

FIFTH MINISTERIAL MEETING ON THE GLOBAL HEALTH SECURITY INITIATIVE

PARIS, FRANCE, DECEMBER 10TH, 2004

1. Improving global health security is and will remain a priority for us. We commit to a collaborative and complementary approach in continuing our work with other international organizations, in particular the World Health Organization. We have achieved significant progress over the past three years and we met today to advance our work on several fronts.
2. We welcomed the report from the Global Health Security Laboratory Network, led by Canada, which held a workshop on the transportation of infectious substances. This workshop included international transportation regulators and operators from the UN Sub-Committee of Experts on the Transportation of Dangerous Goods, the International Civil Aviation Organization, and the International Air Transport Association. This is an important step to ensure ongoing engagement by our health ministries in providing public health expertise and guidance to international transport organizations.

Following last year's successful laboratory evaluation of smallpox detection assays, the Network evaluated the effectiveness of anthrax detection assays at a workshop hosted by the United Kingdom. We are pleased with the findings that our laboratories have robust and sensitive assay systems for detecting anthrax. Similar workshops are planned on plague, tularaemia, and environmental sampling. In addition, Germany will host a workshop in 2005 on electron microscopy for the detection of viral agents.

3. Led by Canada and the United Kingdom, significant progress has been made in implementing recommendations from Exercise Global Mercury - the smallpox outbreak simulation exercise conducted in 2003 to assess health emergency communications among our governments. Of particular note, we have created an around-the-clock (24/7) Emergency Contact Network and protocol for emergency communications. Tests of this Network conducted to date indicate that a protocol for immediate contact among our health ministries and organizations is an essential component for rapid international communications in emergencies, and will be kept current through emergency communications drills.

We commended the United Kingdom on progress made in enhancing our ability to manage and communicate risks through a consolidated guidance document on the use of the Risk Incident Scale. This document will be completed in early 2005. We are committed to improvements in the interoperability of our communications capabilities. In addition, our understanding of risk management has benefited from sharing national smallpox exercises, and policies on blood donation and blood supply following smallpox vaccination.

4. We reiterated that the deliberate release of smallpox, particularly in a country lacking prompt access to adequate vaccines, has the potential to pose an enduring threat to global public health. For this reason, we welcomed and supported the framework for the Global Smallpox Vaccine Reserve developed by the World Health Organization for acquiring and releasing smallpox vaccine for emergency response to an outbreak. We thanked the WHO for its efforts, and encouraged other WHO member states to consider contributing to the reserve as some Global Health Security Initiative members have done.

5. We thanked Japan for its leadership of the Working Group on Chemical Events, and emphasized the importance of this group's work on health preparedness and response against chemical threats. We endorsed the proposed action plan of the Working Group, including

testing of public health preparedness and response capacities, for example, through exercises using selected scenarios. We commended the Working Group's progress in developing common criteria to identify chemicals of highest priority that require further international collaboration in research and public health response planning. We accepted the offer of Germany to host a workshop in May 2005 on public health aspects of chemical events.

6. In 2002, we created a working group on pandemic influenza in order to address critical issues for effective preparedness and response. Recent events related to avian influenza have heightened concerns related to pandemic influenza. We are committed to working with the WHO on pandemic influenza preparedness, and acknowledge the importance of enhancing WHO surveillance and outbreak response activities.

Today we are pleased to note:

- Canada and the United Kingdom co-hosted a workshop that assessed the use of antiviral drug strategies, their impact and cost-effectiveness, and identified research gaps in this area. We endorsed the report from this workshop, and agreed to continue work on the optimal use of antiviral drugs for pandemic influenza.

- The leadership role WHO has taken on issues related to vaccine development and production. The United States conducted a review of intellectual property issues that serves as a useful source of analysis in this area. WHO will continue to work with manufacturers and countries with regard to issues that could stand in the way of vaccine production.

- The work on completing a survey and analysis of clinical studies on pandemic vaccines, including strategies for increasing the number of influenza vaccine doses. This initiative will improve global communication and coordination and identify gaps to be addressed.

- The systematic sharing of our pandemic influenza preparedness plans and lessons learned in order to identify and fill any possible key gaps in these plans.

- The offer from the United Kingdom to host a workshop on modeling pandemic spread and control strategies, and to hold the first international tabletop exercise of its kind focusing on containing and preventing international spread of a potential influenza pandemic. These activities will inform our work on how to make the most effective use of vaccine supplies.

7. We recognized the importance of capacity building, including training, for national and international preparedness and response to outbreaks due to emerging infectious diseases or deliberate or accidental release of infectious agents. We agreed that France and Germany would lead a process of collaboration with WHO to identify approaches for enhancing capacity in developing countries.

8. Considering that field epidemiology, including outbreak investigation, provides the necessary action to assess and deal with public health emergencies, we thanked Mexico for hosting a workshop in June 2004 as a first step to improve the capability to respond to such incidents of international concern. We agreed to continue work on this issue in order to develop a common approach for addressing such emergencies and welcomed the offer by Mexico to host a Second Workshop on Best Practices and Coordination in Field Epidemiology and Outbreak Investigation.

9. We emphasized the importance of strengthening our national and international efforts on public health emergency response and the medical management of radiological and nuclear threats. In November 2004, France took the initiative in hosting a meeting on this issue, and

established a network of experts exclusively for radio-nuclear issues to improve public health preparedness and response among our countries. Today we called for development of an international tabletop exercise that will provide us with lessons learned and recommendations for future steps.

10. We took note of the progress by the European Commission in creating a research platform, including plans for an experts' workshop in 2005, which will identify current and future priorities and how we will collaborate to address them.

11. In response to our commitment to share more fully appropriately designated information and outcomes with other countries, we have endorsed the creation of a public Global Health Security Initiative website. This website will be operational by the Summer 2005.

12. We agreed to meet in Rome, Italy in the Autumn of 2005.

This statement was endorsed by:

- Mr. Ian Shugart, Assistant Deputy Minister, Health Canada, on behalf of The Honourable Ujjal Dosanjh, Minister of Health, Canada
- Mr. Markos Kyprianou, Commissioner of Health and Consumer Protection, European Union
- L'honorable Philippe Douste-Blazy, Ministre des Solidarités, de la Santé et de la Famille, France
- The Honourable Ulla Schmidt, Federal Minister for Health and Social Security, Germany
- Professor Girolamo Sirchia, Minister of Health, Italy (in absentia)
- Mr. Hiroyoshi Nishi, Senior Vice-Minister for Health, Labour and Welfare, Japan
- The Honourable Julio Frenk, Minister of Health, Mexico
- The Rt. Honourable Dr. John Reid, Secretary of State for Health, United Kingdom
- The Honourable Tommy G. Thompson, Secretary of Health and Human Services, United States