



ADVISORY COMMITTEE ON DANGEROUS PATHOGENS

Novel A/H1N1 human influenza – public protection

Facemasks

WHO have issued guidance on the use of masks in the community setting in influenza A outbreaks (Annex 1).

The DH position on the use of face masks by the public is that, although they are aware that facemasks are being given out to the public in Mexico, the available scientific evidence does not support the general wearing of facemasks by those who are not ill whilst going about their normal activities. The best way to protect yourself and stop the spread of flu viruses is by using and disposing of tissues and washing your hands. This is part of the Catch It, Bin It, Kill It campaign.

DH have also prepared the following questions and answers in relation to this issue:

Q. Should the general public be using facemasks?

There is no conclusive evidence that facemasks protect healthy people in their day-to-day lives – and if used incorrectly, masks may even expose people to infection. Instead, we want people to focus on good hand hygiene, staying at home if they're feeling unwell with flu like symptoms, and covering their mouth when they cough or sneeze.

These are simple, proven ways of protecting yourself and others from infection. Facemasks must be changed regularly as they are less effective when dampened by a person's breath. People may infect themselves when they take off their mask by touching the outer surface, or may infect others by not disposing of old masks safely. Finally, wearing a facemask may encourage complacency. We want people to focus on good hand hygiene, staying at home if you're feeling unwell, and covering your mouth when you cough or sneeze. They are the steps we need people to follow to keep themselves and others safe from infection.

Q. Will social care workers get access to Facemasks?

We are currently making arrangements to deliver an initial and limited number of facemasks for social care staff to local PCT delivery points. Local authorities will have responsibility to make arrangements for their further distribution to providers in all sectors of social care if they are providing care to symptomatic individuals.

Q. Why are we saying health professionals should wear facemasks and not other public sector workers?

Healthcare workers will be at increased risk during any pandemic because they are likely to have close and frequent contact with infectious patients while providing vital care.

Patients who need the attention of a doctor or nurse, especially those admitted to hospital are likely to be those who are more severely ill. They shed greater quantities of virus and this may increase the risk of transmission.

We will all rely on healthcare workers if we ourselves become ill: they deserve the best support we can give them and providing facemasks to them is fully justified.

Q. If facemasks don't protect the general public, why are so many other countries advising people to wear them?

Different countries have different approaches. For example, France is encouraging the general public to buy their own supplies of masks as a precautionary measure. However, France is not stockpiling masks centrally – neither is the US.

Some people will want to buy their own masks. We're developing advice to make sure they use them safely and dispose of them sensibly to prevent infection.

Q. Should facemasks be used as part of infection control in the workplace?

Because it is not possible to produce specific guidance for every occupation, DH, HPA and CCS have developed simple and generic guidance to raise awareness of the measures that may be employed to reduce spread of infection at work.

Only on very rare occasions would facemasks be deemed an appropriate precaution, for instance possibly if someone were travelling home after suffering the onset of symptoms at work.

Vaccination

The UK Government has signed agreements with GlaxoSmithKline (GSK) and Baxter to secure supplies of up to 90 million doses of pre-pandemic H1N1 vaccine. These agreements will provide enough vaccine to protect the most vulnerable groups in the

UK population before a pandemic is likely to begin. Vaccination will be delivered at PCT level through GP surgeries or mass vaccination centres, following guidance on mass vaccination strategy for PCTs published in December 2008 by DH. The currently identified groups for pandemic influenza vaccination include: frontline health and social care workers, children under 16, older people and those clinically at risk. However, the priority groups will be reviewed in light of emerging evidence on the virulence and severity of the new virus in different groups.

In the event of a Phase 6 pandemic being declared, Advanced Purchase Agreements (APAs) previously signed with Baxter and GSK will be activated, and enable the UK to purchase enough vaccine to cover 100% of the UK population.

Action: This paper is for information though comments from Members are welcome.

Secretariat

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