



# Insight no 9

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## ECDC's response to pandemic (H<sub>1</sub>N<sub>1</sub>) 2009

Since April, ECDC has been working intensively on an effective and speedy response to the pandemic. Early on – and for the first time ever – ECDC's Director declared Alert Level 2, ECDC's top alert level, in order to mobilise the necessary resources from the Centre's Units. When it became clear that the outbreak was inevitably moving towards a pandemic, ECDC embarked on a series of measures that made sure that its annual work plan could still be carried out – albeit in a modified manner to accommodate the additional workload required by the pandemic – while at the same time responding to the specific threats posed by the pandemic, which is expected to affect Europe until the spring of 2010. These and other response activities were evaluated in June by an external team of experts (see page 5.)

### Public health crisis

ECDC was able to respond immediately to the crisis thanks to its Public Health Event Plan and a track record of regular crisis exercises. When responding to a critical public health event (PHE), a crisis manager, appointed by the Director, has overall responsibility for the management of the event. He is supported by technical teams, led by a coordinator, that provide essential input for risk assessment, epidemiology, response measures, scientific and vaccine work. Further support comes from a communication team that handles media issues, web

services, scientific publications, and from experts dealing with IT and administrative issues.

As the crisis progressed, the Public Health Event Plan was updated to integrate ECDC's influenza programme by establishing the so-called F-Group, a group that carries out long-term activities. The daily meetings of ECDC's Management Team (PMT) bring together the crisis manager, all team coordinators, and the manager of the Emergency Operations Centre (EOC). Strategic decisions are made by the Strategic Team (PST), which meets at least once a week. PST meetings are attended by ECDC's Director, the heads of unit, the crisis manager, and the technical coordinator. During normal times without public health emergencies, the PST reverts back to its original format as the Executive Management Committee (EXC).

### Technical output

ECDC produced a range of influenza-related documents, which are available from a dedicated page on the ECDC website. In April, when the threat of the influenza A(H<sub>1</sub>N<sub>1</sub>)v virus became evident, ECDC published a first risk assessment: a technical document that provides basic information on issues such as transmissibility, severity and risk groups. This document is continually updated as more information becomes available. Technical information

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## Editorial by Director Zsuzsanna Jakab



### ECDC's consolidation pays off when facing pandemic (H1N1) 2009

Since the emergence of influenza A(H1N1)v in April this year, ECDC's work has been very much focused on addressing the threat posed by this pandemic (see page 1). A team of experts evaluated and equivocally commended ECDC's response activities in June (page 5). However, ECDC's response undoubtedly benefited from the joint work undertaken on pandemic preparedness with the Commission, WHO and the Member States since 2005 and the resulting stabilisation and reinforcement.

Since its establishment in 2005, ECDC has experienced dynamic growth. In 2008, the Centre reached a phase of both consolidation and continuing expansion, and is now well on its way to

becoming a 'centre of excellence' in the fight against infectious diseases in Europe, as well as a prime source of information for the scientific community.

Although the current pandemic (H1N1) 2009 may overshadow some of ECDC's key achievements over the last weeks and months, it still should be borne in mind that the Centre significantly increased its output over the course of this year and successfully addressed the need for a strengthened response to the threat of communicable diseases in Europe. The Centre consolidated its public health functions, enhanced the capacities of its disease-specific programmes, further developed partnerships, and improved managerial structures.

The recently published 2008 Director's Annual Report provides a detailed analysis of ECDC's developments and outputs in 2008. The Centre's capacities were

strengthened both in terms of human resources and budget allocation, enabling ECDC to embark on additional activities. By the end of 2008, the total number of staff (temporary and contract agents) reached 154. The Centre's budget increased from EUR 27 million in 2007 to EUR 40.2 million in 2008. The positive results of an independent external evaluation of ECDC's activities clearly demonstrate our achievements.

In only five years, ECDC has accomplished major steps on the road to becoming a recognised centre of reference in the area of communicable diseases. However, facing the pandemic (H1N1) 2009 will be a major challenge this winter, and I would like to reiterate my commitment, as well as the commitment of every person at ECDC, to work together effectively for the benefit of European citizens.

