Transcript of press briefing at the Palais des Nations, Geneva
Dr Keiji Fukuda, Special Adviser to the Director-General
on Pandemic Influenza

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Gregory Hartl: without further ado, we will ask Dr Keiji Fukuda, the special adviser to the Director General for pandemic influenza to make some opening remarks, and then we will open the floor up to questions, thank you very much.

Dr Fukuda: bonjour, everybody, good morning. What I will do in the next few minutes is talk a little bit about the review of the pandemic, the process which is coming up and the review of the International Health Regulations, give you a little bit of background about the review process, and then we will throw it open for questions and talk about what you want.

So again, first thanks everybody for taking the time and coming over.

What we will begin this month is a review process to look over the preparedness and the response to the current influenza pandemic. And also review the functioning of the International Health Regulations (IHR), both in relationship to the pandemic but also assess the IHR in terms of other functions not related to the pandemic.

So there are a couple of main goals that we are hoping to get out of this process. The first one is to review how well the world was prepared and how well the world responded to the current pandemic current situation. So we will look at both of those aspects in detail. The second goal that we will get out of this, is to look at functioning of the IHR. I think that all of you know what it is but in essence, the IHR are a large international agreement among the Member States of WHO, about how to handle global public health emergencies and other large events. And so we will see how well this framework functioned during the pandemic, which is the first global test of IHR.

And then, the bottom line for the process is to identify lessons learned. To identify what the world needs to do including countries and organizations like WHO to be better prepared and also to respond to future pandemics and future
large scale global public health events. And so this is what we are embarking
upon. And so this review process is going to be conducted by an independent
group of experts. These are people who are all experts in various aspects of
public health and in science. And the assessment itself will be quite in-depth. We
will start off with the meeting in April, but the process itself will continue for some
months after the first meeting. So the first meeting is not the entire review itself
but its really the start of the review.

We expect that the results of this process are going to be quite important. I think
it will probably be a uniquely broad and in-depth examination of the
preparedness and response. And we expect that the findings will be of
importance in guiding certainly WHO, but I think that all of the entities involved in
responding to global public health emergencies. So it will be a quite, I think useful
activity. And again, as I mentioned, the bottom line for doing this, is really to
identify what do we need to do to get better. We know that are things that have
to get better, but what are they, and how are we going to improve upon them.

Now the review will be conducted by a so-called review committee. So this is a
group of currently considered to be about 29 people. They are people who are
going to be drawn from a list of experts who are part of the IHR, so these are
experts from around the world who have been identified by countries. They
represent a large variety of expertise and backgrounds, both in infectious
diseases but in also in non-infectious diseases. So a very large group of experts.
And so a group of them will be asked to conduct the assessment.

Now the review committee will operate under the same procedures and rules as
do other expert committees of the WHO. So there is set procedures, for example,
covering things such as declarations of interests, conflicts of interests, and those
sort of things. And the committee will operate under those procedures. The
names of the review committee members will be made public by the time we
have the first meeting. So currently, we are in the middle of the enrolment
procedures and going over looking at various aspects and making logistical
details. But we expect to make the names of these people available by the time
of the first meeting.

Now the meeting itself, the first meeting, is going to be held from the 12th
through the 14th of April. So that is coming up fairly shortly.

And I want to talk a little bit about how the committee will do its work.

Now the committee itself is going to set its own methods of work. So the
committee itself will decide who it wants to talk to, how it want to get access to
various inputs and opinions and reflections. And so for example, they may want
to get input from countries. They may want to get input from civil society, they
may want to get input from critics, they may want to get input from industry, and
the committee itself will decide on how it wants to get input from these different
entities. The committee itself will also decide upon who will be the chairman or chair person and the co-chairperson for the process, and so these issues will be decided at the first meeting.

Now we anticipate that there will be a large number of countries that will want to make its views known to the review committee. And so we anticipate that at the first meeting, countries will have the opportunity to do this, both to provide written inputs but also to be able to voice directly to the committee, what their concerns are, what they think is important, what they hope that the committee will focus on, and those kinds of issues.

As I mentioned, the work of the committee will continue after the first meeting. The first meeting is just when the committee gets together for the first time, decides on how its going to conduct its work over the next several months. Based on the first meeting, the committee will provide a preliminary report of its thoughts to the Director-General, and the Director-General will then provide a preliminary report to the World Health Assembly, coming up in May of 2010.

