Ebola to Zika

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Presentation Overview

• Ebola in Texas – Lessons Learned
• Texas Zika Plan
• Local and Federal Partners
• Looking Ahead
Ebola in Texas
Lessons Learned

• No real warning at all for Ebola

  September 24, 2015
  - Index Case first begins to show symptoms of Ebola in Dallas, TX
  - DSHS begins coordination of Ebola

  October 8, 2015
  - Index Case pronounced dead

• Need for nationwide network of predefined infectious disease assessment and treatment centers

• Lab response network (LRN) must be robust nationwide

• Access to experimental therapeutics and PEP must be expedited and more flexible

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Ebola in Texas
Lessons Learned

• Clear roles and responsibilities among levels of government and involved entities

• Strong lines of communication to ensure accurate and timely information for decision makers and the public

• Emphasize public health risk of confusion / panic

• Create trusted relationships

• Drill on the plan in advance

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Global

• Outbreaks are occurring in many countries
• Zika is expected to be much less widespread in the U.S. than in Brazil or Puerto Rico
• Socioeconomics has impacted the spread of Zika (access to screens, AC, insect repellent, integrated vector management)

U.S. States*
• Travel-associated cases: 3,712
• Locally acquired vector-borne cases: 105
• Laboratory acquired cases: 1
• Total: 3,818
  • Sexually transmitted: 30

U.S. Territories
• Travel-associated cases: 83
• Locally acquired vector-borne cases: 24,118
• Total: 24,201
• 228 confirmed cases directly or indirectly travel-related**
  • No local mosquito transmission in Texas to-date
  • 13 cases were pregnant
  • 2 cases were infants infected before birth
  • 2 cases were sexually transmitted
• Will likely experience small flare-ups of local transmission by mosquitoes at some point
• Some areas are at higher risk (North Texas, Rio Grande Valley, Gulf Coast)

* As of October 5, 2016
** As of October 12, 2016

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Zika - Situational Perspective

Texas

Texas Zika Plan

Plan Format
1. Communications / Public Health and Medical Information
2. Mosquito Surveillance and Control
3. Health Surveillance
4. Command, Control, and Coordination

Level 3
Sustained Local Mosquito Transmission

Level 2
Potential Case of Local Mosquito Transmission

Level 1
Prior to Local Mosquito Transmission

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Texas Zika Actions

- Strategies used to protect our most vulnerable Texans must make scientific and public health sense
- Areas of focus to ensure we are doing everything we can right now to delay and prevent Zika
  - Communicate Precautions
  - Articulate Outlook
  - Expect Local Transmission
  - Define Area
  - Prevention – Now and Later
  - Describe Response Plan to Public

Communicate Precautions

- Communicate and educate clearly about prevention and recruit community volunteers to help amplify messages
  - Create barriers against mosquito bites (repellent, clothes)
  - Create barriers in human habitats (screens, AC)
  - Deny breeding habitats (standing water, larvicide)
  - Spraying adulticide
    - Most expensive and least effective
    - Attacks last and hardest link in the transmission chain
- DSHS has initiated several communication, education, and awareness activities
  - www.Texaszika.org
  - Public awareness campaign
  - Webinars and educational opportunities
  - Guidance document for schools and daycares
Texas Zika Actions

Articulate Outlook

• Articulate the Zika outlook, and what our response is going to look like
  • Be on top of evolving information and make honest estimations about expectations and plans for response
  • Expect small pockets of cases in limited clusters rather than widespread transmission – response will be precision strikes in defined areas
  • People may be alarmed if they do not see the response they expect
  • Openness and candor now, builds trust

• Specifically, the response to local transmission will include
  • Prompt communication of status and response plan
  • Redoubled prevention efforts
  • Guidance to local health care providers
  • Targeted integrated vector management within 150 meters of instances of vector transmission
  • Targeted community outreach and education across entire area

Expect Local Transmission

• Be on high alert and act fast when local transmission occurs
  • Work together to analyze and respond to evidence of possible local transmission (symptom onset, travel history, mosquito exposure, lab results)
  • Ensure consensus between local, state, and federal entities about whether local transmission has occurred
    • Characterizing a case as local transmission will be collaborative
    • Because of the potential to cause great public concern, must work together to minimize confusion and anxiety
Texas Zika Activities

Define Area

• Have ability to precisely define the area of recommended testing for pregnant women if local transmission occurs
  • Define area in close coordination with local and federal partners.
  • Likely an area of at least one mile in diameter centered on a public landmark or intersection to preserve privacy of known cases
  • Must be able to provide testing to all pregnant women who spend significant time in this defined area
  • Be on alert for signs of tests outstripping capacity
  • The area may grow or shrink depending on how events unfold
  • There may be smaller, more targeted vector control efforts within this area

Texas Zika Activities

Countermeasures

• Know and use our universal Zika countermeasures
  • The tools we have to prevent Zika are the same as those we have to combat it when it arrives
  • Priorities for prevention and response should be based on an assessment of each community’s risk profile
  • Factors that increase risk include
    • Low public awareness of threat and prevention
    • Lack of access to barriers
    • Lack of barriers in structures
    • Presence of breeding habitats close by
    • Lower socioeconomic status
  • Greatest Challenge: The Call to Action
Local and Federal Partners

- Planning and response efforts require collaboration at all levels
- Response activities are controlled at the local level
  - Local elected officials, local health entities, mosquito control district, etc. are key to building relationships with the local health care community which are essential to an effective response
- Federal partners play an important role in response efforts
  - CDC provides resources, scientific expertise, and cross-state coordination
  - Medicaid covers Zika-related items
    - Insect repellent
    - Contraception
    - Family planning services
    - Diagnostic testing
    - Targeted case management

Zika

Looking Ahead

- Expect Zika and other arboviruses to be an ongoing public health concern
  - Be prepared to continue prevention and response efforts after public interest subsides
  - Leverage lessons learned from past responses
- Texas challenges
  - Local control creates a system of autonomous public health entities that need to coordinate efforts
  - Large diverse state with a bi-national border
- DSHS must look forward to next mosquito season
  - State Legislature is meeting and may provide statutory direction
  - Governor’s Task Force on Infectious Disease Preparedness and Response is a multi-disciplinary group of experts to provide insight and recommendations
  - Ongoing dialogue between DSHS and public health stakeholders
THANK YOU