## ECDC's 2009 Annual Epidemiological Report — Special focus on vaccine-preventable diseases

Vaccine-preventable diseases are this year's special focus in ECDC's 2009 Annual Epidemiological Report on Communicable Diseases in Europe (AER). The AER is published in compliance with a 2007 decision to produce a comprehensive report on all diseases under ECDC surveillance every three to five years. The current edition presents a broad compilation of the

situation regarding communicable diseases in Europe, providing data and graphs on disease incidence (2007 data) and assessments of health threats (2008). In the European Union, the major threats related to infectious diseases remain largely unchanged and include antimicrobial resistance, healthcare-associated infections, vaccine-preventable diseases (with particular emphasis

on pneumococcal infections), respiratory tract infections (with particular focus on influenza and tuberculosis), and HIV infection. From July 2005 until the end of 2008, ECDC monitored 696 public health threats. In 2008, ECDC monitored 250 threats, 227 (91%) of which were new in 2008, 14 (6%) were carried over from 2007, and nine (4%) represent recurring threats.



Continued from page 1

and guidance on antivirals and vaccines were produced, public health measures were published, and details of important scientific advances and public health developments were made available. These activities were facilitated by ECDC's earlier work in the area of pandemic preparedness. Together with the Member States, ECDC developed a new surveillance strategy, established an EU-wide modelling group that liaises with WHO's global group, undertook work attempting to anticipate the emergence of antiviral resistance, and started with preparatory activities for the pandemic vaccines that will become available in late summer/early autumn. An *ECDC Daily Update* keeps public health officials and citizens informed on recent developments at WHO, the US CDC, and the European Medicines Agency. Its content is aimed at meeting the demands of the situation and the needs of the Member States, the Commission, EMEA and WHO in what remains a very dynamic situation. ECDC is particularly interested in providing the Member States with an outlook on potential developments so they can prepare for autumn and

winter when the pandemic will most probably intensify. Finally, ECDC offers a wide range of services to the media and performs a host of support activities, all in the best interest of the European citizens.

### Fighting the pandemic

ECDC is currently preparing for autumn, when the next pandemic wave is expected to hit Europe. Everyone at ECDC is fully committed to delivering top quality service in order to support the Europe-wide response. However, the real European added value is being achieved by close collaboration with the Member States, the European Medicines Agency, the Commission, WHO, and national health authorities/agencies in and outside Europe. This unprecedented cooperation, combined with the dedication of European scientists at the national and EU levels makes Europe better prepared than ever before when facing the challenges of pandemic influenza.

## ECDC Photo Competition — open to readers of *ECDC Insight!*



Readers of *ECDC Insight* are invited to participate in a photo competition ECDC is holding this summer. This competition aims at gathering pictures for an exhibition entitled *'ECDC through the lens: five years in photos'* that will be shown at the ECDC Partnership Conference in Uppsala Castle, Sweden, on 13–14 October. All entrants will receive a copy of the catalogue accompanying the exhibition. The first prize winners in each category will receive a bottle of champagne, while the runners-up take home a selection of Swedish beers. To request the competition rules or to submit a photo, please contact [photo.competition@ecdc.europa.eu](mailto:photo.competition@ecdc.europa.eu) by 10 September 2009. This is a special extended deadline for readers of *ECDC Insight*.

## Monitoring the Dublin Declaration

In June 2009, experts from all 53 countries in the WHO EURO Region were invited to ECDC to take part in a monitoring-and-evaluation workshop on the Dublin Declaration. The aim of this workshop was to:

- provide background information on monitoring the Dublin Declaration including experiences with the first progress report;
- present the indicator framework for monitoring the Dublin Declaration and determine the participants' views about indicator priorities, relevance and gaps;
- assess the availability of country data including data already submitted for other purposes, e.g. UNGASS, EMCDDA reporting, and evaluate the questionnaire developed by independent consultants to collect country data that are not available in current reports;
- exchange experiences in different countries with regard to monitoring and evaluation, discuss challenges in meeting international reporting requirements, and review the use of data collected for international reporting; and to
- update participants on current developments in international monitoring and evaluation.

