# MEMBER ALERT



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## US CENTERS FOR DISEASE CONTROL AND PREVENTION (CDC). GUIDANCE FOR NON PHARMACEUTICAL COMMUNITY MITIGATION IN RESPONSE TO HUMAN INFECTIONS WITH SWINE INFLUENZA (H1N1) VIRUS

The United States Centers for Disease Control and Prevention (CDC) have recently issued recommendations in regard to the means to be used in the non-pharmaceutical prevention and mitigation of cases of swine influenza.

The following recommendations are, according to the CDC, based on current information and are subject to change based on ongoing surveillance and continuous risk assessment.

This alert is designed to provide interim guidance for shipowners focusing on CDC recommendations in regard to non-pharmaceutical measures that might be useful in reducing disease transmission and associated morbidity and mortality.

Human cases of swine influenza A (H1N1) virus infection have been identified in several US states and in other countries. This is a novel influenza A virus that has not been identified in people before, and human-to-human transmission of the virus appears to be occurring. Unlike the experience in Mexico, the United States is currently observing a less severe clinical spectrum of disease with infection by the identical virus strain.

Mexican health officials have reported several hundred suspect cases, including several deaths associated with confirmed swine influenza A (H1N1) virus infection. In Mexico, many patients have experienced rapidly progressive pneumonia, respiratory failure requiring mechanical ventilation and acute respiratory distress syndrome (ARDS).

Getting better information to explain these differences is a high priority at present. The previously published United States government guidance on community mitigation relies on knowledge of the *Pandemic Severity Index* (PSI) to characterize the severity of a pandemic and identify the recommendations for specific interventions that communities may use for a given level of severity, and suggests when these measures should be started and how long they should be used.

The substantial difference in the severity of the illness associated with infections from the same virus, the relatively low number of cases detected in the United States, and



insufficient epidemiologic and clinical data to ascribe a PSI, present a formidable challenge in terms of assessing the threat posed by this novel influenza A virus until additional epidemiologic and virologic information is learned.

Novel influenza A virus infections in humans, including swine influenza A (H1N1) virus, represent a pandemic threat. Recognizing the historical precedent for the emergence of a pandemic influenza virus which could have waves of disease with different morbidity and mortality and epidemiologic profiles, public health departments around the world are remaining vigilant.

### Recommendations

When human infection with swine influenza A (H1N1) virus is suspected onboard ship it is strongly recommended that such cases be isolated.

- Persons who develop influenza-like-illness (ILI) (fever with either cough or sore throat) should be strongly encouraged to self-isolate in their cabins for 7 days after the onset of illness or at least 24 hours after symptoms have resolved, whichever is longer. Ship masters should report illness(es) before seeking care at a clinic, physician's office, or hospital. All efforts should be made to have any seafarers who have difficulty breathing or shortness of breath, or are believed to be severely ill, to seek immediate medical attention.
- If ill seafarers must go into the community (e.g., to seek medical care) they should wear a face mask to reduce the risk of spreading the virus in the community when they cough, sneeze, talk or breathe. If a face mask is unavailable, ill persons needing to go into the community should use a handkerchief or tissues to cover any coughing. The provision of preventative items such as face masks etc. can be made via local agents.
- Seafarers in isolation onboard ship should be given infection control instructions: including frequent hand washing with soap and water. Use alcohol-based hand gels (containing at least 60% alcohol) when soap and water are not available and hands are not visibly dirty. When the ill seafarer is within 6 feet of others, he should wear a face mask if one is available and the ill person is able to tolerate wearing it.
- Additional information can be found at the following Web sites:
  - Interim Recommendations for Facemask and Respirator Use in Certain Community Settings Where Swine Influenza A (H1N1) Virus Transmission Has Been Detected (<u>http://www.cdc.gov/swineflu/masks.htm</u>)
  - MMWR: Prevention and Control of Influenza: Recommendations of the Advisory Committee on Immunization Practices (ACIP), 2008 MMWR July 17, 2008 / 57(Early Release);1-60 (http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5707a1.htm)



- Interim Guidance on Antiviral Recommendations for Patients with Confirmed or Suspected Swine Influenza A (H1N1) Virus Infection and Close Contacts (<u>http://www.cdc.gov/swineflu/recommendations.htm</u>)
- Interim Guidance for Swine influenza A (H1N1): Taking Care of a Sick Person in Your Home (http://www.cdc.gov/swineflu/guidance\_homecare.htm)

# Reporting of H1N1 Virus Cases for the Port of New Orleans

It has recently been reported that the Captain of the Port of (COTP) of New Orleans considers the H1N1 virus a hazard condition as defined by 33 CFR 160.204. Accordingly, any suspected H1N1 virus cases aboard vessels entering COTP zone New Orleans must report immediately in accordance with 33 CFR 160.215, which requires notification to the Sector New Orleans Command Center at +1 504-846-5923.

Vessels required to submit an advance notice of arrival (ANOA) must identify suspected H1N1 virus cases as a hazardous condition on their ANOA. All other vessels not required to submit an ANOA, must also report suspected cases to the Sector New Orleans Command Center. Although Sector New Orleans will coordinate suspected H1N1 virus cases with appropriate public health officials, there may be reporting requirements imposed by local, state and federal agencies.

Members are asked to note all of the above and take appropriate steps as needed.