

School closing clip 1

(music intro)

Good evening, I Monica Samtani: for ANS. Our top story tonight: New fears of a bird flu pandemic. The World Health Organization raised the pandemic alert in response to the latest outbreak of human cases in Thailand. To tell us more I'm joined by ANS's Senior Medical Correspondent Dr. Scott Morgan. Dr. Morgan, what we know about these new cases?

Dr. Morgan: Monika, three days ago at least 25 new cases of severe respiratory illness were reported in a village about 100 miles west of Bangkok. A joint Thai-US response team was sent to help identify the disease. Officials have since confirmed the presence of H5N1 subtype of avian influenza in specimens taken.

Monika Samtani: This isn't the first time we've seen human cases of this disease. So why has this prompted the WHO to raise its pandemic alert?

Dr. Morgan: Well, in almost all the previous cases people became sick with infected poultry. But since this new outbreak was reported in Thailand, other cases have shown up in neighboring villages, and there has been evidence of human to human transmission. As the disease becomes more easily transmitted between people the risk of a pandemic dramatically increases. This is what prompted the WHO to raise the alert to its highest level.

Monika Samtani: so does that mean a pandemic has started?

Dr. Morgan: No no not yet. But localized human to human transmission suggests that the disease has become better adapted to humans. You don't have a pandemic until the disease is fully transmissible and that may not have happened...yet. The focus now is on trying to contain the disease to avert a possible pandemic. Or if that fails to delay its spread and gain more time to prepare the necessary response.

Monika Samtani: So Dr., is there a chance that we can halt the spread of this disease?

Dr. Morgan: It may still be possible to do that, yes. Medical experts believe that rapid and aggressive treatment and preventive use of antiviral drugs might contain the disease or slow its spread. Unfortunately, initial testing shows that the virus might only be susceptible to treatment with Tamiflu and Relenza, and the global supply of these drugs is extremely limited. Especially when you consider how big an outbreak could be.

Monika Samtani: Now with drug supply so limited, how is Thailand faring in its containment efforts?

Dr. Morgan: Well Thailand has already exhausted its small supply of Tamiflu and has appealed and for international assistance. The WHO has committed its stockpile--enough to treat 3 million people. France has promised 100,000 courses of treatment and is calling for an EU-wide contribution of at least 400,000 courses to be matched by the US. Japan and Australia also

appear willing to donate some of their stockpiles, but they're waiting to see if the US will make more than just a token contribution.

Monika Samtani: But I'm sure the US health authorities are concerned about keeping enough of our supplies to be able to respond if the disease reaches our shores.

Dr. Morgan: Of course it's a delicate balance with such limited supplies. However, time is critical here. Waiting even a few days to respond could mean the difference between containment and pandemic.

Monika Samtani: If we have a pandemic when might it reach the US, and how bad could it be?

Dr. Morgan: It's too early to tell how bad it might be, but it appears that this disease might have characteristics similar to the 1918 Spanish flu, which killed over half a million Americans. And should a pandemic occur, it could spread worldwide within four months.

Monika Samtani: So what are we doing to prepare for this possible pandemic?

Dr. Morgan: US health authorities are making every effort to speed up the preparedness activities that began in earnest last November. That's when President Bush outlined a strategy for pandemic influenza. For example, there's been a concerted effort to enhance both human and animal disease surveillance activities. And chief executives at every level of government have to make some very difficult decisions about their preparedness priorities and how to allocate very scarce resources.

Monika Samtani: OK. Thank you, Dr. Morgan. We're going to turn now to our foreign-policy analyst Phillip Couter. Phillip, what can you tell us about the situation in Thailand?

Phillip Couter: Well Monika, in addition to the containment measures that Dr. Morgan spoke about, the Thai government has started to destroy millions of fowl in its western provinces in an effort to prevent further bird to human transmission. They're also trying to restrict movement into and out of the affected areas. However, there have already been reports of people fleeing to safety.

Monika Samtani: Is the US destroying any of its flocks?

Phillip Couter: No. Biosurveillance measures have been stepped up in several of the largest poultry and egg production states. But there is no evidence of disease, so culling is not warranted.

Monika Samtani: You mention Thai movement restrictions. We've also heard regional air travel has been curtailed. What can you tell us about that?

Phillip Couter: Several countries have suspended all flights from Thailand and neighboring countries have closed their borders with Thailand. British Columbia has announced that all airline passengers arriving from Thailand are to be quarantined and are subject to medical

screening. And finally Australia is debating whether to restrict entry of all goods and people from Thailand. Although officials there have asked the US about its intentions before they make a final decision.

Monika Samtani: So has the US announced a couple restrictions?

Phillip Couter: At this point, Monica the US has only published travel warnings and advisories. But there is speculation that we may be considering more stringent travel restrictions. Now, while it may be too early to do this there is a real risk of a public outcry if we take no action and avian flu does reach our shores.

Monika Samtani: Okay. Thank you Phillip, and when we come back we'll take a look at how financial markets are reacting to this outbreak. Stay with us.

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