STATEMENT OF POLICY

Stockpiling And Distribution Of Antivirals For Pandemic Influenza

Policy
Antiviral stockpiling is a significant preparedness tool for mitigation and response to pandemic influenza. The National Association of County and City Health Officials (NACCHO) is concerned about equity of access to antivirals, the logistical barriers to distributing antivirals during a pandemic, the limited extent of private-sector involvement in stockpiling antivirals, and the implications of individual home stockpiling.

NACCHO makes the following specific recommendations with regard to antiviral stockpiling:

1. The federal government should assume full financial responsibility for stockpiling and managing an adequate amount of influenza antivirals for treatment of the ill and prophylaxis of critical public and private sector healthcare workers and first responders.
   Federal preparedness funding to state and local health departments has declined in recent years, and there are an increasing number of competing priorities for this funding. All of the remaining priorities can not be supported with existing funding. For some states and localities, stockpiling antivirals is not a cost-effective use of funds. The federal government should stockpile countermeasures for pandemic influenza to protect the entire U.S. population in the same manner that it has stockpiled countermeasures against smallpox and anthrax under the auspices of the Strategic National Stockpile.

2. All state and local governmental public health departments and other public-sector agencies should have access to reduced purchase costs for influenza antivirals negotiated by the federal government. Barriers to the use of federal preparedness funds for the purchase and stockpiling of antivirals by governmental agencies should be removed.

3. Private-sector companies with the financial and occupational health capacity should stockpile influenza antivirals for essential employees providing continuity of operations during an emergency who would have a high risk of exposure to pandemic influenza, as indicated by the Occupational Safety and Health Administration’s Guidance on Preparing Workplaces for an Influenza Pandemic. Private-sector stockpiling would increase the availability of antivirals within a community during a pandemic and would reduce the financial and logistical burdens on local health departments to stockpile and dispense large quantities of antivirals for the general public. Private-sector stockpiling would contribute to efforts to protect critical infrastructure and maintain continuity of essential community services during a pandemic.

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pandemic. It would also allow greater opportunity for local health departments to focus on the distribution of antivirals to vulnerable populations that do not have access to antivirals through their employers.

4. **Impediments to private-sector stockpiling should be removed or reduced whenever possible.** NACCHO supports memoranda of understanding among governmental agencies and private-sector entities that would provide assurance that private-sector stockpiles of antivirals would not be seized by those governmental agencies for redistribution during a pandemic. Private-sector entities must communicate with local health departments and share plans for antiviral stockpiling, distribution, tracking, and employee education; a reduction in antiviral stockpiling barriers would strengthen these collaborations.

5. **NACCHO supports additional pharmaceutical industry and federal government research on the utility and practicality of a Medkit approved by the Food and Drug Administration for individual home stockpiling of antivirals.** Presently, there is no consensus among local health officials on individual home stockpiling. Additional research and evidence would provide an informed platform on which NACCHO could support or reject a public health policy on home stockpiling of antivirals for pandemic flu preparedness.

**Justification**

The federal government is currently developing guidance for state and local governmental agencies, including governmental public health agencies, as well as for private-sector employers and individuals on antiviral stockpiling and use during a pandemic. Currently, many local health departments do not have access to sufficient stockpiles for treating their populations if a severe flu pandemic occurs. Additionally, with or without adequate stockpiles, local health departments face potentially insurmountable hurdles in providing antivirals to individuals within 48 hours.

The federal government is not purchasing antivirals for 100 percent of the population, as is the case with other medical countermeasures, such as those for smallpox and anthrax. The federal government expects states to ensure an antiviral stockpile (including the expected federal contribution from the Strategic National Stockpile) for 25 percent of the state’s population, which is the percentage of the population projected to become ill during a severe pandemic. At this time, not all states have reached this target and are unlikely to do so in the near future due to financial constraints, lack of political will, and logistical hurdles.

Currently, the stockpiles available for a pandemic emergency vary widely from state to state and among private-sector entities and individuals. Uniform access should be assured. About a quarter of the states have now reached the quota needed for treatment and have also amassed additional stockpiles for prophylaxis (multi-week courses of antivirals for prevention) for public health and critical infrastructure workers. However, another quarter of the states have purchased less than 50 percent of their treatment quota. Currently, there is no constraint on the availability of antivirals for purchase.

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Antiviral stockpiling is one of many mitigation and response strategies for reducing morbidity and mortality during a pandemic; yet, NACCHO recognizes that there are limitations to antiviral stockpiling and use during a pandemic. It is not certain that current antivirals will be effective against pandemic influenza. Also, antivirals are costly and have a limited shelf-life. Local health departments must determine the cost-effectiveness of a local antiviral stockpile based upon their jurisdictions’ current and future needs.

Private-sector stockpiling of antivirals, as well as individual home stockpiling, may reduce some of the current inadequacy in access to antivirals within many states and localities. Encouraging private-sector entities to stockpile antivirals for their employees and family members helps to ensure that government-owned stockpiles will be more readily available for vulnerable populations and sends a strong message that pandemic preparedness is a community-wide responsibility. Therefore, it is important to increase the amount of antivirals available in communities for the timely treatment of those ill with pandemic influenza.

**Record of Action**
Approved by NACCHO Board of Directors
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