

The Honorable Michael Leavitt
U.S. Department of Health and Human Services
200 Independence Avenue, S.W. Room 434E
Washington, D.C. 20201

Attention: Pandemic Influenza Vaccine Prioritization RFI.
(FR Doc. E6-21282; Published December 14, 2006)

January 18, 2007

Dear Secretary Leavitt:

The National Association of State EMS Officials (NASEMSO) appreciates the opportunity to comment on the prioritization of pandemic influenza vaccines. Comprised of state EMS officials in 56 states and territories, NASEMSO supports its members in the development of EMS policy and oversight, as well as providing vision, leadership and resources in the development and improvement of state, regional and local EMS and emergency care systems. Pandemic flu vaccine prioritization is an issue of critical importance to national pandemic preparedness efforts and our members look forward to receiving the forthcoming vaccine prioritization guidance for incorporation into local and statewide EMS pandemic response plans.

What objectives, principles, strategies, criteria, assumptions, and rationales should be considered in pandemic vaccine prioritization?

Several models currently being considered by public health strategists, including the Institute of Medicine's Committee on Modeling Community Containment for Pandemic Influenza, indicate that medical countermeasures are likely to be feasible only during the earliest stages of an outbreak before the community health system is overwhelmed.

NASEMSO agrees with NVAC/ACIP Recommendations for Prioritization of Pandemic Influenza Vaccine and NVAC Recommendations on Pandemic Antiviral Drug Use as a strategy that will decrease health and societal impacts including severe morbidity and death.

Based on difficult lessons that were learned by our EMS colleagues in Toronto following the SARS epidemic, NASEMSO believes that healthcare workers (HCW) with direct patient contact, including emergency medical services personnel and members of their immediate families, as well as a proportion of persons working in essential healthcare support services needed to maintain healthcare services receive prioritization for available vaccine as they will serve to maintain core critical infrastructure and are key to an effective emergency response in the event of a pandemic.

What is the relative importance of the three Federal pandemic influenza response goals and what are the associated implications for vaccine prioritization?

NASEMSO acknowledges that vaccine prioritization is only one strategy that may mitigate the effects of pandemic influenza which could also include antiviral prophylaxis, in which symptomatic individuals and most of their close contacts receive treatment or prophylaxis with antiviral drugs, closure of schools and public facilities, and social distancing.

In the context of vaccine prioritization, however, due to the expected timing of vaccine availability and the importance of a properly functioning societal infrastructure in preventing death and illness, we believe the President's third goal of improving our ability to respond to a pandemic through effective emergency preparedness planning at all levels should be the highest priority. NASEMSO appreciates and commends DHHS' efforts at pandemicflu.gov as an effective means for communicating reliable information on pandemic influenza throughout public and private sectors and acknowledges that these tools are assisting pandemic influenza planning efforts nationwide.

Which population groups should have priority for receiving pre-pandemic vaccine? Which should have priority for receiving pandemic vaccine? What is the rationale?

The groups at highest priority to receive pandemic vaccine include those who provide critical pandemic response functions, those who maintain critical social infrastructure, those at highest risk of serious disease or death, and those at highest risk of spreading disease. Our members indicate anecdotal knowledge of an increasing percentage of EMS responders who may refuse to report for duty if not prioritized to receive countermeasures that are intended to protect themselves and their families from a pandemic.

States generally agree with the premise of preserving the functioning of society over protecting those who may become ill or die during a pandemic, with the rationale being that impaired societal functioning could lead to additional illness and/or death among both those infected with the pandemic virus and those who suffer due to a lack of access to basic services. During a severe pandemic, it is likely to be equally important to protect those providing critical pandemic response functions and those who maintain critical social infrastructure.

How can fairness, equity, efficiency, and related principles be reflected in the determination of priority groupings for receipt of pre-pandemic or pandemic vaccine?

To ensure that fairness, equity, and efficiency are reflected in the prioritization, it is important to include relevant multidisciplinary stakeholders in DHHS planning efforts and discussions related to pandemic influenza. It is also essential for DHHS to ensure that preparedness funding filters down to front line EMS responder agencies that will be responsible for implementing federal goals and objectives related to a national emergency response during a pandemic.

For priority groups, how should vaccine be allocated, distributed, and administered? Who should determine when and how the vaccine is distributed and administered?

NASEMSO agrees that state health officials, working collaboratively with local public health and safety providers are best suited to guide allocation of vaccine in their jurisdictions during shortage situations such as a pandemic to ensure that designated high priority populations receive vaccine as it becomes available. State Health Agencies will fulfill their responsibilities in this regard by exercising appropriate statutory and regulatory authority, including emergency health powers, to effectively manage the required public health response.

Please feel free to contact me with any questions in this matter. Thank you again for the opportunity to provide this comment.

Sincerely,

Fergus Laughridge
President
National Association of State EMS Officials