Current notes

WHO recommendations - northern hemisphere influenza vaccines 2018-2019

52/0801 On 22 February 2018, the World Health Organization (WHO) published recommendations on the composition of the trivalent and quadrivalent vaccines for the 2017/18 northern hemisphere influenza season. WHO recommends that quadrivalent influenza vaccines should contain the following:

- an A/Michigan/45/2015 (H1N1)pdm09-like virus;
- an A/Singapore/INFIMH-16-0019/2016 (H3N2)-like virus;
- a B/Colorado/06/2017-like virus (B/Victoria/2/87 lineage); and
- a B/Phuket/3073/2013-like virus (B/Yamagata/16/88 lineage).

WHO has also recommended that the influenza B virus component of trivalent vaccines for use in the 2018-2019 northern hemisphere influenza season be a B/Colorado/06/2017-like virus of the B/Victoria/2/87-lineage.

As in previous years, national or regional authorities approve the composition and formulation of vaccines used in each country and will be responsible for making recommendations regarding the use of the vaccine.


Avian flu advice - travel to China

52/0802 Public Health England (PHE) has reminded current travellers to China to avoid contact with live poultry, and not to visit live bird or animal markets, because of the small but ongoing risk of contracting avian influenza. A small number of human cases are being reported in the region and numbers are expected to increase.
Human cases of avian influenza arise following close contact with infected poultry or other birds and the majority of human cases in China were infected in this way. Human cases have occurred across mainland China and Taiwan, and small numbers from Hong Kong SAR residents who had travelled to mainland China.

The PHE advice is:

- to avoid visiting live bird and animal markets and poultry farms;
- to avoid contact with animal waste or untreated bird feathers;
- not to eat or handle undercooked or raw poultry, for example, duck dishes;
- not to pick up or touch dead or dying birds;
- not to bring any poultry products back to the UK;
- to wash hands regularly with soap, or to use alcohol-based hand rubs.

UK-based travellers experiencing flu-like illness within 10 days of returning from these areas are advised to mention their recent travel when contacting their GP or NHS 24.


BCG vaccines: WHO position paper

52/0803 The current issue of the Weekly Epidemiological Report (WER - available at http://www.who.int/wer/2018/wer9308/en/) contains an updated position paper replacing the 2004 WHO position paper on Bacille Calmette-Guérin (BCG) vaccine and the 2007 WHO revised BCG vaccination guidelines for infants at risk for HIV infection. It incorporates recent developments in the field of tuberculosis, provides revised guidance on the immunisation of children infected with HIV, and re-emphasises the importance of the BCG birth dose. This position paper also includes recommendations on the use of BCG for the prevention of leprosy. Recommendations on the use of BCG vaccines were discussed by SAGE in October 2017; evidence presented at the meeting can be accessed at: www.who.int/immunization/sage/meetings/2017/october/presentations_background_docs/en/.

European Region - emergency preparedness and response

52/0804 A three-day high-level meeting, hosted and financially supported by Germany, concluded in Munich on 15 February 2018, marking a milestone in preparing for and responding to the ever more complex and demanding health emergencies of our times.

Over 150 representatives from 43 countries - all of which are signatories of the International Health Regulations (IHR) - and international organisations debated effective ways to accelerate the implementation of the IHR as a means to better equip countries to deal with emergencies. In particular, they discussed synergies among three major areas: IHR core capacities, health systems and public health functions, and antimicrobial resistance (AMR).
While responsive health systems are an integral part of IHR implementation, efforts to strengthen the IHR core capacities also contribute significantly to improving health systems’ resilience, in a virtuous circle. At the same time, addressing AMR is a priority, given that the increase in resistant bacteria can make disease outbreaks more difficult to control and can increase the burden on health systems.

The cross linkages between IHR, health systems and public health functions are central to the European Region’s first action plan on emergency preparedness and response, which was initiated in Munich. The five-year European Action Plan to Improve Public Health Preparedness and Response (2018-2023) draws on the draft global strategic plan and is based on three pillars:

- preparedness: building, maintaining and strengthening IHR core capacities;
- response: enhancing event management according to IHR requirements;
- monitoring and evaluation: measuring progress and promoting accountability on IHR implementation.