This is the broad outline of the process. It gives you the rational for why it's been conducted. Again really the bottom line is to find out how we are going to do a better, in terms of preparedness and response. And then broadly speaking, how the review process will be conducted, who will do it, and how it will go forward.

So with that let me stop here, and then we will throw it open for questions. Thank you.

**Gregory Hartl:** Thank you very much. Questions? Frank Jordans, Associated Press.

**Frank Jordans, AP:** Good morning, Dr Fukuda. Since there is been a lot of talk of the issue of conflict of interest, you actually mentioned that, how the rules will apply. Am wondering will any of the people in the committee likely include any of the decision-makers who were part of the process at the time, and what kind of conflicts of interests might arise from that, seeing as that they will essentially be reviewing their own work. And secondly, is WHO not have any kind of review of what happened to so far itself, apart from what the committee might come out with?

**Dr Fukuda:** Sure. Thanks for the questions, Frank.

The committee members are going to be people who represent various areas of expertise. They do not represent countries, they do not represent organizations, but they are being asked to participate on the review committee, because of their experience and expertise in a variety of the areas.
Some of these people will be very well known scientists. Some of these people will be public health people, some of these people will be public health people who were involved in the pandemic response itself. And it will be quite broad. And the reason for this is that we want to mix of people on the review committee who have practical experience as well as theoretical experience. We do not want people who have just theoretical experience but really people who have also their own understanding of how things went. So it will be a mix of a group of people like that.

In terms of your second question, yes, WHO itself has been conducting a review of how well we think that things went and how the management of these kinds of events and how the organization can approach these events better. However, it is important that we separate a WHO review from an independent review of the situation. So within WHO we are really focused on how do we as an organization really performed better, do what we’re expected to do. But we are asking the international experts to take a very broad perspective, look at how things went globally, internationally. And as part of that we expect them also to assess how well WHO did. But again from an independent perspective. Thank you.

**Gregory Hartl:** Next question? Lisa Schlein.

**Lisa Schlein:** It so nice to see you in the flesh, Dr Fukuda.

**Dr Fukuda:** Thanks. Happy to be here in the flesh!!

**Lisa Schlein:** I have a couple of questions to ask. One is, are you having the review of independent experts occurring now because you think that the H1N1 pandemic is starting to wind down, and this is an appropriate moment in which to review what has happened and what might happen? And secondly, what are your concerns about, fortunately, we have not been zapped with the 1918 type pandemic, but because the pandemic has been so relatively mild there are lots of skeptical people around the world that it even existed, or that it had the kind of bite that seasonal flu has. So in the process of review, I mean your own thinking, are you not concerned that perhaps, not that you jump the gun, but people may have thought you jumped the gun, and that your credibility is really on line because here you pumped up this great big terrible thing which never really materialized. I mean am glad it didn't, but that is the situation!

**Dr Fukuda:** Lisa, thanks for the questions. These are good questions.

The timing of the review process, I think reflects a couple of things.

One of them is that we don't know when the pandemic itself is going to be over. However, we are now about a year into the pandemic, I think there is a lot of experience which is been accumulated and in addition, we want to conduct, at least, begin the review process at a time when the memories are fresh, when the
experiences are fresh. So for those reasons this seems to be relatively good time to start it.

In addition, as I mentioned, we are conducting the review under the IHR. And one of the things of the IHR called for when they were enacted was that functioning, how well the IHR themselves are going, is reviewed and presented to the World Health Assembly in May of 2010.

So what this review process does is it will take advantage of that call for the review of the IHR, and allow us to use the same process to conduct this review. And so there is a couple of different reasons why we want to conduct it now, or begin the process now.

In terms of the other questions, I think the best way to answer this is that the assessment itself is going to be a very in-depth and very broad review of these kind of questions and we believe that the assessment itself will be a good way to address many of the questions which you're raising now.

It is interesting because there are a number of different questions that can be addressed from the review process. You know for example, it can go ahead over scientific aspects, it can over communications aspects, managements aspects, and so on, but we expect that this process will go into the kind of questions that you have raised here, and we think it is a good way to address it because it will be done by a very credible group of people. So anyway, we hope to see these things addressed directly. Thank you.

Lisa Schlein: Excuse me just to follow-up, I know you are not the review committee. But since WHO has been having its own reviews, on-going reviews, what sense do you get about the comments that you get from these skeptics about whether you reacted too quickly, or too strongly? Do you, WHO, shall we say, feel that perhaps, a different tactic should have been used or should be used in the future?