Read more at [www.ecdc.europa.eu](http://www.ecdc.europa.eu).

## ECDC's Competent Bodies Meeting, October 2009

ECDC's Competent Bodies are an essential element in the architecture of strengthening Europe's defences against communicable diseases. The Uppsala conference on 12–14 October will, for the first time, bring together all Competent Bodies in a joint meeting and allow them to address topics of common interest. Other items on the agenda include specific issues to be discussed in working groups, sharing of experiences, and a discussion on the working relationship between ECDC and the Competent Bodies.

## ECDC liaises with European journalists

Liaising with European journalists to ensure that information is rapidly reported is critical for ECDC. ECDC co-sponsored the press room at the World Congress of Science Journalists (WCSJs) held in London on 29 June–2 July. Ben Duncan, recently appointed as Corporate Communications Officer, updated the journalists from several European countries on the Centre's response to pandemic (H1N1) 2009 at a 'Meet the European CDC' briefing in the press room. Participating in such an event complements the media seminars ECDC regularly organises for European journalists.

## ECDC Director speaks at 'Coffee and Commission' event in Jönköping



Zsuzsanna Jakab (left) prepares for 'Coffee and Commission' debate in Jönköping with Pernilla Baralt and Emmy Stromberg of the European Commission

On 2 and 3 July, ECDC Director Zsuzsanna Jakab addressed a technical meeting of the Swedish Presidency which focused on the EU countries' efforts to shift from containment to mitigation strategies in connection with. Wayne's Coffee Shop in Jönköping, a Swedish town of about 90 000 people located at the southern tip of lake Vättern, served as the venue for a debate on July 6 that focused on the EU's preparedness for the influenza pandemic. Mrs. Jakab was joined by local doctors, health officials and citizens, only hours before an EU health ministers meeting was scheduled to discuss the same topic – also in Jönköping. Mrs. Jakab emphasised the need for EU countries to work together when facing common challenges and presented ECDC's efforts to facilitate such an approach. The event was organised by the European Commission's representation in Sweden as part of their 'Coffee and Commission' series of debates.

On 6 and 7 July, Mrs Jakab attended the Informal Health Council in Jönköping. The ECDC Director briefed EU health ministers on what to expect from H1N1 this autumn and, in a second presentation, informed on the growing public health need for new antibiotics. Mrs. Jakab's presentations are available from [www.ecdc.europa.eu](http://www.ecdc.europa.eu), search terms: *'Situation report Europe'* and *'Presentation on antibiotic resistance'*.





*Some of the Team that works on ECDC's Influenza Programme*

## Programme presentation: ECDC's influenza programme

Well before the 2009 pandemic put influenza back on centre stage, ECDC's influenza programme had already been working on seasonal influenza, animal influenza ('bird flu'), and pandemic influenza, as well as on several related issues, especially influenza vaccination. The programme aims to contribute to:

- a decrease in the morbidity and mortality that is due to seasonal influenza, particularly through increased use of vaccination and better use of public health measures at the national level;
- improved pandemic preparedness plans at EU, Member State and local levels;
- a robust scientific base for influenza control in Europe, including a balanced and relevant research programme.

A range of activities directed towards achieving these targets are ongoing under the multiannual work plan and are carried out in collaboration with Member States, WHO, the European Commission, and several EU agencies. At the start of the influenza pandemic, the programme team, lead by Professor Angus Nicoll, was expanded and reorganised. The resulting 'F-Group' – four interconnected groups working on surveillance, scientific aspects, vaccines, and communication – is now in a much better position to provide the necessary

response activities required under ECDC's updated Public Health Event Plan.

