The CSTE National Office asked Bob Rolfs, State Epidemiologists of Utah, to represent CSTE at the Epi-X Editorial Board Annual Meeting in Atlanta, GA held on October 29, 2003. Below are six key points taken from the meeting.

1. EpiX is beginning to enroll local health department (LHD) participants directly. They will initially have reader status only. The question of giving them contributor access was raised several times. It seemed clear that in at least some jurisdictions, the LHD feel that they are inappropriately restricted from full use of this communications mechanism by their State Epidemiologist. As you know this is a complicated issue that gets to the heart of our complicated system of federal/state/local government public health agencies. However, I think that there is much to be gained by appropriately including LHD in this system and much to be lose by ignoring that desire. I think that CSTE could proactively encourage State Epidemiologists to open this route of communication to their LHD.

2. Access to EpiX was requested for Mexican border health departments, FDA, and EPA. In each case, the suggestion was made to use a trial period with a limited number of participants to evaluate the impact.

3. A cross-cutting issue for several of the issues discussed was how to assure that EpiX remains a safe place for epidemiologists to communicate potentially sensitive information.

4. The importance of assuring that State Epidemiologists and at least one designated backup have off-hours contact information on EpiX and that this is kept current.

5. An interesting discussion of the Global Public Health Information Network (GPHIN). I missed part of this due to a phone call, but it is a joint venture by Health Canada and WHO to establish a system for early warning and epidemic intelligence based on sophisticated automated monitoring of media, journals, and other related information.

6. They are planning on conducting tests of the ability of EpiX to reach key responders at state level (e.g., state epi, health officer, BT response coordinator, LRN contact, etc.).