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## Editorial

### Tim Eckmanns, Robert Koch Institute, Germany

The last big event of an infectious disease in a transport was a measles outbreak on a cruise ship in the Mediterranean Sea in February 2014. Several countries released press information to search for contacts with potential risk of infection. Discussion about potential overreaction followed immediately.

In air travel, the necessity of contact tracing is an ongoing debate. It is the old problem of too much and too less, safety and freedom. With the AIRSAN Project, we hope to create a discussion on appropriate measures and to develop useful AIRSAN Guidance Documents for a well-organized and coherent response to public health threats in air transport.

To identify areas on the response to public health threats in air transport with the highest priority, where guidance documents are still missing or in need of revision, we have conducted two surveys. The major outcome of these surveys was that the development of guidance documents supporting the cooperation between airlines and health authorities, e.g. in the area of contact tracing or rapid assessment of biological threats in air transport, should have the highest priority (see reports below).

## News from the AIRSAN Coordination

### Andreas Gilsdorf, Robert Koch Institute, Germany

The first year period of the AIRSAN Project draws to a close. This means that all AIRSAN Associated Partners, most of all the Work Package leaders and the AIRSAN Coordinator, will be busy with the preparation of the technical report and the financial report of the first-year period of the AIRSAN Project.

The AIRSAN Coordinator will provide the Work Package leaders with templates for both types of reports to ensure a timely and high-quality deliverable to the Executive Agency for Health and Consumers (EAHC) and the AIRSAN Partners.

We would like to thank all AIRSAN Partners for their contribution to the AIRSAN Project in the last year. Your contribution to the Work Packages and as experts and supervisors is highly valued by the AIRSAN Team.

We also welcome the contribution and interest demonstrated in the project by other parties, e.g. discussion at meetings or direct communication with the AIRSAN Team.

We hope to build on this experience for the upcoming months to continue a successful work in the AIRSAN Project.

## Recent meetings

### Meeting on AIRSAN Website and AIRSAN Communication Platform on 16 October 2013 in Berlin

On 16 October 2013, the AIRSAN Team at the RKI and Nick Bitsolas from the AIRSAN Team at UTH-EL met in Berlin, Germany.

Nick demonstrated the pilot AIRSAN Website and its technical handling and programming. Further, changes in the structure and layout of the website and possible functions of the AIRSAN Communication Platform and the AIRSAN Website Group were discussed.

### RAGIDA Meeting on 21-22 October 2013 in Stockholm

by Katrin Leitmeyer

The “Risk Assessment Guidance for Diseases transmitted on Aircraft” (RAGIDA part 2) is an operational guidance document for assisting the evaluation of risk for transmission on aircraft for tuberculosis, severe acute respiratory syndrome (SARS), invasive meningococcal disease, Lassa fever, Ebola fever and Marburg fever, measles and rubella [http://ecdc.europa.eu/en/publications/Publications/0911 GUI Risk Assessment Guidelines for Diseases Transmitted on Aircraft.pdf](http://ecdc.europa.eu/en/publications/Publications/0911_GUI_Risk_Assessment_Guidelines_for_Diseases_Transmitted_on_Aircraft.pdf).

In order to review the second edition published in 2010, the European Centre for Disease Prevention and Control (ECDC) convened on 21-22 October 2013 an expert meeting in Stockholm, Sweden, calling upon a multidisciplinary group of European and international experts from the public health and aviation sector. Current disease specific chapters for tuberculosis, SARS and measles were reviewed and chapters for Middle Eastern Respiratory Syndrome (MERS) and influenza were added. The revised version is expected to be published early in 2014.

Andreas Gilsdorf presented the AIRSAN Project to the RAGIDA meeting participants.

### European Scientific Conference on Applied Infectious Disease Epidemiology (ESCAIDE) on 5-7 November 2013 in Stockholm

The European Scientific Conference on Applied Infectious Disease Epidemiology (ESCAIDE) took place between 5 and 7 November 2013 in Stockholm, Sweden. Participants of the ESCAIDE mainly represent international, national, regional and local public health authorities from European and Non-European countries.

Staff from the AIRSAN Team at RKI visited the ESCAIDE and presented the AIRSAN Project with a stand to

promote the AIRSAN Project and to recruit members for the AIRSAN Network. At least one AIRSAN staff member continuously was accessible at the AIRSAN stand to give information and foster discussions. Information material offered included the AIRSAN Flyer, the AIRSAN Newsletter and an AIRSAN Poster. Additionally, access to the AIRSAN Website was allowed through a laptop. Participants interested to register to the AIRSAN Network could do so by filling in specific forms. This conference provided an excellent opportunity to inform a wide audience of EU public health officials about the AIRSAN Project and specifically the benefits of the AIRSAN Network.