### Surveillance and control of seasonal influenza a priority

Occurring in winter epidemics, seasonal influenza places a massive burden on Europeans. ECDC estimates that influenza accounts for about 40 000 deaths each year in the EU alone. In addition, seasonal influenza has a significant negative impact on health services and is responsible for financial losses due to lost hours at work. The research carried out by the influenza programme documents the disease burden associated with influenza. The weekly surveillance report provides an overview of influenza disease activity in Europe. Its maps, tables, graphs and commentary are written by experts from ECDC, but draw substantially on the expertise and input of experts in the Member States. In addition, the influenza programme provides information about influenza to health professionals and the general public. In September 2008, the ownership of the European Influenza Surveillance Scheme (EISS) was transferred to ECDC where it was renamed European Influenza Surveillance Network (EISN). ECDC also operates the Community Network of Reference Laboratories (CNRL) for human influenza. This network of laboratories contributes to WHO's annual

determination of the antigenic composition of influenza vaccines by submitting specimens to the WHO Collaborating Centre in London, which is also part of the CNRL.

### Monitoring bird and swine influenza

Avian influenza and human cases of avian influenza (and more recently swine influenza) are still closely monitored by the influenza team, despite the fact that risk perception has considerably decreased.

### Preparing for pandemics

Pandemic preparedness activities accelerated significantly in Europe following the emergence of avian influenza in 2005. As a result, WHO and the Commission both published revised planning guidance documents. Four Europe-wide workshops organised by the European Commission, WHO Regional Office for Europe and ECDC helped to keep the momentum. In parallel to these activities, ECDC assisted every Member State to perform a self-assessments of their pandemic preparedness. As a result, Member States have never been better prepared to face a pandemic.

## Interview: Evaluating ECDC's response to the influenza A(H1N1) 2009 pandemic

ECDC Insight talked to Jaran Eriksen, Greco Donato, and Sandra Guedes, who conducted an evaluation of ECDC's handling of the influenza A(H1N1) 2009 pandemic. Here is the full text of the interview.

**Q:** How would you rate ECDC's response to the influenza A(H1N1) pandemic?

**A:** Good! Using data from sources both internally in ECDC and externally, the overall response to the Public Health Event (PHE) has been very positive. However, as in most cases, there were several issues that should be improved in preparation for a possible new PHE.

**Q:** What are the lessons learnt?

**A:** Overall, ECDC showed its capability to respond to a Level 2 PHE. However, as mentioned there are issues that can be improved. One thing concerns the PHE plans. Several staff members claimed they did not know the plans, and they did not have time to read them once

the PHE had started. The plans were also very focused on an initial, acute situation. To improve this, a plan for a long-term crisis situation should be made and the staff that will be involved in a PHE must have better knowledge of all plans.

The PHE also showed the great skills, capacity and motivation of the ECDC staff. However, the organisation needs to find incentives to maintain this.

**Q:** How helpful was ECDC's support for the Member States?

**A:** We had a great response rate (93%) regarding the questionnaire we sent to the Member States. All of the respondents stated that they appreciated the support from ECDC, and half of them found it 'very useful'. In all Member States there was a raised alert level, and almost all countries said that the ECDC response was consistent with its mandate. More than two thirds of the countries also thought that



From left to right: Jaran Eriksen, Greco Donato, Sandra Guedes

the interaction with ECDC and its technical productivity was sufficient. Most country press offices also found ECDC's press releases useful. However, a few countries asked for more help with guidelines and one thought ECDC should only act upon request. Overall, it seems the Member States were satisfied with the way ECDC handled the event.

## Mathematical modelling at ECDC



Meeting on modelling training organised at ECDC in 2009

Since March 2007, ECDC has in-house capacity to mathematically model the progress of infectious diseases. Currently, all modelling-related activities are run by Tommi Asikainen in the

Scientific Advice Unit. Modelling activities are not directly tied to any of ECDC's specific disease programmes or projects, but provide independent expertise the disease programmes can call on if the need arises.

Mathematical modelling work is both theoretical and practical: theoretical issues are investigated in the models themselves, while the practical application of the models covers a wide range of diseases, ranging from HIV to vaccine-preventable diseases.

Mapping and liaising with current modelling projects, both in Europe and worldwide, are a major part of the modelling work. The fact that ECDC has close ties with leading international

modellers has proved crucial at the start of the pandemic (H1N1) 2009: ECDC gathered modellers in an ECDC modelling group and put them in touch with H1N1 modelling activities conducted by WHO, which led to a very productive exchange of ideas and information among modellers.

