06-ID-03

Committee: Infectious Disease

Title: Guidelines for U.S.-Mexico Coordination on Epidemiologic Events of Mutual Interest

Statement of the Problem:
Several binational infectious diseases outbreaks that have occurred over the last 10 years have prompted concerns about insufficient binational coordination in epidemiology and surveillance. Some examples of these outbreaks that have exemplified existing coordination challenges include the following:

- *Coccidioidomycosis in U.S. travelers to Baja California, 1996, and Sonora, 2000*
- *Dengue in Texas and Tamaulipas, 1999, and 2005*
- *Hepatitis A associated with frozen strawberries, 1997, and associated with green onions, 2003*
- *Histoplasmosis in Acapulco, 2001*
- *Salmonella poona associated with cantaloupes, 2000-2002*
- *Salmonella typhimurium associated with Mexican soft cheese, 2004-2005, in California*
- *Shigella sonnei associated with fresh parsley, 1998*

The Council of State and Territorial Epidemiologists (CSTE) has passed two previous resolutions related to the cooperation between the U.S. and Mexico on epidemiologic surveillance. The first was passed in 1998 and recommended the formation of a disease surveillance network along the US-Mexico border to share information in this region with many sister cities and a high volume of border crossings. As a result of this resolution, the Border Infectious Disease Surveillance (BIDS) project was initiated in 1999 by the Centers for Disease Control and Prevention (CDC), the Mexican Secretariat of Health and state and local health departments in US and Mexico border states. The project has established a network of sentinel surveillance sites, with local and state epidemiologists and public health laboratories gathering data on clinical syndromes of mutual interest. These syndromes include febrile exanthems, hepatitis, febrile neurologic illness, undifferentiated fever, influenza-like illness and vesiculopustular rash. Associated laboratory testing algorithms were also developed to diagnose illnesses of public health importance such as measles, rubella, hepatitis A,B,C, D, and E, West Nile Virus, dengue, rickettsial disease, influenza, and varicella. BIDS has also enhanced epidemiology and laboratory infrastructure in the region and contributed to bioterrorism preparedness and planning along the border including facilitating the invitation of Mexico to join the Laboratory Response Network. BIDS has also linked key Mexican public health epidemiologists and laboratory scientists to the Epi-X system.

A second resolution related to enhancing epidemiologic cooperation between the US and Mexico was passed by CSTE in 2002. This resolution recommended the drafting of guidelines to define the epidemiologic conditions and circumstances that should lead to timely cross-border binational sharing of information and the mechanisms for doing so. This resolution was passed with the background understanding that while many precedents existed for sharing of important epidemiologic data for public health and disease control including BIDS, that often the data sharing was not systematic and timely and that occasional misunderstandings had arisen between the public health communities of the U.S. and Mexico because of incomplete communication.

The 2002 CSTE resolution encouraged the U.S. and Mexico Binational Commission Core Group on Epidemiology to draft a set of guidelines in order to improve the communication of epidemiologic activities and reducing the misunderstanding across national jurisdictions. The draft, entitled Guidelines for US Mexico Coordination on Epidemiologic Events of Mutual Interests", was created with assistance of state and local partners. This document has focused in its initial version on infectious disease notification and cooperation in bioterrorism preparedness.

The document includes sections on general principles, legal framework, scope of epidemiologic events, specific guidelines with respect to binational cases and outbreaks, food-borne outbreaks, bioterrorism, laboratory issues, and public health communications. This first version of the "Guidelines" was completed in 2005-2006, and is consistent with and complements the new WHO International Health Regulations that call for bilateral agreements to supplement and enhance the new international regulations which primarily focus on public health emergencies.

Since the initiation of the project, additional circumstances have further underscored the need for both the U.S. and the Mexico public health systems to approve and implement the "Guidelines." Ongoing concerns about bioterrorism have resulted in federal "Early Warning Infectious Disease" funding to improve infrastructure and systems for cross border information sharing and cooperative responses to infectious disease outbreaks on both the southern and northern borders of the U.S. Further, the emergence of a new strain of avian influenza, H5N1, has lent urgency to international efforts to prepare for the contingency a possible new influenza pandemic. In North America, the U.S., Mexico and Canada have agreed to cooperate through the Security and Prosperity Partnership in pandemic influenza preparedness. The "Guidelines" will provide important structure and framework for systematic international information sharing and collaborative response needed for epidemiologic early warning and monitoring of infectious disease outbreaks including pandemic influenza. Canada is also in the process of reviewing the "Guidelines" document and has indicated a willingness to consider adopting a North American approach to epidemiologic cooperation along these lines. The intention is to incorporate pandemic influenza as the first of a number of specific diseases with implementation protocols or appendices for the "Guidelines."

Statement of the desired action(s) to be taken:
CSTE recognizes the interest that states have in cooperating with Mexico to receive and provide timely reports about epidemiologic events of mutual public health importance, and to cooperate in binational investigation, response and follow up of such events. In addition, CSTE recognizes the appropriate federal role of spearheading the development of guidelines and their usefulness to systematize the exchange of information and mechanisms for collaboration.

CSTE has reviewed and endorses the document produced by the U.S. – Mexico Binational Commission Core Group on Epidemiology and Surveillance known as "Guidelines for US Mexico Coordination on Epidemiologic Events of Mutual Interest" (see attached).

CSTE encourages CDC to finalize and fully implement the "Guidelines for US Mexico Coordination on Epidemiologic Events of Mutual Interest" as soon as possible.

CSTE encourages CDC and the Mexico Secretariat of Health to draft and implement disease specific protocols for sharing information on priority notifiable diseases, such as novel strains of influenza with potential for pandemic spread by the end of 2006. CSTE will be a willing partner in drafting and implementing these protocols.

Public Health Impact:
The adoption of guidelines for US-Mexico coordination on epidemiologic events of mutual interest will result in significant improvements in the timeliness and clarity of communication of accurate epidemiologic information between appropriate public health authorities in the U.S. and Mexico. Moreover, it will result in more adequate public health response to prevent and control disease among binational populations. Adoption of the guidelines will also result in better understanding between officials and the populations of both countries, therefore, improving mutual trust, confidence, and providing a clearer picture of the epidemiologic situation affecting the two nations. For these reasons, establishing and implementing clear mechanisms and protocols for public health communications between the two countries is of paramount importance.

Coordination:

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