Interested parties from many different countries and international organizations visited our stand and were interested in the AIRSAN material provided.



## Recent developments

### AIRSAN Guidance Documents Survey (work package 4)

One aim of the AIRSAN Project is to collect and review existing guidance documents for the response to public health threats in air transport.

Based on a consultation with the International Civil Aviation Organization and the World Health Organization in July 2013, a “Survey regarding the response at EU-level to public health threats in air transport” among all AIRSAN partners (Associated Partners, Collaborating Partners, Scientific Advisory Board) was conducted in September 2013. Information about existing and missing guidance documents in the area of public health in the aviation sector was collected; furthermore, we asked for the specific experiences and competencies of the AIRSAN partners and which problems occurred in the implementation of the International Health Regulations (IHR 2005).

Overall, 19 of 24 (79%) AIRSAN partners responded: 11 from authorities or companies from the health sector and 8 represented the aviation sector.

The main outcome was a list of 50 guidance documents relevant in the area of public health in the aviation sector. Three documents were identified to be under development: two of those are newly developed and one is an already existing document currently under revision. A total of 11 topics were identified for which guidance documents were still needed (for example: Contact tracing - cooperation between airlines and health authorities).

AIRSAN Partners indicated that they were most experienced in the area of biological threats. Between 2008 and 2012 the AIRSAN Partners were most often involved in responding to the following threats: the pandemic influenza (2009), measles, tuberculosis and the Fukushima nuclear disaster (2011).

Among measures listed in the survey, AIRSAN Partners had applied most often passenger tracing, management of suspect and affected travelers and implementing specific measures at the airport.

The development of training tools, whether table top exercises or practical exercises, was considered to be very helpful. About half of the participants already had gained experience in table top exercises themselves; about a quarter of the participants had participated in practical exercises.

Most AIRSAN Partners did not experience any problems in the implementation of the IHR (2005).

This targeted consultation revealed a comprehensive list of existing documents relevant in the area of public health and aviation and will build the basis for new guidance documents that will be developed in the framework of the AIRSAN project.

### **AIRSAN Prioritization Survey (work package 4)**

One aim of the AIRSAN Project is to develop guidance documents for the response to public health threats in air transport. The AIRSAN Guidance Documents Survey (see above) revealed a list of 11 topics for which guidance was still needed.

The AIRSAN Prioritization Survey was conducted among AIRSAN Partners to support the decision making process regarding which documents should be developed within the AIRSAN Project. Each AIRSAN Partner was invited to rank the topics by distributing 5 points across the 11 topics.

Overall, 17 (71%) of 24 AIRSAN Partners participated in this survey. Three topics received 16 points or more, while all other topics received 10 points or less. The topics ranked highest were: “Contact tracing;

cooperation between airlines and health authorities” (19 points), “Rapid assessment of biological threats on board of an aircraft or at the airport (e.g. use of passenger locator form)” (17 points) and “Generic guidance document on cooperation between aviation and health sector” (16 points).

The AIRSAN Team concluded that future guidance documents for the EU Members States should ease the cooperation between the health and the aviation sector. Moreover, these guidance documents should facilitate a coherent response in the area of public health in the aviation sector in EU Member States. The AIRSAN Team at RKI is going to develop such guidance documents as a next step in consultation with the AIRSAN Partners.

### **Review of existing guidance documents (work package 4)**

Based on the AIRSAN Guidance Document Survey, existing documents in the area of public health and the aviation sector were reviewed and systematized by two scientists. Specific keywords were defined that were relevant for the implementation of the IHR (2005), e.g. “Emergency planning” or “Training”. All pages enclosing information about the keyword were cited.

The main outcome of the review is an annotated bibliography, which is an organized list of sources. In this bibliography, each source is followed by structured general information (e.g. author, year of publication, target group), IHR specific keywords covered, references to the pages that contain the keyword and a relevancy score that informs about the level of detail the keyword is described with.

Main beneficiaries will be airline operators, airport operators, aviation authorities and public health authorities, which are the main AIRSAN target groups. At a glance, they can find information issued by the key international organizations in the area of public health and aviation.

In a next step, the AIRSAN Bibliography shall be implemented into the AIRSAN Website.

