WHA58.5  Strengthening pandemic-influenza preparedness and response

The Fifty-eighth World Health Assembly,

Having considered the report on influenza pandemic preparedness and response;¹

Recalling resolutions WHA22.47, Diseases under surveillance: louse-borne typhus, louse-borne relapsing fever, viral influenza, paralytic poliomyelitis; WHA48.13, Communicable diseases prevention and control: new, emerging, and re-emerging infectious diseases; WHA56.19, Prevention and control of influenza pandemics and annual epidemics; and WHA56.28, Revision of the International Health Regulations; and the global agenda for influenza surveillance and control;

Acknowledging with growing concern that the evolving, unprecedented outbreak of H5N1 avian influenza in Asia represents a serious threat to human health;

Stressing the need for all countries, especially those affected by highly pathogenic avian influenza, to collaborate with WHO and the international community in an open and transparent manner in order to lessen the risk that the H5N1 influenza virus causes a pandemic among humans;

Mindful of the need to address the limited progress being made in development of influenza vaccines and transit to the production stage;

Emphasizing the importance of strengthening surveillance of human and zoonotic influenzas in all countries in order to provide an early warning of, and a timely response to, an influenza pandemic;

Noting the gaps in knowledge and the need for additional research on various aspects of the spread of influenza and for influenza preparedness and response;

Noting the importance of strengthening linkages and cooperation with the mass media;

Acknowledging that communication with the public must be improved in order to increase awareness of the seriousness of the threat that an influenza pandemic represents, and of the steps in basic hygiene that citizens can and should take in order to lessen their risk of contracting and transmitting influenza;

Emphasizing the need to strengthen collaboration on human and zoonotic influenzas with organizations responsible for animal and human health at local, national and international levels;

Aware of the need to expand the availability of influenza vaccine so that protection in a pandemic can be extended to populations in more countries, with particular attention to requirements in developing countries;

Recognizing the need to prepare for international cooperation during the initial stages of a pandemic, particularly in the event of inadequate stockpiles of vaccine and antiviral medications;

¹ Document A58/13.
Recognizing further that influenza antiviral medications will be an important component of a containment strategy, but that additional studies are required to establish their appropriate use in containment;

Recognizing also that a global stockpile of these agents is lacking and few countries have established national stockpiles,

1. **URGES** Member States:

   (1) to develop and implement national plans for pandemic-influenza preparedness and response that focus on limiting health impact and economic and social disruption;

   (2) to develop and strengthen national surveillance and laboratory capacity for human and zoonotic influenzas;

   (3) to achieve the target set by resolution WHA56.19, Prevention and control of influenza pandemics and annual epidemics, to increase vaccination coverage of all people at high risk, which will lead to availability of greater global vaccine-production capacity during an influenza pandemic;

   (4) seriously to consider developing domestic influenza-vaccine production capacity, based on annual vaccine needs, or to work with neighbouring States in establishing regional vaccine-production strategies;

   (5) to ensure prompt and transparent reporting of outbreaks of human and zoonotic influenzas to WHO’s regional offices, FAO, Office International des Epizooties, and neighbouring countries, particularly when novel influenza strains are involved, and to facilitate the rapid sharing of clinical specimens and viruses through the WHO Global Influenza Surveillance Network;

   (6) to communicate clearly to health-care workers and the general public the potential threat of an influenza pandemic and to make effective use of media and other appropriate communication channels to educate the public about effective hygienic practices and other public health interventions that may protect them from influenza-virus infection;

   (7) to strengthen linkages and cooperation among national health, agriculture and other pertinent authorities in order to prepare for, including by mobilizing resources, and respond jointly to, outbreaks of highly pathogenic avian influenza;

   (8) to support an international research agenda to reduce the spread and impact of pandemic influenza viruses, to develop more effective vaccines and antiviral medications, and to advance, among various population groups, especially people with immunodeficiencies such as HIV-infected and AIDS patients, vaccination policies and strategies, in close consultation with the communities concerned;

   (9) to contribute, as feasible, their expertise and resources to strengthen WHO programmes, bilateral country activities and other international efforts to prepare for pandemic influenza;

   (10) to take all necessary measures during a global pandemic, to provide timely and adequate supplies of vaccines and antiviral drugs, using to the full the flexibilities contained in the Agreement on Trade-Related Aspects of Intellectual Property Rights;
2. REQUESTS the Director-General:

   (1) to continue to strengthen global influenza surveillance, including the WHO Global Influenza Surveillance Network, as a crucial component of preparedness for seasonal epidemics and pandemics of influenza;

   (2) to seek solutions with other international and national partners, including the private sector, to reduce the present global shortage of influenza vaccines and antiviral medications for both epidemics and pandemics, including vaccination strategies that economize on the use of antigens, and development and licensing of antigen-sparing vaccine formulations;

   (3) to provide Member States with technical support and training in order to develop health-promotion strategies in anticipation of, and during, influenza pandemics;

   (4) to draw up and coordinate, in collaboration with public and private partners, an international research agenda on pandemic influenza;

   (5) to assess the feasibility of using antiviral-medication stockpiles to contain an initial outbreak of influenza and to slow or prevent its international spread, and, as appropriate, to develop an operational framework for their deployment;

   (6) to evaluate the potential benefit of personal protection measures, including the wearing of surgical masks, to limit transmission in different settings, especially health-care settings;

   (7) to continue to develop WHO’s plans and capacity to respond to an influenza pandemic, to be able to provide technical support, capacity building and technology transfer related to H5N1 influenza vaccines and diagnostics to developing countries, and to ensure clear communications with Member States;

   (8) to establish joint initiatives for closer collaboration with national and international partners, including FAO and the Office International des Epizooties, in the early detection, reporting and investigation of influenza outbreaks of pandemic potential, and in coordinating research on the human-animal interface;

   (9) to report to the Fifty-ninth World Health Assembly, through the Executive Board, on progress made in implementing this resolution.

   (Eighth plenary meeting, 23 May 2005 – Committee A, fourth report)