GUAM’S EXPERIENCE:
RESPONSE TO MERS-CoV CONTACT

Annette Aguon, MPA
Immunization Program
Department of Public Health and Social Services

“Assuring Infection Control in the Pacific: An Evolving Target” Conference
February 6, 2016

Financial Disclosures

Annette Aguon, MPA
• No financial relationships to disclose
Agenda

• Background
• Timeline of Events
• Response Efforts
• Challenges
• Successes
• Lessons Learned

Background

• Department of Public Health and Social Services (DPHSS) Organizational Chart
• Guam Tourism
• Situational awareness: MERS-CoV Outbreak in South Korea
  • DPHSS Preparedness Measures
DPHSS Organizational Chart

Bureau of Communicable Disease Control (BCDC)

- Epidemiology and Laboratory Capacity Program
- Foreign Quarantine/Enteric Disease Program
- HIV/AIDS Surveillance & Part B Program
- Immunization Program
- Pharmacy
- Public Health Laboratory
- Public Health Emergency Preparedness Program
- STD/ HIV Program
- TB/ Hansen’s Disease Program
Guam Tourism

Korea Market

2014 – 2015:

- Additional flight service to increase Korean Arrivals:
  - Korean Air- 4 weekly flights from Busan, Korea’s second largest city
  - United Airlines- daily Incheon-Guam direct flights
  - Jin Air upgraded equipment from a Boeing 737 (185 seats) to a 777 (355 seats).
  - Jeju Air started flights from Busan
Joint news release from Governor’s Office and the Guam Visitor’s Bureau (01/14/16):

**Highest Korea & China arrival numbers recorded**

Korea arrivals also recorded a top banner year with 427,900 visitors, an increase of 38.9% in CY2015.

---

**MERS-CoV Outbreak in South Korea**

- **Situational Awareness**
  - According to ProMed-mail post on 6/11/15, Ministry of Health and Welfare’s MERS-CoV Task Force reported
    - 4 more cases for a total of 126 laboratory-confirmed cases, including 10 deaths.
    - All 10 fatal cases had significant pre-existing co-morbidities that made them high risk

- **DPHSS Preparedness measures**
  - MERS Information: medical community; airport and airlines; and general public
  - Travel Alert distributed to inbound passengers from Korea
  - Communication with CDC Honolulu Quarantine Station for updates and guidance
Travel Alert

ATTENTION PASSENGERS ARRIVING FROM KOREA AND THE ARABIAN PENINSULA: MIDDLE EAST RESPIRATORY SYNDROME (MERS)

Cases of Middle East Respiratory Syndrome (MERS) have been identified in South Korea and countries in and around the Arabian Peninsula. MERS is a severe infectious disease with an incubation period (time elapsed between exposure to the virus and the development of symptoms) ranging from 2-14 days. Common symptoms include fever with cough, and/or shortness of breath. Occasionally people with MERS may experience nausea, vomiting, or diarrhea. Most people who acquired MERS in South Korea became infected while in a hospital or healthcare setting (either as a patient, employee, or visitor).

For your protection, the Department of Public Health and Social Services requires:

(1) If you or a fellow traveler currently have a fever and cough and have been to South Korea (or the Arabian Peninsula) in the past 14 days, you must notify the Customs and Border Protection agent during passport clearance or the Guam Customs and Quarantine Officer before exiting.

(2) Should you develop an illness with fever and cough within the next 14 days after leaving South Korea, consult a physician without delay and present this alert notice.

(3) Such illness MUST BE REPORTED immediately to the Department of Public Health and Social Services, Office of Epidemiology and Research at 735-7298 or Bureau of Communicable Disease Control at 735-7154 (8:30 a.m. – 5 p.m.) or 888-9276/727-5999 (after hours).

Version 1.1 (Jun. 5, 2015)

Tel. No.: (671) 735-7300 • 735-7102 • Fax: (671) 734-5910

Incident Summary

• June 12, 2015
  • 4:36 pm: Guam Customs and Quarantine Agency (CQA) Officer flagged by Jeju Airlines. Outbound passenger, traveling with family, restricted from boarding per notice from Korea’s Quarantine Station in Incheon.
  • 4:50 pm:
    • CQA notifies DPHSS/BCDC Acting Administrator of potential MERS contact. Nursing Administrator briefed.
    • DPHSS Director contacted by local TV station asking about a MERS case
  • 6:15 pm: DPHSS Team respond to airport. CQA moved passenger and family to Quarantine Room. Guam Airport Police brief DPHSS. DPHSS Nurse assesses passenger.
Incident Summary (cont’d)

• Passenger Details
  • Male, 39 years old, traveling with wife and 2 children.
  • Guam trip was for 4 days.
  • Admitted to a Korean hospital from May 28 – June 5, 2015 due to an injury. Hospital identified as having cared for a MERS patient around this time and was placed on lockdown.
  • Family members are not flagged for restriction.

