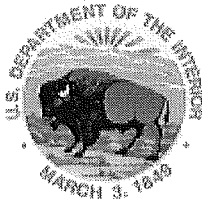


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United States Department of the Interior

U.S. GEOLOGICAL SURVEY

National Wildlife Health Center

6006 Schroeder Road

Madison, Wisconsin 53711-6223

August 14, 2008

Mr. Patrick J. McConnon, MPH
Executive Director
Council of State and Territorial Epidemiologists
2872 Woodcock Blvd, Suite 303
Atlanta, GA 30341

Dear Mr. McConnon:

I am pleased to be asked by the Executive Committee of the Council of State and Territorial Epidemiologists (CSTE) to respond to the position statement entitled "NASPHV/CSTE Resolution on One Health" (08-EC-01) adopted at your annual conference held on June 12, 2008. As Director of the U.S. Geological Survey's National Wildlife Health Center (NWHC) in Madison, Wisconsin, I enthusiastically support the One Health concept and the CSTE resolution. For nearly 35 years, the NWHC has investigated disease in and intoxications of wildlife in the U.S. and around the world. With the increasing recognition that wildlife can serve as reservoirs of zoonotic pathogens of humans and domestic animals, such as West Nile Virus or Highly Pathogenic Avian Influenza, our experience has guided us to work closely with public health, veterinary medical, and environmental health practitioners and specialists. Our experience includes:

- Demonstration of the relationship between lead poisoning of wild birds, particularly waterfowl, and the use of lead shot and lead fishing weights. This has contributed to control efforts in lead-contaminated wetland and upland areas from lead shot and the banning of small lead fishing weights by some states in the U.S..
- Conducting surveillance for the West Nile Virus epizootic in the U.S. through diagnostic testing of dead birds and mapping of the occurrence of the virus in humans, domestic animals, and other surveillance species. USGS scientists are conducting research on the potential use of WNV vaccines on wild birds in an effort to reduce the risk of the disease to humans, and domestic and wild animals.
- Conducting surveillance, diagnostic, genetic, and experimental studies on the Highly Pathogenic Avian Influenza (A H5N1) virus that has to date affected millions of domestic and wild birds and has affected and killed several hundred people.

- Establishment of the Wildlife Disease Information Node (WDIN) that provides an entry point to wildlife disease information contained in the National Biological Information Infrastructure [<http://wildlifedisease.nbi.gov>]. This Web-based wildlife disease monitoring and reporting system provides state and federal resource managers, animal disease specialists, veterinary diagnostic laboratories, physicians, public health workers, educators, and the general public with access to standardized and quality-controlled data on wildlife diseases, mortality events, and other critical related information.
- Providing field and laboratory diagnostic and management support to wildlife resource managers and animal disease specialists to identify and manage animal disease outbreaks in the U.S.

In conclusion, I appreciate you taking the time to seek our input and support. If you have questions or comments regarding this letter, please don't hesitate to contact me.

Most Sincerely,

A handwritten signature in black ink, reading "Leslie A. Derauf MD". The signature is fluid and cursive, with the "MD" clearly visible at the end.

Leslie A. Derauf, VMD
USGS National Wildlife Health Center
Center Director



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United States
Department of
Agriculture

Animal and Plant
Health Inspection
Service

Veterinary Services

Washington, DC
20250

Patrick J. McConnon, MPH
Executive Director
Council of State and Territorial Epidemiologists (CSTE)
National Headquarters
2872 Woodcock Boulevard I Suite 303
Atlanta, Georgia 30341

AUG 8 2008

Dear Mr. McConnon:

Thank you for your letter of July 21, 2008, and the copy of your resolution on the One Health Initiative. Cindy Smith, Administrator of the Animal and Plant Health Inspection Service, asked me to respond on her behalf.

Veterinary Services (VS) applauds the One-Health Initiative. As you know, our mission is to safeguard animal health, and we consider our mission and the One Health Initiative to be interlinked. More and more, VS programs are utilizing this approach by working with our partners in public health, food safety, and wildlife management. We recently pledged our support for the One Health concept by joining the One Health Joint Steering Committee of the American Veterinary Medical Association.

VS is committed to the One Health Initiative. Thank you again for writing.

