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**PROGRESS REPORTED IN INFECTIOUS DISEASE SURVEILLANCE BUT
GAPS REMAIN, ACCORDING TO RESEARCHERS AT THE
MAILMAN SCHOOL OF PUBLIC HEALTH**

July 16, 2007 -- The key to control any pandemic is early identification and rapid response. Although considerable progress has been made in global infectious disease surveillance, few scientists are optimistic that an effective early warning system is in place, and many gaps remain, according to researchers at Columbia University's Mailman School of Public Health. A paper entitled "Global Infectious Disease Surveillance and Health Intelligence," in the July/August issue of *Health Affairs*, calls for increasing resources for improved coordination and sharing of information, and additional research to develop the most rigorous triggers for action.

Current concerns about the spread of infectious diseases, especially unexpected, emerging infections, have renewed focus on the critical importance of global early warning and rapid response. "The development of effective, interconnected systems of infectious disease surveillance is essential to our survival," said Stephen S. Morse, PhD, associate professor of clinical Epidemiology in the Department of Epidemiology at the Mailman School, and the paper's author. "Fortunately, while the increasing availability of communications and information technologies worldwide does offer new opportunities for reporting even in low-capacity settings, resource constraints remain the missing elements for much of the world." These information technologies include the Program for Monitoring Emerging Diseases (ProMED), a scientist-to-scientist network connecting more than 30,000 subscribers in 155 countries, and the World Health Organization's Global Outbreak and Response Network (GOARN).

According to Dr. Morse, it is likely that the emergence of "novel" infections such as SARS, H5NI influenza and HIV/AIDS will continue and possibly even increase in the

future, making early warning increasingly critical. “Unfortunately the outlook for global surveillance capabilities is variable in most of the world and varies from weak to virtually nonexistent.” He attributes the limited global capabilities to a combination of factors including health’s low priority on government agendas and the delayed reporting of disease information. “Governments are often reluctant to report disease information for fear of political embarrassment, economic repercussions, or concern that it may make the government look ineffectual,” noted Dr. Morse. He also suggests that infectious disease activities may fall victim to overall competition for limited public health resources.

Despite some progress many more improvements are needed, believes Dr. Morse. He outlines the following recommendations:

- Coordinating reporting systems worldwide to ensure compatible standards for aggregating and sharing data. The new WHO International Health regulations may provide an opportunity to develop a consistent worldwide system;
- Encourage improvements by providing additional resources;
- Further encourage clinicians and health officials to report by providing useful feedback;
- Train local people to recognize and report outbreaks where clinicians are in short supply; and
- Educate policymakers to consider disease surveillance a priority.

The full paper is published in Volume 26, Number 4 of *Health Affairs*. The research was funded by the Centers for Disease Control and Prevention and the National Institute of Allergy and Infectious Diseases.

About the Mailman School of Public Health

The only accredited school of public health in New York City, and among the first in the nation, Columbia University's Mailman School of Public Health provides instruction and research opportunities to more than 950 graduate students in pursuit of masters and doctoral degrees. Its students and more than 300 multi-disciplinary faculty engage in research and service in the city, nation, and around the world, concentrating on biostatistics, environmental health sciences, epidemiology, health policy and management, population and family health, and sociomedical sciences.

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