• 8:40 pm: Guam doctor arrives and proceeds to assess then clear the passenger.

Incident Summary (cont’d)

• 9:00 - 9:45 pm:
  • DPHSS Team departs airport and reports update to DPHSS Director and CDC Career Epidemiology Field Officer (CEFO) for USAPIs.
  • CEFO calls CDC Honolulu Quarantine Station Medical Officer to report passenger was cleared.
  • Based on additional information just received, Quarantine Medical Officer recommends to not let the passenger fly since still within incubation period. Notifies DPHSS Director.
  • DPHSS Director notifies Guam Airport so accommodations can be arranged for the night.
Response Efforts

• 6/13/15:
  • Conference call with U.S. CDC Subject Matter Experts
  • Passenger is placed on U.S. “Do Not Board” Order
  • Passenger is relocated from hotel to temporary alternate quarantine location.
  • Implemented active daily monitoring twice a day
    • Until end of 14 day incubation period (6/19/15)

Response Efforts (cont’d)

• Press Releases
  • Travel Alert for inbound passengers from South Korea updated and translated into Korean
  • Developed and distributed “Guam MERS Integrated Prevention Strategy” Flyer
  • On-going communication and coordination with U.S. CDC during quarantine period
    • Removal from “Do Not Board” list after last monitoring check
Challenges

- Communication
  - No prior notification to Govt. of Guam by S. Korean Govt. of exposed travelers to Guam
  - Information leaks/rumors - conventional and social media
  - Joint Information Center not stood up.
  - Lack of coordination with public messaging/information – inaccurate statements on press releases
  - Non-use of subject matter experts input for subsequent press releases
  - Lack of pre-identified translator pool

- Existing DPHSS and Guam CQA Points of Entry Surveillance and Response Plan
  - Procedure for screening INBOUND passengers but not for OUTBOUND passengers.
Challenges (continued)

- Lack of DPHSS Medical Coverage
- Lack of physician pool for public health response
- Lack of an Alternate Isolation and Quarantine location
- Lack of an Alternate Transportation Protocol and Resources for an asymptomatic contact
- Lack of support from the Consulate-General of South Korea in Guam

Successes

- DPHSS Director’s support and assistance
- Experienced DPHSS Team
  - SARS and H1N1 incidents
- Established response plans/protocols
- Partner Agency support
  - Guam CQA
  - Guam International Airport Authority
  - Guam Memorial Hospital
  - Guam Fire Department/EMS (stand by)
  - Guam Visitors Bureau
- Governor’s Chief of Staff support
- Private medical partner’s support
Successes (continued)

- Technical Assistance and coordination with U.S. CDC
  - Guam: Career Epidemiology Field Officer; Immunization Program Public Health Advisor
  - Hawaii: NCEZID/DGMQ/ CDC Honolulu Quarantine Station
  - Atlanta: NCIRD/DVD/EB/ Respiratory Virus and Picornavirus Team
  - South Korea: Liaison (OPHR/OD) to Korea CDC
- Volunteer translators
  - Jeju Airlines representatives
  - Korean Association of Guam member
- Cooperative individual

Lessons Learned

- Designate an Alternate Isolation and Quarantine location
- Update existing Quarantine Response Plans
  - Include procedure for non-resident(s) refused travel back to country of residence
  - Incorporate Daily Monitoring procedures, based on level of risk (CDC guidance)
  - Identify Government and Contractual resources – quarantine location; transportation resources
  - Alternate Transportation Protocol and Resources for an asymptomatic contact
- Review and strengthen existing local Quarantine response laws and regulations
Lessons Learned (continued)

- At least partially activate and engage Joint Information Center
- Develop a physician pool for public health response
- Improve collaboration with Foreign Consulates
- Executive Order No. 2015-09
  - Established a Social Media Policy for the Executive Branch of the Government of Guam (all employees and volunteers)

Questions?
Contact Information

Annette Aguon, MPA
CDC Coordinator Supervisor
Immunization Program
Department of Public Health & Social Services
• Phone: (671) 735-7143
• Fax: (671) 734-1475
• Email: annette.aguon@dphss.guam.gov

Thank you!