### **Development of a pilot AIRSAN Website (work package 5)**

The UTH-EL in collaboration with the partnership and a subcontractor company has designed and developed the pilot AIRSAN website ([www.airsan.eu](http://www.airsan.eu)). Moreover, the design and implementation of the AIRSAN Communication Platform has been initiated. The RKI is responsible for the content management of the AIRSAN Website. The website holds information on the project and its progress, the Work Packages, the Deliverables (including AIRSAN Training Tool and bibliography), the Partnership Structure and the Newsletters. It also

consists of the Members Area where authorized users (e.g. all AIRSAN Partners, AIRSAN Network members) can view information about the AIRSAN Network and will be able to access the AIRSAN Communication Platform. The AIRSAN Communication Platform will facilitate the rapid exchange and share of information and messages between AIRSAN Network members, related to public health issues in air transport, primarily among EU Member States. A web registry of Network members will be created and facilitate the communication procedure. It will consist of persons from organizations, institutions or companies in the area of public health and air transport.

## Literature review (work package 6)

In preparation for developing scenarios for the AIRSAN Training Tool, a literature study has been initiated on reported experiences and outcomes of infectious disease control measures for air travel. The following interventions will be analyzed (amongst others): exit and entry screening, information provision to passengers, isolation, quarantine and health monitoring, as well as contact tracing, hygiene measures and vector control. Control measures that have the best reported practices and outcomes will be selected as input for the scenarios. Next to this, collected guidance documents, reported events and existing training tools as inventoried by the survey, will serve as input for the training tool.

## 2nd annual work plan

The purpose of the work plan is to serve as a guiding tool for management for all partners of the AIRSAN Project. It comprises the activities of the project.

The work plan aims to assist the AIRSAN Partners to monitor the progress of the AIRSAN Project in terms of time scheduling and to manage risks which may arise from events or circumstances outside the project of work package leaders' control that will have an adverse impact on the project or the work package.

At the beginning of the AIRSAN Project, a first work plan was developed for the entire 24 project months. After the first-year funding period, the work plan for the remaining second 12 months of the AIRSAN Project has been revised.

## Next steps

### Interim financial and technical report

At the end of March 2014, the first-year funding period of the AIRSAN Project is going to end.

Together with the Work Package Leaders, the Coordinator of the AIRSAN Project is preparing interim

financial and technical reports to inform the EU and stakeholders about the work progress. The technical report will serve for the monitoring of the progress in the work packages and the achievement of the deliverables and milestones of the AIRSAN Project. The financial report will give an overview on the utilization of the project budget.

## Development of AIRSAN Communication Platform

The AIRSAN Website contains a password protected Members' Area that will be accessible for authorized users only (competent authorities including airports, public health authorities, civil aviation authorities, airlines, AIRSAN Network members).

Through entering the Members' Area the users will gain an access to an AIRSAN Communication Platform. The aim of developing the AIRSAN Communication Platform is to facilitate the exchange of information on cross-border public health threats supporting the implementation of the IHR (2005).

The AIRSAN Communication Platform shall not serve for the official notification of public health events but for an informal exchange of information between the AIRSAN network members.

Training on the usage of the AIRSAN Communication Platform will be provided within the framework of this project to all the AIRSAN Network members.

## Mid-term evaluation report

The evaluation of the AIRSAN Project is subcontracted to the International Civil Aviation Organization (ICAO).

ICAO is responsible to define an evaluation strategy, to design the evaluation tools and to prepare the evaluation reports. It will be based on the partners' satisfaction with the work involvement and on assessment of the progress against relevant indicators, to monitor all milestones and deliverables, timeliness and quality.

A mid-term project evaluation will be conducted in collaboration with the members of the Scientific Advisory Board to assess the progress against specific indicators and to account for conceptual advice and concerns.

An assessment of the progress against specific indicators in different work packages will be performed as formal mid-term review and made available in form of reports. The report will be communicated to the Scientific Advisory Board and incorporate the feedback into respective evaluation reports. The project plan and conceptual content will be modified to the possible extent based on the Scientific Advisory Board recommendations.

## Other topics

### IHR Exercise at Munich Airport (and the Munich Municipal Hospital Schwabing)

On 11 November 2013, the local Public Health Authority at the District Office Erding and the Department of Infectious Diseases of the Munich Municipal Hospital Schwabing coordinated a full-scale multi-agency exercise on the IHR (2005) at Munich Airport and in the Hospital Schwabing. Staff from the AIRSAN Team at RKI had the chance to observe this exercise at Munich Airport.