ECDC is very keen to increase mathematical modelling activities in Europe and currently in the process of establishing a European network of modellers. At a later stage ECDC hopes to provide modelling training to experts in the EU Member States.

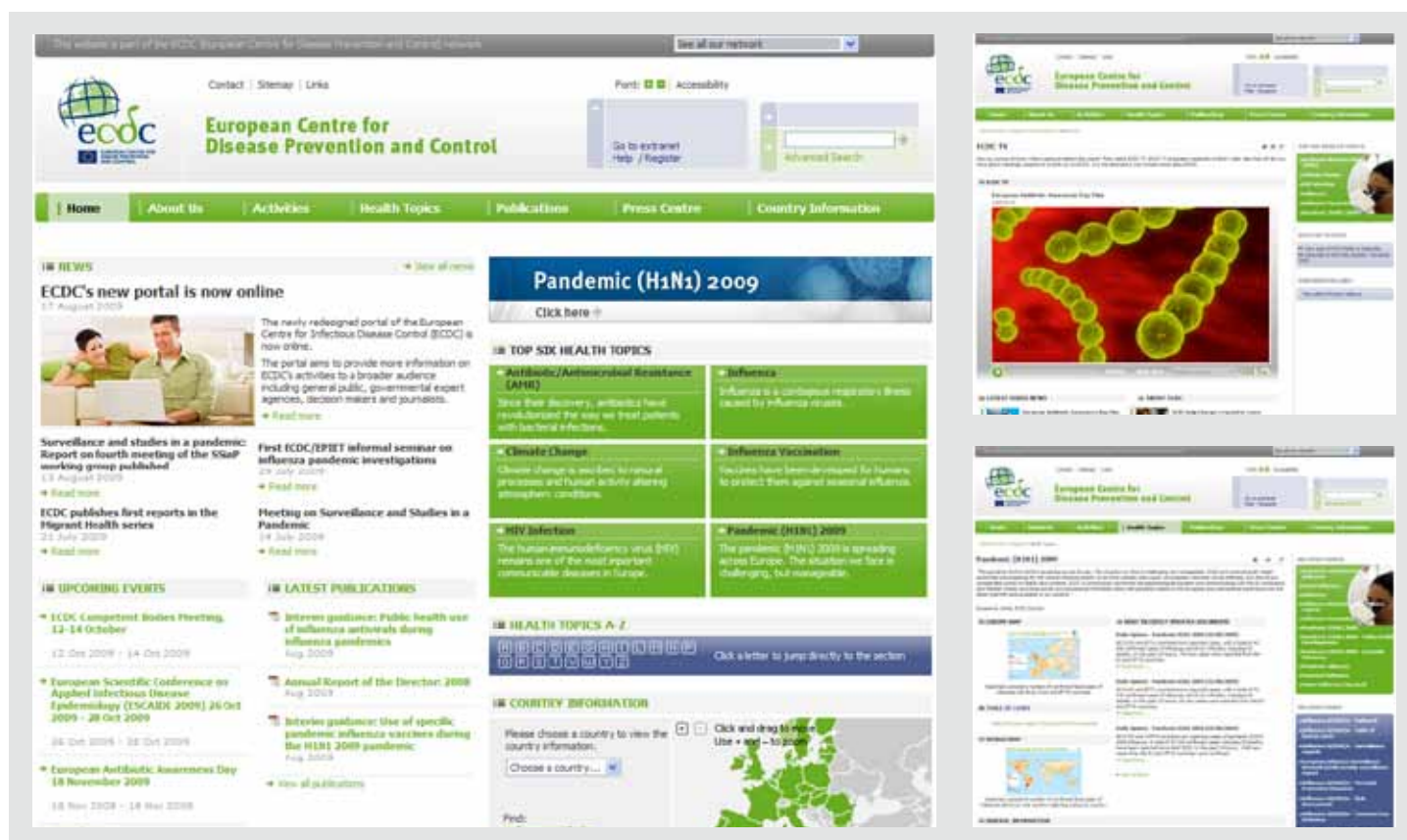
## ECDC launches chlamydia control guidance