Sincerely,

John R. Clifford
Deputy Administrator
Veterinary Services



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Centers for Disease Control
and Prevention (CDC)
Atlanta GA 30333

SEP 19 2008

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Patrick J. McConnon, M.P.H.
Executive Director
Council of State and Territorial Epidemiologists
2872 Woodcock Boulevard, Suite 303
Atlanta, Georgia 30341-4015

Dear Mr. McConnon:

Thank you for your letter regarding the Council of State and Territorial Epidemiologists (CSTE) position statement 08-EC-01 entitled "NASPHV/CSTE resolution on One Health." Please excuse the delay of this response.

Following is the Centers for Disease Control and Prevention's (CDC) response to the CSTE position statements: 08-EC-01.

CDC concurs with and fully supports the CSTE recommendation of the adoption of the resolution endorsing One Health and would suggest the changes noted below. CDC believes that a holistic, comprehensive, and multi-disciplinary approach is needed to effectively address the existing, emerging, and re-emerging infectious disease threats to our world today. Active engagement with disease, not only as it exists within the human domain, but also as it relates to the animal and physical domains, is essential.

Suggested changes:

- 1) Resolved, That NASPHV/CSTE support an initiative designed to promote collaboration among human and veterinary medicine **and public health professionals in other scientific disciplines (i.e., including but not limited to environmental scientists, mammologists, entomologists, and pathologists).**
- 2) Resolved That NASPHV/CSTE support joint educational efforts between **medical and veterinary medical schools and other pertinent scientific disciplines (i.e., including but not limited to environmental scientists, mammologists, and entomologists).**
- 6) Resolved, That NASPHV/CSTE support joint efforts in the development and evaluation of new diagnostic methods, medicines, and vaccines for the prevention and control of diseases; (deleting "across species").

Public Health Impact:

Improved public health outcome through a more integrated approach to **education, practice, and research across all species;** (and deleting "medical").

I appreciate the opportunity to provide a response to CSTE's position statement and applaud your commitment to these important public health issues. I look forward to continued collaboration with CSTE regarding public health issues of mutual concern.

Sincerely,


Julie Louise Gerberding, M.D., M.P.H.
Director

Author progress report: 08-EC-01 "State-level Environmental Disease Epidemiology Capacity"

Prepared by: Martha Stanbury, Michigan Department of Community Health

Date: April 27, 2009

The lead recommendation of this position statement was to strengthen environmental epidemiology capacity in states. Since the resolution was passed in June 2008, five activities have occurred at CDC/National Center for Environmental Health (NCEH) and CSTE which support this recommendation, although they cannot necessarily be attributed directly to the Position Statement itself. (It should be noted that there was no written response provided by CDC to CSTE.)

- 1) The level of interaction between the CSTE environmental subcommittee leadership and environmental epidemiology leadership at NCEH has increased, including a face-to-face meeting in July 2008, conference calls, a planned webinar, and enhanced plans for the environmental part of the CSTE annual meeting in June 2009.
- 2) Following the July 2008 meeting, NCEH identified some additional funds to promote environmental work at CSTE. In part, these funds have supported continuation of the development and piloting of environmental public health indicators, most notably indicators for "climate change". A manuscript describing the climate change indicators has been accepted for publication pending revisions. A workshop on the indicators and on the Environmental Public Health Tracking (EPHT) program has been scheduled on the Sunday before the CSTE 2009 annual meeting.
- 3) Funds were identified to add one CSTE epidemiology fellow in environmental epidemiology to the two already funded for the class starting in 2009.
- 4) Additional funds were obtained from Congress to increase funding (FY '09 funds) to states for Environmental Public Health Tracking (EPHT), both to add funds to existing EPHT states and to add five new states. The RFA for new states is expected to be announced shortly. (There may also be "stimulus funds" for more EPHT activities, but this has not been determined at this point.)
- 5) CSTE is increasingly being seen as an important partner in strategic planning for environmental health, resulting in 8 consultancy invitations with CDC/NCEH, including disaster/radiation epidemiology and the "National Conversation on Public Health and Chemical Exposures."

CSTE needs to continue to maintain the communications with NCEH in order to promote support for state-based environmental epidemiology initiatives. The role of CSTE and the CSTE Environmental Epidemiology Subcommittee in the EPHT initiative is still not clear; it is hoped that on-going communications and activities will help to clarify this issue. Another CSTE/NCEH leadership meeting is being considered for July 2009.