Dr Fukuda: Well, it is true, I cannot second-guess what the committee is going to say or find, but one of the things which we do, and which I do personally is I talk with a lot of the representatives from countries around the world. And one of the questions I frequently ask is about how decisions were made and how things went. And these are talking with the people who were responsible for the health in their countries. And again, one of the important distinctions talking with that group of people versus many of the people who are voiced in the media, is that, these are the people who make decisions as they go ahead. These are the ones who have to decide when they have limited amounts of information. And in general, I think there is a good sense that the decisions were made trying to take into account all the information that was available at that time. And so, there are lots of countries who are asking the kind of questions that you are raising, now, themselves. I raise these questions when I talk with our Member States. And
again this is one of the things we really want to address. Could we have made
decisions better? Could we have considered things in a different way at the time?
So again, I don’t want, I can’t really second-guess what the committee is going to
say, and it’s for this purpose that the committee has been convened, you know to
help address these kinds of questions. But we along with many others are asking
the same kinds of questions of ourselves and each other.

**Gregory Hartl:** John Zaracostas

**John Zaracostas:** Yes, good morning Dr Fukuda. Firstly, I would like to ask you,
if, given the big public interest and concerns about way this whole thing was
handled, at international and national levels. Will the proceedings be open to the
public? Will there be a public gallery? That is my first question.

And secondly, if you can give us your interpretation. Was there an amendment or
a reinterpretation of the IHR pandemic definition in April, away from morbidity
and mortality and more into geographic spread or not? Thank you.

**Dr Fukuda:** Let me address the first question and then the second one.

The meeting of the review committee will be opened to observers from Member
States, so all countries in the world will be able to send representatives to
observe directly. In addition, the review committee proceedings will be opened to
representatives of UN organizations, and also international governmental
organizations, the nongovernmental organizations, that are in official relations
with WHO. So this group of entities is identified under the, how the experts
committees work under, how the IHR conduct these kinds of hearings, or these
kinds of proceedings. So this is how this proceeding will be conducted under
those procedures.

In terms of your second question, the answer is no. If we go back over the
definition of pandemics, again, what we see is that the heart of the definition of
pandemics, whether it’s for influenza or other diseases, is the emergence and the
spread of a disease around the world. The questions about severity have come
up because severity is an extremely important part for how decisions makers
decide what to do in their countries. You do something differently, when things
are mild, you do something differently when things are very severe. But as we
have pointed out over and over again, at the start of pandemics, and even if you
go into it, it is impossible to predict what is going to happen. We have never been
able to say that we know in a few weeks this is where we were going to be, or in
a month this is where we were going to be. And so knowing what the severity is
of a pandemic is beyond us. We have never made any pretence of being able to
predict that and so it was never made a part of the pandemic definition. You
know the definition has really, our attempts to get at severity, are on-going but its
really not part of whether we are in a pandemic or not. It’s really, is their
information that we can have on the severity that will guide the actions that
should be taken, as part of the pandemic. But they are related but separate issues. But there was no change made in April.

**John Zarocostas:** So just to clarify that there will be no public gallery other than specialized organizations accredited to WHO events. So there will be no press availability to the proceedings. Is that correct?

**Dr Fukuda:** In terms of the press, these are two separate questions. I think that the proceedings of the expert committee, the review committee, will be conducted per normal procedures. As part of the normal procedures the press are not usually invited to experts meetings. However, we are also mindful that this is situation of particular interest. This is much more interesting as normal business and so what we will do is try to work with the media as much as possible to make the information as available as possible. But we are still considering how to do this.

**Gregory Hartl:** Further questions? Can you state your name and agency, please?

**Kaitlin Mara:** Intellectual Property Watch.

I was wondering if this review process is also going to be looking at the pandemic influenza framework that WHO is still trying to finish. And in particular if you are going to look at the way that vaccines were shared with countries that couldn't afford to make them on their own.

**Dr Fukuda:** These are good questions.

I think that, the way I can answer this question is that, the exact scope of the review will be defined by the committee itself. For example, they will address exactly what questions they think they ought to look at and how they are going to do it. And so I cannot answer directly whether they will look at the framework or the attempts to develop a framework on virus sharing and benefit-sharing or not, especially given that there other meetings going on about this. However, I think that, when if we look at the issue of vaccines, vaccines are clearly an important part of the response of the pandemic, so I expect that the committee will be looking at vaccines. But again, I cannot right now tell you how they will frame the questions, or what the scope of that will be.