### Emissions of air pollutants in the UK, 1970 to 2016

**52/0805** On 15 February, the UK Department for Environment, Food & Rural Affairs (Defra) released a publication detailing UK emissions of sulphur dioxide, nitrogen oxides, non-methane volatile organic compounds, ammonia and particulate matter.

Air pollution poses the biggest environmental threat to public health. Short-term exposure to elevated levels of air pollution can cause a range of effects including exacerbation of asthma, effects on lung function, increases in hospital admissions and mortality. Epidemiological studies have shown that long-term exposure reduces life-expectancy, mainly due to increased risk of mortality from cardiovascular and respiratory causes and from lung cancer. It is a particular threat to vulnerable groups, including the elderly, to the very young, and to those with existing health issues, like respiratory problems.

The National Atmospheric Emissions Inventory contains information on emissions and methodology for a wide range of air pollutants, as well as hosting a number of reports including the devolved administrations’ air quality pollutant inventories.

The estimation methodology is regularly developed to take account of new emission factors and modelling methods. This means the whole time series is revised annually. The figures given in this document and the supporting dataset show the revised estimates.

Climate change and food safety – EFSA survey

52/0806 The European Food Safety Authority (EFSA) considers the identification of emerging food safety issues as an important part of its work. As climate change is increasingly reported as having an impact on all areas of food production, affecting EFSA’s scientific work, the agency has launched a new project: the CLEFSA project (Climate change and Emerging risks for Food Safety).

CLEFSA is intended to develop a method for identifying emerging risks related to climate change. It is hoped that it will also allow EFSA to rank and prioritise risks in food and feed safety, plant and animal health. The survey is the first step and the goal is to collect a list of potential emerging issues. Anybody with an insight on this topic - from the broader scientific community to the general public - is invited to take part.


EFSA has also announced the opening of registration for a major scientific conference on the role of global change in the emergence of plant diseases and pests in Europe.

The conference - co-organised by EFSA, the French Agency for Food, Environmental and Occupational Health & Safety (ANSES) and the European and Mediterranean Plant Protection Organization (EPPO) - will take place in Paris from 23-24 April 2018.

It will bring together researchers, public decision-makers and stakeholders to discuss how best to assess and manage plant health risks arising from global change.


Health and safety in swimming pools

52/0807 A recent publication from the Health and Safety Executive (HSE) provides guidance for all those involved in the operation and management of swimming pools.

This is the fourth edition of HSG179 ‘Managing health and safety in swimming pools’ (first published as ‘Safety in swimming pools’). The revision brings the guidance up to date with changes in health and safety law and new developments in relation to equipment and facilities. It has been co-written with stakeholders from across the leisure industry to set out the measures needed to reduce risks and comply with the law.

This edition of the guidance (available at http://www.hse.gov.uk/pubns/books/hsg179.htm) no longer contains detailed information on swimming pool design or pool water treatment. The guidance is intended to be read online so that full use can be made of the links to more detailed or additional HSE and industry guidance.

Wood pellets - carbon monoxide exposure

52/0808 A study in the current issue of Annals of Work Exposures and Health notes that the worldwide wood pellet market has grown rapidly. Growth rates have been about 10% annually from ~19.5 million metric tons in 2012 to ~28 million metric tons in 2015. In 2016, the demand for industrial wood pellets was estimated to be ~13.8 million metric tons.
However, most of the pellets used for residential heating (US measures) are sold in 40-pound (18.1 kg) plastic bags. This study measured CO emission factors from fresh, bagged-wood pellets as a function of temperature and relative humidity. CO concentrations increased with increasing temperature and moisture in the container. CO measurements in a pellet mill warehouse with stored pallets of bagged pellets had eight-hour average CO concentrations up to 100 ppm exceeding occupational standards for worker exposure. Thus, the authors conclude that manufacturers, distributors, and home owners should be aware of the potential for CO in storage areas and design facilities with appropriate ventilation and CO sensors.