

# The H1N1 post-mortem

by Tanya Melillo Fenech

The H1N1 pandemic started more than a year ago at the end of March in Mexico with Malta having its first positive cases on the first of July.

Since July 2009, we had 913 persons who were positive to H1N1 with 261 cases hospitalised (207 with H1N1 and 54 with Influenza A) and from these 8 cases needed intensive care. In all, 5 died as a result of this pandemic locally. Over 91,471 residents took the vaccine and 2,700 antiviral courses have been dispensed through the government pharmacies. In retrospect one would easily conclude that a massive amount of money has been spent on a minor threat but judgment using hindsight is not appropriate when dealing with the potential risk of a public health threat. The real question that needs to be asked is what are the aims and objectives for this country if the threat of a novel influenza virus emerged and was spreading all over the world? And where the objectives for the H1N1 strategy achieved or not?

The main objectives to be achieved in Malta's response to a pandemic threat are:

1. To reduce the severity and spread of illness by judicious use of antivirals and by containment measures as far as is humanly possible;
2. To treat those severely effected with all necessary modalities of management;
3. To maintain essential services;
4. To vaccinate the population as soon as a vaccine becomes available.

All decisions taken by the Health Authorities were specifically aimed to achieve these objectives. It is the opinion of the author that they were achieved. By the time the virus hit our shores we were able to obtain first hand experience from other countries hit by the virus before us and it was evident that this virus was affecting younger age groups especially children, adolescents and pregnant women which usually are not affected by seasonal influenza and worse of all, some deaths were occurring in these age groups.

Which country would not do its utmost to save every child and pregnant woman from dying from influenza? And through the hard work of all the staff at IDCU, pharmacies, virology department, as well as MMNDA nurses and the valuable cooperation of general practitioners, paediatricians and casualty officers we succeeded in preventing any deaths in these categories. Just imagine what would have happened if a Maltese

child or pregnant woman died of H1N1. The media and the general public would obviously have hounded us for not preventing such deaths.

One has to remember that decisions had to be taken rapidly based on the limited scientific information available and political challenges posed by H1N1. Could we have reacted differently in that situation? I doubt it especially if our main priority was to limit morbidity and mortality in the Maltese population.

This time round, the Maltese Health Authorities had a plan - a pandemic preparedness plan which had been prepared way back in 2005 and revisited over the years with amendments done to reflect the changes that occurred in our health system during the past 4 years. The plan was implemented quite efficiently thanks to the cooperation and hard work of many health care workers who prioritised the health needs of the population during the pandemic.

But what would have happened if we did not have a plan? If we were not prepared for it? Probably total chaos!

Public Health officials all over the world are getting the flack for the fuss they made over the H1N1 pandemic because the media and general public argue that it did not kill many people but then, it is our job to plan and prepare for potential threats and minimize destruction and death.

What if we did not have any plans in place and had not stocked up with antivirals or ordered the vaccines and instead we had 100, 1000 or 5,000 deaths caused by H1N1, would it have been acceptable by all? I think not. We would have been greatly criticized for not preparing for such a threat and avoiding so many deaths. The next step is for us to evaluate what went right and what went wrong and redraft our plans accordingly. We have to continue preparing and planning for new threats.

One of the biggest challenges that public health officials faced during this pandemic and which we need to address is Communication - Communication with health care professionals, the media and with the general public. It is extremely challenging and difficult to alleviate people's fears and misconceptions. We need to start from now, by educating everyone.