**Gregory Hartl:** Further questions? Frank?

**Frank:** I'm still not quite clear about how to describe this committee. I mean would you say that they are independent or an outside committee or are they going to be WHO representatives on this committee? And when do you expect the final results? You spoke of preliminary results in May. We will have the final results this year?
Dr Fukuda: Frank, let me try to clarify.

First, let me answer your second question. I think that what we are hoping for, although, again the committee itself may say it needs to continue working, but what we are hoping for is that the review committee will be able to finish its work in time for the Director-General to be able to give more final report, for the World Health Assembly of 2011. So that will be next year. So this will give time for the committee work over the next several months and that's when we are hoping the final report will be available.

In terms of how to describe the committee, let me go back a bit to the IHR. I think it will show you how it functions in terms of WHO and how to put this committee in perspective.

The IHR are an agreement among the Member States of WHO so it is a very large umbrella, a very large "chapeau" and the whole purpose of that agreement was to identify how countries can work together to detect events, report events, and act upon them more quickly and more coordinated than in the past. So that is what the IHR in essence are, an agreement among countries on how to do that. As part of that the IHR called for countries to nominate experts who could be there, and who could proved the Director-General with independent advice. So these are experts, again, in a wide variety of areas. And so, this review committee, is a committee that will be drawn from that group of experts. And so they are the ones who are going to determine how they do business. They are the ones who are going to determine how they are going to meet, when they are going to meet, and the scope of their questions. And then the role of WHO in this is that, we will facilitate. If they need help setting up meetings, if they need help for travel, if they will help with getting access to different groups, we will provide that kind of support. But it is a group that will act independently. There are no WHO staff members who are part of it. They are all independent to WHO, and then their findings that they present to the Director-General will be their findings. They will not be WHO's findings.

Jonathan Lynn, Reuters: Dr Fukuda, who will draw the members of the review committee from this pool of experts? Will that be the WHO, or the members states, or somebody else?

Dr Fukuda: So typically when we pool together a committee like this, one of the things that we aim for is to have a broad geographic representation, so that there are people from all over the world and then we try to make it as balanced as possible in terms of gender balance. And then we also try to make sure that areas of relevant expertise are represented there. So, in order to do this, what we do is we ask the regional offices of WHO to work with Members States in their area. So there's a kind of a discussion in the regions which goes on, and based on that, we come up with people who will be nominated to be on the committee.
And then what we do is go to the people who have been nominated themselves to ask them if they are available and so on, and then based on those kind of discussions, and then asking them to provide declarations of interests and vetting it, then we come up with final group of people.

Takuya Arai: Hello Dr Fukuda. From what I understand from your answers to the previous questions, I think it's unlikely to happen that the committee will discuss the possible change of definition of pandemic, in terms of severity, I think. My question is, will the committee discuss other part of possible change of pandemic alert level system itself? I mean the whole system and especially for the geographical spread of the disease.

My second is not always relevant to this review process, but if you have any plans to have the next emergency committee meeting, could you let us know? Thank you.

Dr Fukuda: Let me address the first issue first.

Actually, I believe that the committee is going to identify what issues were important to countries and to everybody, I think that the phases, the definitions of phases, the role of severity, I think that these are critical issues. And so again, I cannot tell you what the committee is going to decide to do. That is their responsibility. However, these were clearly important issues. You know, the questions have come up, and I actually expect that it is more likely that they will address these issues. So I think that this is quite likely.

In terms of the second request, yes, the next emergency committee will be pulled up at some time in the future, and then we will give you notice when this is going to occur.

Lisa Schlein: If I may, I'd like to move away a bit from the review committee, and I'd like to ask you a status question right now that H1N1 itself has apparently has peaked in certain parts of the world, North America, Europe, and so forth. But it is in the southern hemisphere, and I'd like to get a feeling about what is actually occurring there, that is the situation in Africa, for instance, and some of the other areas which are particularly vulnerable in terms of not having the kind of expertise that, or vaccines, that the richer part of the world has. What is occurring there? Is it of concern to you?

Dr Fukuda: Thank you Lisa.

So to give you a quick update, as you mentioned the activity levels of the pandemic virus are relatively low in North America and in Europe.