ECDC's recently published guidance on chlamydia control in Europe is based on a study of chlamydia control activities in 29 European countries. This systematic survey found wide variation in the organisation of chlamydia control. Almost half of the countries reported no organised activity, and national control programmes were only identified in two countries. Effective resourcing and implementation of national chlamydia control strategies requires leadership and commitment from healthcare policy makers. It is therefore

an important prerequisite to adopt a national chlamydia control strategy when planning a comprehensive control programme. The ECDC guidance includes a step-by-step approach to chlamydia control in order to ensure that prevention and patient management are in place before complex interventions such as screening are considered.

ECDC's guidance document 'Chlamydia control in Europe' is available from [www.ecdc.europa.eu](http://www.ecdc.europa.eu). Search term: 'Guidance on chlamydia control.'





## ECDC's new web portal up and running

ECDC's redesigned web portal is now online. The portal aims to provide more information on ECDC's activities to a broader audience, including the general public, government expert agencies, decision makers, and journalists. The web portal also changes the way ECDC communicates: there is a marked emphasis on infectious diseases and ECDC's activities, and increasingly less on ECDC's organisational structure. This reflects ECDC's current stage of development. The Centre has now reached a level of maturity that allows it to focus less on organisational structures and processes and more on its activities and improved content delivery.

Among the portal's many improvements is the option to benefit from contextual navigation and social bookmarking. On each of the pages, an RSS feed allows readers to stay up to date with the topics of their choice.

### Increased focus on infectious diseases

When planning the new web portal, improved user access to information on infectious diseases was one of the main goals. ECDC achieved this in two different ways. Firstly, ECDC offers a selection of frequently updated health topics that are presented under the heading 'Top six health topics' on the home page. Secondly, users can search specific health topics by accessing the dynamic index

page under 'Health Topics'. In this section, diseases are listed alphabetically and by categories (diseases and conditions, pathogens, other topics). For more complex searches, there is an advanced search function.

### New 'Country Information' section

New on the 2009 web portal is a section that provides information on EU Member States. The home page features an interactive map that allows users to select a country and then access information on the health policies or public health systems of the selected Member States or EEA/EFTA countries. External links lead directly to the country's national ministries. The content of this page is regularly updated and further developed by ECDC's country team.

### Improved accessibility to ECDC's website network

By definition, a web portal collects information from a variety of sources and presents them in a unified way. ECDC's new web portal incorporates access to a number of websites recently acquired or created by ECDC. Some of these websites (EPIET, the European Influenza Surveillance Network, ESCAIDE) are now part of ECDC's website network. Links to these websites are available from a drop-down menu

at the top of the home page. Other websites may be added in the future.

### Dedicated answer to pandemic (H1N1) 2009

Since the start of the pandemic, a dedicated pandemic (H1N1) 2009 web page has proved a crucial tool in keeping public health specialists, journalists, and the general public updated on the latest developments. ECDC's Daily Update, posted in this section of the portal, is one of the key documents developed by ECDC. Documents of interest for each audience are developed and posted on this page under different subcategories. A variety of tools have been developed to meet specific demands, such as a Virtual Press Room that is open to registered European journalists.

### More to come

Later this year, ECDC plans to launch further local language versions of the web portal in all official EU languages plus Icelandic and Norwegian. Extranets (e.g. for the Advisory Forum, Management Board, Competent Bodies) are also in the pipeline. Once all additions are in place, ECDC's web portal is bound to become ECDC's main communication tool for its key partners and the general public.

Visit ECDC's web portal at [www.ecdc.europa.eu](http://www.ecdc.europa.eu).



