



HPA Update

The London 2012 Olympic and Paralympic Games offer both opportunities and risks to public health in London and the rest of the UK.

The Games represent a rare opportunity to improve public health by strengthening public health systems and promoting healthy lifestyles across London, the UK and to all our international visitors.

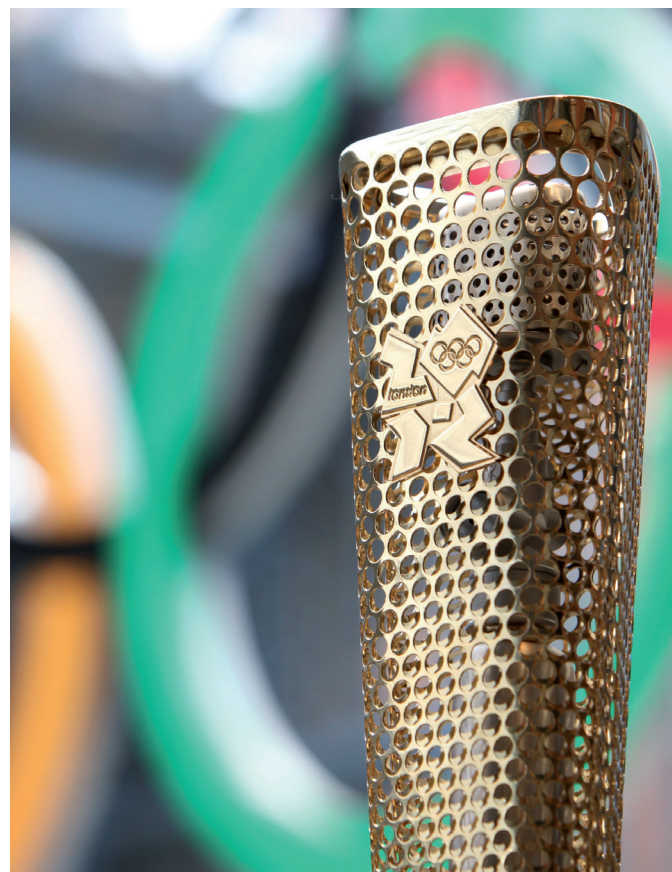
To make the most of this, as well as building world class systems to monitor and respond rapidly to any outbreaks of infectious diseases or environmental hazards, the Health Protection Agency (HPA) has undertaken a programme of collaborative work with the World Health Organization (WHO) and the European Centre for Disease Prevention and Control (ECDC) to ensure information and expertise are shared across all partners, networks and regions.

As with all major mass gatherings, risks include:

- Greater demand on health services
- The introduction, dissemination and exportation of diseases
- Unhealthy behaviours such as alcohol consumption and risky sexual practices during the festival atmosphere
- Difficulties associated with communicating risk to multinational participants, both athletes and spectators
- Potentially increased security risks due to the high profile nature of the Games

The HPA has a key role during the Games to ensure the health of those visiting and participating is protected from infectious diseases and environmental hazards. The HPA is working with the London Organising Committee for the Olympic and Paralympic Games (LOCOG) and other partners to achieve this.

In order to deliver, the HPA has enhanced its systems so that it has greater capacity to receive and rapidly react to the information it gathers through surveillance, reporting and intelligence. The HPA is therefore better placed to identify and respond to any potential health protection threats. The surveillance, reporting and intelligence data is used to produce an HPA daily public health situation report (SitRep) for LOCOG in the run up to and during the Games. This SitRep includes information on public health threats, incidents and trends in disease incidence across the UK, and any significant international event that may pose a threat. It provides assurance that the appropriate public health response is being undertaken. The HPA has been providing



London 2012

these weekly since the start of the Olympics Torch Relay in May 2012 and moved to daily reporting from 2 July.

Global infectious disease scanning and risk assessment for the Games is being undertaken daily throughout the summer by collaboration between various parts of the HPA which have a routine role in international surveillance, ECDC and the HPA-commissioned National Travel Health Network and Centre (NaTHNaC). Multiple sources of international disease information are considered and events identified are assessed according to an agreed set of criteria for their relevance to the Games. Daily teleconferences involving collaborating partners ensure that any possible threat to the Games from infectious disease occurring overseas is identified and included in the SitRep to LOCOG. In addition to scanning for international incidents of local significance, reporting of any UK incidents of international significance will continue throughout the Games period through normal international communication channels.

Incidents Summary report:

In the run up to the Games the most commonly used phrase in the HPA's public health situation report has been "nothing of significance to report."