The parts of the world which have the most activity right now, some parts of the world with increasing activity, for example, we see activity elevated in parts of
south-east Asia. As we have mentioned in the past, in west Africa, but also in some parts of [central] Africa such as Rwanda. And then more recently, there has been increasing reports of activity in Central America and then parts of South America. We of course have concerns about what may happen as we go into the winter part of the southern hemisphere. As you rightly point it out, many of the countries in southern hemisphere are the countries who are least able to handle large outbreaks of disease and who have the least resources, and as you know the reports of H1N1 in some parts of Africa, particularly western Africa, have been relatively recent. We did not have reports of actively in western Africa in 2009. There really were more in 2010. And so this is something that we continue watch very closely on. A lot of the efforts to get vaccine out are focusing on those countries in the southern hemisphere. And in fact these are the issues which are raised by the last time the emergency committee was convened. They raised these exact same concerns and questions about the southern hemisphere and in particularly in many of those areas. Thank you.

Gregory Hartl: A few more questions and we will call it off.

Lisa Schlein: Just to follow up on that. You say that you just recently gotten reports from west Africa about H1N1. What validity is there to the reporting that you are getting, that is, is the surveillance systems in these countries up to the par that you wish it should be, is the monitoring good?

Dr Fukuda: I think that there's a two part answer this.

One, I think the information in this particular instance is pretty good. Not as much as we would like, but the information that we have is pretty good and the reason why I say that is that the information comes from surveillance and from studies that are going on which showed that there is a transition from seasonal influenza viruses over to pandemic influenza viruses. And so that change over, we have information showing that in fact the change over was taking place, and so that's pretty good. And then in addition, what was new is that, even though there were sporadic isolates before, it was in the past few months that we got reports of community activity, of disease activity, so in combination, we think that the available information is reasonably good.

But to answer to the second part of the question, I think it is clear that the surveillance capacities still can be made much better. They can be improved in Africa but also a number of other countries, and so this is one of our big aims that we hope to continue moving on over the next number of years, is to improve those basic capacities there.

John Zarocostas: Yes, Dr Fukuda, I was wondering if the expert committee will examine the availability of H1N1 vaccine and compare it with the logistics and availability of the prototypes for H5N1, given that there have been quite a few cases of avian this year with high fatality rates which was the initial concern and
the benchmark for the pandemic prototype that we have here on H1N1. Is that going to be examined sir?

**Dr Fukuda:** John, I think you are talking about the review committee. Again I expect that the review committee will be looking at pandemic vaccines, H1N1 vaccines. And again, as I mentioned, am not sure specifically what questions they will raise about it, but I think if the general topic, you know, it is a very big topic, and I do not see how they could not address it.

But in terms of the specific question, those, the balance between H1N1 vaccine and attention to H5 vaccines, I think this is, I simply cannot tell you. I don't whether they will make those comparisons or whether they will look at that as an issue or not. So then, I do not know.

**Gregory Hartl:** Last question, Gabriella.

**Gabriela Sotomayor:** Thank you very much Dr Fukuda. Independently of the committee, in your opinion, is the world better prepared if another pandemic comes, the threat, you know the states, WHO everybody? Do you think, are we better prepared?

**Dr Fukuda:** Gabriella, well, here I will jump ahead of the committee and say that. I do think that in many fundamental respects, the answer is yes. We are clearly better prepared. And I say this for a couple of different reasons.

That if we go back, say a decade, go back ten years, to say how are we able to handle things now, I think that the passage of the IHR, all of the activities that went into pandemic preparedness. And I think that the lessons from outbreaks like SARS really changed how the handling of global emergencies is done around the world. For example, we do talk with each other much better, and I think that the actions are better coordinated, certainly compared to a decade ago.

Secondly, I think that if we look at the current H1N1 pandemic, it showed us though that we still have a lot of things to learn how to do things better. I think that for example, how we get information out, how we communicate, how we make risks understandable to people, how we describe things, how we use words like what we call the pandemic, how we are going to be more flexible so we can scale up, scale down more easily, more quickly in a coordinated way. I think simply by identifying that these are really issues that we need to work on, we need to do better. I think already it automatically means that we have a lot of people thinking about these things. And so I think that it is that kind of thinking which leads to making improvements for the future.

So my basic answer is yes, we are definitely better prepared. I think having gone through many of the previous outbreaks that I mentioned. I think that for me it is very clear that we do things better now than we did in the past. It is equally as
clear to me that there are areas where we going to have to continue to get much better. I think that the challenges in the future are going to be more complicated in many ways the world will grow more complex and more linked, and move more quickly. And so we will have to keep up with that, and that will keep pushing us. Thank you.

**Gregory Hartl**: Thank you very much, for today.