## Launch of ECDC's new management information system

In August, ECDC launched its new management information system, just in time for the planning cycle for the 2010 work programme which will be adopted by the Management Board in

autumn. This user-friendly application not only helps us to better plan and monitor the implementation of ECDC activities for the coming years, but also allows sharing information

between projects and units in a more transparent way, thus fostering collaboration. It also helps project managers to follow up on their activities and provide ECDC management with an overview

of a project's implementation progress. A reporting function provides real-time status monitoring. Additional modules will further improve the application's functionality.

## European Antibiotic Awareness Day targets primary care prescribers

### EUROPEAN ANTIBIOTIC AWARENESS DAY



A European Health Initiative 

Primary care prescribers have been selected as the main target audience for the European Antibiotic Awareness Day 2009. This group includes mainly general practitioners, but also prescribing nurses in some countries.

It is estimated that 80–90% of antibiotic prescriptions are for common respiratory tract infections, such as colds and flu, of which a significant proportion are unnecessary. For this reason, European Antibiotic Awareness Day is seeking to encourage and empower primary care prescribers to follow prescription guidelines for antibiotics.

Working with the National Antimicrobial Resistance Focal Points, and in cooperation with the European Commission, WHO Europe, the Standing Committee of Doctors (CPME) and European Family Doctors (WONCA), ECDC has developed a toolkit of materials for national public health authorities to use in their campaigns targeting primary care prescribers.

The toolkit offers advice on how national public health authorities could engage with primary care prescribers so as to promote appropriate and responsible use of antibiotics. It includes key messages, a letter to primary care prescribers, national factsheets on antibiotic resistance, a patient leaflet and a proactive methodology for patient dialogues on antibiotics.

More information about the European Antibiotic Awareness Day is available on the European Antibiotic Awareness Day website at [antibiotic.ecdc.europa.eu](http://antibiotic.ecdc.europa.eu)

## Evaluation of ECDC communication toolkits



An evaluation of two ECDC communication toolkits was carried out by an external consultancy. The two toolkits evaluated were the 'Seasonal Influenza Communication

Toolkit' from 2007 and the 'Chikungunya Communication Toolkit' launched in 2008. The evaluation process included an expert review of the toolkit materials to assess relevance and effectiveness, as well as interviews with stakeholders in the Member States.

The results of this evaluation will provide valuable input for the development of further ECDC communication toolkits.

## Evaluation and assessment of dedicated surveillance networks completed

The evaluation and assessment of the 17 dedicated surveillance networks (DSNs) is now completed. The process started in 2005 and, once completed, was noted as the first successfully implemented step of EU surveillance standardisation. Using standard protocols, the evaluation and assessment process provided essential information in three areas (usefulness, technical performance, and achievement of objectives) related to the transfer of activities from the DSNs to ECDC.

Before transferring a DSN to ECDC, the following areas are assessed: epidemiological and laboratory activities, communication/response aspects, cooperation, and scientific work. The final decision whether to transfer a DSN's activities to ECDC is based on several factors such as the results of the evaluation and assessment, disease priority as

defined by ECDC, ECDC's staff capacity, and considerations of cost-effectiveness.

The process represented an important collaboration exercise between Member States, international stakeholders and networks. A steering group consisting of members from the European Parliament's ENVI committee, WHO/Europe, ECDC's Management Board, the Directorate General for Health and Consumers (DG SANCO) and the US CDC oversaw and assessed the process and reviewed the results of each DSN's evaluation and assessment. Thanks to the dedication of the evaluation teams, composed of experts from the Member States, ECDC's Advisory Forum and many field epidemiology training programme fellows (EPIET, FETP) the entire process could be brought to a successful conclusion in less than three years.

	Evaluation	Transfer to ECDC	Outsourced
DIVINE	2006		Not continued
ENIVD	2007		Until July 2012
EUCAST	2006		Until September 2011
EuroCJD	2007		Until May 2011
EUVAC.NET	2008		Until January 2011
ESAC	2006		Until August 2010
DIPNET	2009	End of 2009	
EWGLINET	2007	March 2010	
EARSS	2007	End of 2009	
ESSTI	2008	January 2009	
EISS	2007	September 2008	
IPSE	2007	July 2008	
EuroTB	2007	January 2008	
EuroHIV	2007	January 2008	
EU-IBIS	2007	October 2007	
Enter-net	2007	October 2007	
BSN	2006	January 2007	

## New publications

### Meeting report: European pandemic influenza planning assumptions

In January 2009, ECDC held a meeting of experts engaged in formulating pandemic influenza planning assumptions at the European level. The main objectives of the meeting were to gather the assumptions used in and within countries (national versus local perspective) and those recommended by international bodies; to determine which assumptions are useful for planners; to discuss the differences in assumptions between European countries and whether these differences are relevant; and to agree on whether a European consensus on planning assumption ranges would be useful.

