

## PRESS RELEASE

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### **Infectious Disease Doctors Urge Public Not to Hoard Tamiflu**

*Groups Say National, Institutional Stockpiles Needed to Protect Against Pandemic Flu*

The Infectious Diseases Society of America (IDSA) and the Society for Healthcare Epidemiology of America (SHEA) are urging members of the public not to stockpile oseltamivir (Tamiflu), amid concerns about a possible shortage of the antiviral drug that is used to treat influenza.

In a joint position statement released today, the groups outlined recommendations for national, institutional, and personal stockpiles to help protect against the threat of pandemic influenza.

“Although the world needs to be prepared for a flu pandemic in the future, it’s important to keep in mind that there is no pandemic right now,” said Martin J. Blaser, MD, president of IDSA. “Even the H5N1 virus that is currently circulating in Asia and Europe primarily causes a disease affecting birds. There have been very few cases of bird-to-human transmission. Most of those who became sick were in very close contact with poultry.”

“The threat of a pandemic to the American public is so low right now that it simply doesn’t justify personal stockpiles of antivirals,” said Leonard Mermel, DO, ScM, president of SHEA. “We need this drug to treat sick people who will suffer from human strains of flu this winter.”

Currently, there are insufficient doses of antiviral drug available to protect the United States and the world against a pandemic influenza outbreak. Roche, the manufacturer of oseltamivir, is working to increase the supply. The company also recently has taken steps to assure the drug’s availability during this year’s influenza season by restricting its shipment to pharmacies until influenza is seen in a community.

The IDSA/SHEA statement notes that there are several simple steps that individuals can take to protect themselves and their family members from influenza. “Wash your hands. Cover your mouth and nose when you cough or sneeze. If you are sick, stay home. If you are well, avoid close contact with people who are sick,” said James Steinberg, MD, a SHEA member who helped to draft the position statement. “One of the most effective things you can do to protect yourself from normal, seasonal flu is to get a flu shot,” he added.

“If there were an actual pandemic, public health agencies would recommend additional measures, such as avoiding crowds and travel, or working from home if necessary,” said IDSA’s Dr. Blaser. “In terms of stockpiling supplies at home, people may want to have a supply of pasta, canned foods, and basic medical supplies, just as they would to prepare for any disaster.”

Although it’s important for the public not to panic, the two groups, which represent infectious diseases and infection control experts, are urging federal policymakers and local health care institutions to have sufficient stockpiles to treat sick people and maintain the health care system in the event of a pandemic.

The federal government currently has only enough oseltamivir treatment courses for about 1 percent to 2 percent of the U.S. population. IDSA has strongly advocated expanding the national stockpile to include sufficient antivirals to treat at least 25 percent or ideally 40 percent of the population.

In the new statement, IDSA and SHEA advise health care facilities to have enough supply of the drugs to reduce hospitalizations and mortality and maintain social order and function in the event of a severe pandemic. “Hospitals will need to be able to treat those who are sick and keep their own doors open,” said Kathleen Neuzil, MD, MPH, chair of the IDSA Pandemic Influenza Task Force.

Although needs will vary from institution to institution, the IDSA/SHEA statement offers some examples. “These drugs have a shelf life of five years, so one approach for a hospital might be to keep in stock about five times as much drug as typically used in an average influenza season,” Dr. Neuzil said.

Given the current shortage of antiviral drugs, IDSA and SHEA do not recommend that institutions stockpile enough drugs to prevent illness among health care workers because this strategy requires much greater drug supplies than early treatment and could deplete the reserve necessary for treatment on a national level.

“This recommendation could change if drug supplies increase in the future,” Dr. Neuzil said. “When one considers the cost and loss of workers caused by illness among nurses and doctors, it may make sense for hospitals to have adequate supplies to use the drug to prevent illness among health care workers who are seeing patients with flu. But we don’t have enough drug to do that yet,” she added.

“The current bird flu virus that has everyone so worried may never develop into a pandemic,” Dr. Neuzil said. “But there is near universal agreement among infectious disease experts that another influenza pandemic will come one day. We need to take that threat seriously, and we need to be prepared.”

The IDSA/SHEA position statement is available at [www.idsociety.org](http://www.idsociety.org).

*The Infectious Diseases Society of America (IDSA) is a professional organization of physicians, scientists, and other health care professionals dedicated to promoting human health through excellence in infectious diseases research, education, prevention, and patient care. The Society, which has nearly 8,000 members, is based in Alexandria, Va. For more information, visit [www.idsociety.org](http://www.idsociety.org).*

*The Society for Healthcare Epidemiology of America (SHEA) was founded in 1980 to advance the application of the science of healthcare epidemiology. SHEA works to maintain the utmost quality of patient care and healthcare worker safety in all healthcare settings, as well as its high success rate in infection control and prevention, while applying epidemiologic principles and prevention strategies to a wide range of quality-of-care issues. SHEA is a growing organization, strengthened by its active membership in all branches of medicine, public health, and healthcare epidemiology.*