and zanamivir. Amantadine, rimantadine, and oseltamivir are approved for chemoprophylaxis of influenza A virus; only oseltamivir is approved for both influenza A and B chemoprophylaxis. Physicians should consult the package inserts of the antiviral drugs for information on approved age groups, dosing, and adverse effects.

Mammogram Recommendations – US Army Policy

On 1 February, the Associated Press (AP) reported that the American Cancer Society (ACS) and the American Medical Association had placed a full-page ad in 31 January edition of *The New York Times* in support of mammography while conceding some limitations and flaws in existing studies. The ad comes in light of a raging media debate over the benefits of mammography. The Radiology Consultant to the US Army Surgeon General, COL Douglas Fellows, states, "The US Army mammography policy was reviewed within the last three to six months. Many studies are quoted and a great deal of ambiguity has resulted in different recommendations from the varied agencies involved. However, in an effort to clarify this issue for our patients, the US Army has followed recommendations of both the ACS and American College of Radiology (ACR). Both the ACS and ACR recommend annual screening mammography beginning at 40 years of age based on many studies that have been presented in peer-reviewed journals. The ACR is the organization that sets the standard of care for medical imaging. As such it provides the medico legal basis for imaging recommendations." For further information on [FDA's](#) mammography program, see <http://www.fda.gov/cdrh/mammography/mgsa-rev.html>. The AP report is at http://www.reuters.com/news_article.ihtml?type=sciencenews&StoryID=563226.

Patient Safety – [DHHS](#)

On 1 February, the [DHHS](#) announced that President Bush would propose \$10 million in new funding for an initiative to improve patient safety and reduce medical errors. The funds will support efforts to put known safety technologies into wider use, develop new

approaches and support a stronger system for rapid reporting of adverse medical events. The Institute of Medicine estimated that medical errors cause 44,000-98,000 hospital deaths and cost \$17-29 billion in excess health care costs in the US each year. The report is at <http://www.hhs.gov/news/press/2002pres/20020201.html>.

Pertussis – US

On 1 February, the [CDC](#) released a report that summarized 1997-2000 national surveillance data for pertussis and assessed vaccine effectiveness during this time. The findings indicate that compared to data for 1994-96 pertussis incidence continues to increase in infants too young to receive three doses of pertussis vaccine (11% increase) and in adolescents (62% increase) and adults (60% increase). The data did not allow calculations for separate vaccine effectiveness for the three vaccines represented in the study: DTaP, DTP and DT. The [CDC](#) recommends prevention efforts be directed at maintaining high vaccinations rates and managing pertussis cases and outbreaks. The report is at <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5104a1.htm>.

USPACOM

[AIDS](#) – China

On 31 January, the [VOA](#) reported that China would spend \$300 million to build or upgrade blood centers, in an effort to prevent a major [AIDS](#) epidemic. The official state media reported that 14 domestic and overseas firms have contracted to supply blood station equipment to centers across China. Those centers will now be able to test for [AIDS](#), hepatitis, and other bloodborne pathogens. Last year, China publicly announced its fight against [AIDS](#). The official government estimate is 28,000 cases of [AIDS](#), but health officials report to the media that cases more likely number 600,000.

AIDS – India

On 26 January, the British Medical Journal reported that HIV has reached epidemic proportions in India. According to the study, the World Bank predicts that India could have 37 million people infected with HIV by the year 2005 – a number comparable to the total number of HIV infections in the world today. Along with this prediction comes the likelihood of a worsening of the tuberculosis epidemic in India. The BMJ article is at <http://bmj.com/cgi/content/full/324/7331/182>.

Animal Product Ban – China

On 31 January, the European Union (EU) announced it was suspending imports of all products of animal origin from China due to a lack of controls on the use of veterinary drugs, particularly chloramphenicol, and other products, which could lead to residues and contaminants that result in a risk to public health. The EU report is at

<http://www.food.gov.uk/news/newsarchive/chinaban>. Reuters published a Chinese response decrying the EU ban at <http://www.nal.usda.gov/fsrio/news/news.htm>.

Flooding – Indonesia

On 2 February, the [UN](#) reported that incessant rains continue in Jakarta, with up to 35 percent of the city now flooded and over 110,000 persons in temporary shelter. Two more weeks of rain are expected. Safe drinking water and food security are immediate concerns while an increase in vectorborne diseases may pose a longer-term threat.

The report is at

<http://www.reliefweb.int/w/rwb.nsf/UNID/6E5A1E1C926D654849256B56000488FE?OpenDocument>.

Influenza – Australia

On 1 February, the WHO reported that preliminary laboratory reports indicate circulation of influenza A/Moscow/10/99 (H3N2)-like strains after 13 patients and three staff members were infected in a nursing home. The report is at

<http://www.who.int/wer/pdf/2002/wer7705.pdf>.

Visceral Leishmaniasis – Vietnam

On 23 January, the Vietnam News Agency reported three cases of visceral leishmaniasis in Vietnam's northeastern province of Quang Ninh. One case was from Ha Long City and two cases were from Cam Pha Township. One person died after being hospitalized.

USSOUTHCOM

Dengue Fever – Brazil

On 1 February, Reuters reported that health officials are concerned about the annual Carnival event in midst of a reported dengue fever epidemic. According to the report, 10,500 people were infected (17 deaths) during the past month while 391,000 infections (675 deaths) occurred in 2001 and 240,000 infections (51 deaths) occurred in 2000.