As we were expecting, the incidents that have occurred in the last few weeks have all been routine infections such as norovirus in several teams, which took place before they arrived at the athletes' village, and chickenpox among crew on a floating hotel for Games related staff. These were all managed by following routine public health measures such as isolating those who are ill and advising people of signs and symptoms. Nothing has occurred overseas that has been of significance to the Games.

The HPA also receives anonymous information from the main Polyclinic in the Olympic Park, Stratford, on a number of syndromes that are reported as part of LOCOG's Medical Encounter System. To date there has been nothing of public

health concern to report. The HPA has a member of its London team embedded in the Polyclinic, working alongside LOCOG's medical services team to provide expert public health advice if something does occur.

One of the key driving forces in the HPA's work over the last few weeks has been media activity; both the speed in which we have become aware of issues through social media, and the way media are looking to link stories to the Games in the quest for a good story. One of the ongoing stories is about "killer caterpillars" more commonly known as Oak Processionary Moths, which have been linked to the main Olympic Park despite not being found there at all, or even in East London. The stories have implied that these moths are linked to asthma, and even deaths, while the evidence shows that in reality there is no such risk.

For more information from the HPA website go to:

www.hpa.org.uk/Topics/EmergencyResponse/2012Olympics/
www.hpa.org.uk/2012Games

ECDC Update

ECDC enhanced epidemic intelligence for London2012

ECDC is enhancing its international surveillance activities for the London 2012 Olympic and Paralympic Games, watching for any infectious disease health events that could present a public health threat.

ECDC will be working closely on a daily basis with the HPA in the UK, the World Health Organization and other international partners, to undertake enhanced epidemiological monitoring and epidemic intelligence for international health events. ECDC has a liaison officer based at the HPA's Health Protection Services team in Colindale, London, and the HPA has arranged secondments to ECDC. This close collaboration will facilitate the timely assessment and shared understanding of any potential international threats to both the Games and to the wider European community during this time.

Throughout the Olympic and Paralympic Games period from July to September, ECDC will be carrying out enhanced event-based surveillance as part of its routine epidemic intelligence activities. It has adapted media screening tools to assist detecting timely infectious disease threats which may be relevant for the host and participating countries. The use of social media and blog fora as a mechanism of timely identification of disease threats is also being explored in this context.

A daily bulletin containing information on events relevant from a public health perspective is being provided to EU Member States public health authorities.

Information will be available through a summary of relevant health events included in the weekly ECDC Communicable Disease Threat Report (CDTR) available on the ECDC website: [http://ecdc.europa.eu/en/publications/surveillance_reports/Communicable-Disease-Threats-Report/Pages/Communicable-Disease-Threats-Report.aspx]. ECDC support to London 2012 is coordinated through the UK's standing focal point for ECDC who is based at HPA Health Protection Services Colindale.

WHO Update

Throughout the London 2012 Olympic and Paralympic Games WHO will collaborate with - and, if requested, provide technical support to - the HPA regarding public health issues associated with the Games. The HPA's Health Protection Services team in Victoria, London, has been a WHO Collaborating Centre on Mass Gatherings and High Visibility/High Consequence Events since 2011, and has worked closely with WHO for many years. Joint activities include the development in 2010-11 of a tool for planning and risk assessment of major mass gatherings, and the participation of HPA staff in WHO observer programmes at the 2010 Winter Olympics and the 2010 FIFA World Cup. In 2011, together with national authorities, WHO also carried out an assessment of the level of health-system crisis preparedness in England and organized a workshop to document arrangements for managing a potential health-system crisis for the 2012 Games.

WHO technical support during Games time will include contributing to risk assessments of public health events through a WHO liaison officer embedded in the Olympic Coordination Centre, mobilizing the WHO-managed Virtual Interdisciplinary Advisory Group on mass gatherings (VIAG), and assisting in efforts to maximise learning and evidence sharing and making the most of the legacy benefits of the Games. After the Games, WHO will build on this collaboration by helping transfer knowledge to organizers of future events, including the 2016 Olympic Games in Rio de Janeiro.

WHO support to London 2012 is coordinated jointly by the WHO London Collaborating Centre for Mass Gatherings, WHO-EURO, the Intercluster Working Group on mass gatherings at WHO in Geneva (ICWG), and the WHO Assessment and Decision Support (ADS) team. Further technical and administrative support will be provided by the VIAG.

For further information:

Email: HPA2012@hpa.org.uk, or visit: www.hpa.org.uk/2012Games