### Summary of key publications 2008

This summer, ECDC published the first volume of a compilation of executive summaries taken from its most important documents, entitled 'Summary of key publications 2008'. This new annual publication is targeted at policymakers and will be translated into all official EU languages plus Icelandic and Norwegian.

'Summary of key publications 2008' contains short versions of the 'Framework Action Plan to Fight Tuberculosis in the European Union', the 'Annual Epidemiological Report on Communicable Diseases in Europe 2008', and the report 'HIV/AIDS Surveillance in Europe – 2007'.

### Technical report: Risk assessment guidelines for infectious diseases transmitted on aircraft

In the closed cabin environment of modern airplanes, passengers are frequently exposed to various infectious diseases. This report looks at 12 infectious diseases and, by systematically evaluating literature on on-board transmission, attempts to assess the risk of infection via air circulation in airplanes.

### Technical report: Guide to public health measures to reduce the impact of influenza pandemics in Europe – 'The ECDC Menu'

This document presents a menu of possible public measures to be taken during influenza pandemics, providing public health and scientific information on what is known about their likely effectiveness, costs (direct and indirect), acceptability, public expectations, and other more practical considerations. The 'ECDC Menu' aims to help EU Member States and institutions, individually or collectively, to decide what measures to apply.

For more information: [publications@ecdc.europa.eu](mailto:publications@ecdc.europa.eu)

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European Centre for Disease Prevention and Control (ECDC)

Postal address: ECDC, 171 83 Stockholm, Sweden

Visiting address: Tomtebodavägen 11A, Solna, Sweden

Phone +46 (0)8 58 60 1000

Fax +46 (0)8 58 60 1001

[www.ecdc.europa.eu](http://www.ecdc.europa.eu)

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## Upcoming events

**7–8.09.2009**

Final meeting, behavioural surveillance related to HIV and STI, Geneva, Switzerland

**7–8.09.2009**

Activities to assess and prepare for the impact of climate change on communicable disease spread in the EU, Stockholm, ECDC

**16.09.2009**

Start of the EPIET cohort #15 fellowship (2009–2011), Stockholm, ECDC

**16–17.09.2009**

Expert meeting, public health benefits of partner notification in Europe, Bern, Switzerland

**16–18.09.2009**

Simulation exercise Purple Octagon, Stockholm, ECDC

**21.09. – 16.10.2009**

EPIET introductory course 2009, Menorca, Spain

**17.09.2009**

Swedish EU Presidency conference on antibiotics, Stockholm

**22–23.09.2009**

AF meeting, Stockholm, ECDC

**22–23.09.2009**

3rd ECDC Vaccination Scientific Consultation Group Meeting (EVAG), Stockholm, ECDC

**24–25.09.2009**

First ECDC influenza A(H1N1)v modelling working group meeting, Stockholm, ECDC

**1–2.10.2009**

5th NMFP meeting, Stockholm, ECDC

**08–09.10.2009**

Technical consultation on HIV testing, Stockholm, ECDC

**12–14.10.2009**

ECDC Competent Bodies meeting, Uppsala, ECDC

**26–28.10.2009**

ESCAIDE 2009 conference

**19–21.10.2009**

AMR NFP meeting, London

**5–6.11.2009**

Management Board meeting

**18.11.2009**

2nd European Antibiotic Awareness Day

**24–25.11.2009**

Influenza working group, Stockholm, ECDC

**24–25.11.2009**

First ECDC European network of modelling contact points meeting, Stockholm, ECDC

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