

Background

A pandemic is an outbreak of an infectious disease that causes serious illness and spreads easily across a large area or worldwide.

The World Health Organization (WHO) website provides the following information:

“**Avian influenza** (“bird flu”) is an infectious disease in birds caused by type A strains of the influenza virus. Avian influenza viruses do not normally infect humans. However, there have been instances of certain highly pathogenic strains causing severe respiratory disease in humans. In most cases, the people infected had been in close contact with infected poultry or with objects contaminated by their feces. Nevertheless, there is concern that the virus could mutate to become more easily transmissible between humans, raising the possibility of an influenza pandemic.

The H5N1 virus is of greatest present concern for human health for two main reasons.

- First, the H5N1 virus (avian influenza) has caused by far the greatest number of human cases of very severe disease and the greatest number of deaths . . . including the current outbreaks that began in December 2003.
- A second implication for human health, of far greater concern, is the risk that the H5N1 virus - if given enough opportunities - will develop the characteristics it needs to start an influenza pandemic. The virus has met all prerequisites for the start of a pandemic save one: an ability to spread efficiently and sustainably among humans.

Epidemics and pandemics can place sudden and intense demands on health systems. They expose existing weaknesses in these systems and, in addition to their morbidity and mortality, can disrupt economic activity and development.”

FACT

- WHO reports that since 2003, 387 **human** cases of the H5N1 virus have been reported in 15 countries, resulting in 245 deaths.

Pandemic preparedness

No one knows - or can predict - when or if a pandemic might strike, but with the current continuing outbreaks of H5N1 avian influenza, it is prudent to prepare for that eventuality.

Estimate: An Alberta Health and Wellness Links newsletter article from 2001 included the following estimated impact of flu pandemic in Alberta:

- 2.21 million people infected
- 44,000-1.2 million clinically ill
- 200,000-500,000 require out-patient care
- 3,200-8,900 need hospitalization
- 885-3,245 die

Physician preparedness

The Canadian Medical Association has developed a useful Pandemic Checklist for Physicians to assist physicians in planning. But, the entire health system must be ready to face a pandemic if lives are to be saved and the spread of illness managed effectively.

Health system preparedness

When the nine regional health authorities (RHAs) were in place, each was in its own stage of readiness for a pandemic. From the physician perspective it appeared there was little consistency among them.

With the abolition of individual RHA boards, Alberta Health Services (AHS) now has the opportunity to better coordinate planning, preparation and response from a provincial level.

Questions, uncertainty

There are many unanswered questions about the pandemic, and even more have surfaced as a result of the de-structuring of the RHAs:

1. How will AHS coordinate activities locally and provincially for community physicians?
2. During a pandemic, how will AHS communicate with local community physicians?
3. What measures are in place to protect physicians and other front-line health professionals?
4. What are the ethical guidelines for triage and treatment if resources are scarce?
5. Is there a stockpile of necessary infection control supplies for physician offices?
6. How will the distribution of supplies for physician offices be coordinated?
7. How will supplies for physician offices be funded during a pandemic?
8. How will physicians be compensated for putting themselves at risk on a daily basis?

AMA pandemic-related activities

The AMA has representatives on the provincial Physician Issues in Disaster Planning Working Group. Issues that need to be resolved include:

- **Ethics** – physician responsibility during a pandemic, conscription, immunization, scope of practice
- **Work force** – roles, licensing, liability coverage, privileging for international medical graduates, medical students and residents and retired physicians
- **Liability** – examining issues relating to physicians working outside normal practice areas
- **Licensing** – issues including trans-jurisdictional and emergency licensing
- **Role of community offices** – business continuity, infection prevention and control practices, knowledge, patient education, access to tools, guidelines, policies, etc.
- **Funding** – to establish physician-payment models during a pandemic