

Statement of Chairman Tom Davis
Committee on Government Reform Hearing
“A Review of This Year’s Flu Season:
Does Our Public Health System Need a Shot in the Arm?”
February 12, 2004

Good morning. I want to welcome everyone to today’s oversight hearing on our public health system’s response capabilities to manage a pandemic of a contagious disease. This year’s flu season has raised the urgent question of whether our country is prepared to deal with a pandemic, be it a naturally occurring pandemic or one that results from a bioterrorist attack. Today we will examine what actions and planning procedures have been taken by federal, state, and local health officials to handle this year’s flu season and other communicable disease outbreaks. Only then can we determine the potential needs of government and health officials to respond effectively to all types of contagious disease threats.

Although this year’s flu season was not a large-scale epidemic, several thousand people have died from complications of the flu. Additionally, several thousand people were unable to be vaccinated due to limitations of the vaccine supply. While the flu virus is airborne and spreads easily, vaccination significantly decreases the risk of illness and helps prevent the spread of the flu virus.

Preparing for the annual flu season highlights the importance of strong cooperation between different health agencies and private sector companies at all levels. We need to ensure that adequate production capacities for flu vaccine manufacturers exist in order to avoid a vaccine shortage next year. Once a flu pandemic is identified, it is important to determine what the private and public sectors’ capabilities are to produce, distribute, and administer diagnostics, vaccines, and drugs for this problem. This year’s vaccine shortage begs the question: are new mechanisms and incentives needed to guarantee that effective and safe drugs, vaccines, and diagnostics can be produced as quickly as possible?

The current influenza season has challenged our public health system’s capabilities and provides us with a chance to evaluate existing procedures and safeguards. The Public Health Security and Bioterrorism Preparedness and Response Act of 2001 provided substantial new funding for states, localities, and hospitals to boost preparedness to respond to a highly contagious disease, including influenza. The legislation included new grant programs, educational efforts, state planning requirements, expansion of federal disaster teams, pandemic preparedness resources, and new authority to deal with public health emergencies. We will take a look at how these programs are being implemented and if funds are being allocated appropriately.

I understand some of our witnesses this morning will express concerns about actual preparedness levels and federal funding for states and localities. I look forward to a constructive dialogue on those concerns. I know we all share the same goal at the end

of the day— a public health system prepared to deal with an outbreak of a deadly and contagious disease.

The threat of a public health disaster emphasizes the need for planning and practice. The quicker the health community responds, the quicker a prevention and control strategy can be developed and appropriate treatments can be identified. This hearing will help recognize if any deficiencies in coordination, communication, and capacity exist and will facilitate discussion on how to work towards improvements necessary for more effective preparedness. In order to be adequately prepared, we should always be expecting the unexpected.

We have a great selection of witnesses to provide testimony this morning. Dr. Julie Gerberding and Dr. Anthony Fauci will discuss efforts being taken at the federal level to respond to the influenza virus. They will also describe preparedness coordination efforts with state and local authorities. Dr. Janet Heinrich, Director of Public Health Issues for GAO, will discuss the GAO report that was released this week regarding state and local preparedness in the event of a bioterrorism attack.

Joining us on our second panel will be Dr. Robert Stroube, the Virginia State Health Commissioner. He will be testifying today on behalf of the Association of State and Territorial Health Officials to provide an assessment of state and local public health departments' ability to respond adequately to a public health threat. Ms. Karen Miller from the National Association of Counties will provide the perspective from county and local health officials on preparedness. We also invited the three flu vaccine manufacturers to discuss vaccine production capacities and pandemic planning. Mr. Howard Pien, President and CEO of the Chiron Corporation and Dr. James Young, President of Research and Development at Medimmune, will be joining us. Unfortunately, a representative from Aventis Pasteur was unable to attend this hearing but the company has submitted written testimony for the hearing record. And finally, Dr. Shelley Hearne, Executive Director of Trust for America's Health, produced a noteworthy report that provided an assessment of improvements to the public health system and remaining vulnerabilities. We welcome all the witnesses and their testimony today.