The report is at http://abcnews.go.com/wire/Living/reuters20020201_467.html.

Malaria in Detainees – Guantanamo Bay

On 3 February, Reuters reported that two of the 158 Taliban and al Qaeda prisoners held at Guantanamo Bay Navy Base in Cuba were under treatment for malaria acquired in Afghanistan. The report is at

http://www.reuters.com/news_article.jhtml?type=search&StoryID=566344.

USSTRATCOM

Nuclear Security and Safeguards – [IAEA](#)

The current [IAEA](#) Bulletin is devoted to nuclear security and safeguards and contains highlights from the [IAEA](#) Symposium on International Safeguards held the week ending 2 November. The [IAEA](#) reported trafficking in nuclear material and other radioactive sources has become a global concern with confirmed cases in more than 40 countries on six continents. The majority of confirmed cases involving nuclear material were in Europe. Of the confirmed incidents with nuclear material, one-third involved low-enriched uranium and 17 cases (10%) involved highly enriched uranium or plutonium. The issue is at <http://www.iaea.org/worldatom/Periodicals/Bulletin/Bull434/>.

Radioactive Sources – Georgia

On 1 February, the [IAEA](#) reported that they were working with the Republic of Georgia to recover and secure two powerful radioactive sources found in a remote northwest area in December by two men who remain hospitalized. The radioactive source is strontium-90, which is encased in a titanium-based ceramic encasement that, if not breached, prevents dispersal into the environment and exposure to individuals not in direct contact the cylinders. The [IAEA](#) sent response teams in January, but operations have been hampered by severe winter weather and rough terrain. The radioactive sources were widely used in the former Soviet Union for generating electricity, heat, and battery power for remote communication systems. On 6-8 February, the [IAEA](#), US, France, Germany, and Russia will meet with Georgian authorities to discuss measures to improve the security of radioactive sources in the country and to search for, locate, and secure other lost or abandoned radioactive sources. The [IAEA](#) has reported discarded radioactive sources in Georgia over the past decade, and experts estimate that many others remain lost, abandoned, or outside of regulatory control. http://www.iaea.org/worldatom/Press/News/georgia_radsources.html.

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ACRONYMNS

AFPS – American Forces Press Service
AIDS – Acquired Immunodeficiency Syndrome
APHIS – Animal and Plant Health Inspection Service
BSE – Bovine Spongiform Encephalopathy
CAMR – Center for Applied Microbiology and Research (England)
CBRN – Chemical, Biological, Radiological, and Nuclear
CDC – Centers for Disease Control and Prevention
CDR – Communicable Disease Report (England)
CIA – Central Intelligence Agency
CONUS – Continental United States
DARPA – Defense Advanced Research Projects Agency, the central research and development organization for the Department of Defense
DHHS – Department of Health and Human Services
DoD – Department of Defense
DOE – Department of Energy
DOS – Department of State
DOT – Department of Transportation
ECG - Electrocardiogram
EISS – European Influenza Surveillance Scheme
EPA – Environmental Protection Agency
ESSENCE – Electronic Surveillance System for the Early Notification of Community-Based Epidemics
FBI – Federal Bureau of Investigation
FDA – Food and Drug Administration
FEMA – Federal Emergency Management Agency
FMD – Foot and Mouth Disease
FSIS – Food Safety Inspection Service
GAO – US General Accounting Office
GEIS – Global Emerging Infections System
HACCP – Hazard Analysis Critical Control Points
HIV – Human Immunodeficiency Virus
IAEA – International Atomic Energy Agency
ICBM – Intercontinental Ballistic Missile
IDP – Internally Displaced Persons
ILI – Influenza-Like Illness
ICRC – International Committee of the Red Cross
IRCS – International Red Cross Society
JCVI – Joint Committee on Vaccination and Immunisation [sic] (England)
JTF-CS – Joint Task Force – Civil Support http://www.jfcom.mil/About/com_jtfcs.htm
K-FOR – Kosovo Forces, a [NATO](#)-led international peace enforcement force that entered Kosovo on 12 June 99 under a [UN](#) mandate. <http://www.kforonline.com/>
NAS – National Academy of Sciences
NATO – North Atlantic Treaty Organization
NCI – National Cancer Institute

NEJM – New England Journal of Medicine
NFCI – National Focus for Chemical Incidents (England)
NICHD – National Institute of Child Health and Human Development
NIH – National Institutes of Health
NIOSH – National Institute for Occupational Safety and Health
NPIC – National Pesticide Information Center
NRC – Nuclear Regulatory Commission
NRPB – National Radiological Protection Board (England)
OIE – World Organisation [sic] for Animal Health
PA – Protective Antigen
PCR – Polymerase Chain Reaction
PHLS – Public Health Laboratory Service
PHS – Public Health Service
PPE – Personal Protective Equipment
RSV – Respiratory Syncytial Virus
TB – Tuberculosis
UK – United Kingdom – England, Northern Ireland, Scotland, and Wales
UN – United Nations
UNHCR – United Nations High Commissioner for Refugees
USAMRIID – United States Army Medical Research Institute for Infectious Diseases
USDA – United States Department of Agriculture
USPSTF – United States Preventive Services Task Force
VOA – Voice of America, an international multimedia broadcasting service funded by the US Government
WHO – World Health Organization
WMD – Weapons of Mass Destruction