Chief Epidemiologist for Iceland



DIRECTORATE OF HEALTH

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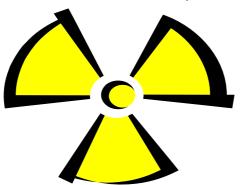
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AMENDMENTS TO THE COMMUNICABLE DISEASES ACT

On 17 March 2007, the Icelandic Parliament, the Althingi, passed an Act on important amendments to the Communicable Diseases Act concerning in particular the scope of communicable disease control. This was partly done in order to adjust Icelandic statutes with the provisions of the new International Health Regulations, adopted by the World Health Organisation, WHO, which will become a legally binding international agreement on 15 June 2007. Thus the Communicable Diseases Act now applies not only to infectious diseases but also to public health threats resulting from toxic and radioactive materials.

The amendments to the Communicable Diseases Act provide that the Chief Epidemiologist is designated as the National Focal Point for Iceland for communications with the corresponding WHO Contact Point. It is therefore his responsibility to notify any serious health threats to the WHO as well as to receive and communicate such information to the relevant parties in Iceland.

Article 11 of the Communicable Diseases Act contains provisions on the reciprocal duty of communication between the Chief Epidemiologist, Public Health Officers and Public Health Committees, the Ice-



The symbol for radioactive materials



The symbol for pathogens and biological contaminants

landic Radiation Protection Institute, the Agricultural Authority of Iceland, and the Environment and Food Agency of Iceland on possible risks of transmission or threats resulting from toxic and radioactive materials.

Cooperation Committee

The Minister of Health appoints a Cooperation Committee whose function it is to obtain the required information and supervise the necessary health measures for the assessment and eradication of transmission risks and health threats resulting from animals, foods, any economic activity, water and sewage, air conditioning and other environmental agents that may spread infectious pathogens, toxic and radioactive materials. The Committee is composed of the Chief Epidemiologist, who chairs the Committee, two members appointed by the the Agricultural Authority of Iceland, one of whom must be an expert on food safety and the other one an expert on infectious diseases of animals, one member from the Icelandic Radiation Protection Institute, and two members appointed by the Environment and Food Agency of Iceland, one of whom shall be en expert on food safety and the other one on toxic materials.

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The Committee will have access to the necessary data and to any place that it deems necessary to inspect, with the assistance of the police, if need be. The Committee is to give instructions to all those responsible for supervision of animals, foods and the environment on any immediate measures required to eradicate health threats from contagion, toxic or radioactive agents. In other respects, measures shall be implemented according to the new act and, as the case may be, in accordance with special statutes applicable to specific supervisory bodies.

Communicable disease control measures

Pursuant to the above amendments of the Communicable Diseases Act, a new regulation on communicable disease control measures has been adopted. It includes special provisions on infection control and special facilities at the Landspitali University Hospital for isolation, decontamination and disinfection. At the same time, health care institutions shall have basic preparedness equipment and knowledge relating to communicable disease control at their disposal. The regulation also provides for civil protection, special international harbours and airports, safety stockpiling, medical examinations of immigrants and travellers to the country on arrival and departure.

In all probability many States will revise their legislation and health threat systems to comply with the new International Health Regulations. The U.K. was the first to take such a

step by establishing the Health Protection Agency, HPA, whose scope covers infectious diseases, toxic and radioactive materials. The institution has already proved its value when it had to deal with the contamination from radioactive polonium-210 in London in late 2006. The methods of traditional communicable disease control by means of contact tracing were successfully combined with the methods of radiactivity tracing. The incident was certainly international in proportion as it touched a number of individuals of different nationalities, among them several Icelanders. In that case, the cooperation already in place between the Chief Epidemiologist and the HPA proved very helpful.

Last April, some serious health threats occurred among the staff building the Kárahnjúkar power station tunnel. On the one hand a number of people fell ill from intestinal infection and on the other hand from air pollution believed to have caused toxic symptoms. The incident was international in scope since the employees falling ill were all foreign nationals. There were complaints to the effect that response to these health threats was slow. It is important to examine the chain of events closely and seek ways to improve the flow of information to make it possible to respond to such events more quickly than was the case this time. Hopefully, such an investigation will be of use in organising the implementation of communicable disease control in accordance with the new statutes and regulation.

INFLUENZA VACCINES SECURED FOR ICELAND



On 4 May 2007, the Minister of Health, Siv Friðleifsdóttir, signed a contract with GlaxoSmith-Kline securing for Iceland the preemption of 300.000 doses of influenza vaccine when a pandemic influenza breaks out. The contract is

identical to a contract between Danish authorities and GlaxoSmithKline, signed in 2006, and it will be implemented by the Chief Epidemiologist for Iceland. The contract is part of an extensive programme sponsored

by the Icelandic authorities to put into place preparedness plans against an influenza pandemic that are aimed at preventing serious consequences from such an influenza. The contract is valid for three years with an option of prolonging its validity for two years.

The contract secures that Iceland will receive vaccines as quickly as possible after an influenza pandemic has been declared. However, since production of the vaccines will not be possible until such a declaration has been issued, there will be a period of four to six months from the beginning of a pandemic influenza until delivery of the vaccines.