Overall, more than 300 people from the following agencies were actively involved in this exercise: Munich Airport with numerous departments (for example, air traffic control, medical service, security agencies, firefighters etc.), German Lufthansa AG, federal and state police, customs, Bavarian State Ministry of Health, Bavarian State Office for Health and Food Safety, Hospi-



tal Schwabing, Microbiological Institute of the Federal Armed Forces in Munich, Munich Municipal Firefighters and District Office Erding.



Aim of the exercise was to train multi-agency communication and coordination.

The scenario was as follows: The pilot of an aircraft informed the tower of the airport via radio about a traveler with severe disease symptoms on board. The German Lufthansa had made a long-haul aircraft Airbus A340 available for the exercise. About 20 employees from the District Office Erding took over the part of the patient and other passengers, who were in the vicinity of the diseased traveler on the plane. The medical doctor of the Medical Service of Munich Airport made the suspect diagnosis viral hemorrhagic fever. Consequently, the patient was transported to the Hospital Schwabing with special emergency vehicles under the highest security level. In the hospital, the patient had to be medically treated in compliance with all prescribed requirements on the special isolation unit of the hospital. To challenge the hospital setting even more, a fire broke out at the hospital as part of the exercise.



During this exercise, the alarm and emergency plans were trained. These plans include, for example, measures to be applied in passengers and contact persons, personal protective equipment to be used by the involved staff, aircraft disinfection and communication between local, regional, federal and international authorities. Overall, the exercise was deemed to be very successful.

## People from the AIRSAN Project

We will use this and the upcoming issues of the AIRSAN Newsletters to introduce you to the main teams of the Associated Partners and also to some individual persons who support the AIRSAN Project.

### AIRSAN Team at the University of Thessaly (UTH-EL), Greece

University of Thessaly (UTH) is supervised and granted by the State through the Hellenic Ministry of Education.

The Department of Hygiene and Epidemiology of Medical School of the UTH has long experience in managing EU projects (coordinator of SHIPSAN, SHIPSAN TRAINET and SHIPSAN ACT Projects) and in designing, implementing and coordinating national programmes (e.g. Integrated Surveillance and control programme for West Nile Virus and malaria in Greece-Malwest, public health surveillance during 2004 Olympics, including development and implementation of Hellenic Vessel Sanitation Program). Except for teaching medical students, the Department operates a post graduate master course in applied Public Health focusing on food and water safety. Moreover, is acting as the Peripheral Public Health Laboratory of Thessaly. We have undertaken research projects related to hygiene and communicable diseases on ships and developed information systems for public health surveillance data exchange at national level for Greece and Cyprus. We conduct or participate in outbreak investigations. In total, twenty eight persons are employed in the Laboratory in different Research Projects.

**Prof. Christos Hadjichristodoulou** studied medicine and obtained a doctorate (“PhD”) in Epidemiology. He is currently Professor of Hygiene and Epidemiology as well as the Director of the Peripheral Public Health Laboratory of Thessaly. He is responsible for the scientific coordination of the two-year post graduate training programme in “Applied Public Health and Environmental Health” focusing on food and water safety. He is the Project Leader of the SHIPSAN Projects and leader of Work Package 5 “Development of an AIRSAN Website linked to an AIRSAN Communication Platform” of the EU AIRSAN Project. He is also acting as external evaluator of other EU Projects. Currently he is Scientific Advisor for the Hellenic Center for Disease Control & Prevention (HCDCP).

**George Rachiotis** is a specialized occupational physician and Assistant Professor in Epidemiology and Public Health at the Department of Hygiene and Epidemiology, University of Thessaly, Greece. He has special research interest in the occupational health of seafarers in the framework of EU SHIPSAN and EU SHIPSAN ACT European Projects.

**Barbara Mouchtouri** studied Hygiene and Environmental Health, has diploma and MSc in Public health from LSHTM and PhD. She works as a manager for the EU SHIPSAN projects since 2006. She has worked as technical officer in WHO headquarters – support to IHR Capacity Development at points of entry, for the 2004 Athens Olympic Games environmental health surveillance programme and as temporary lecturer at the University of Thessaly and the Technological Education Institute of Athens.

**Nick Bitsolas** studied Public Administration and obtained a postgraduate degree in Computing Science at the University of Glasgow (Master of Science (MSc) in Information Technology (IT)). He worked as web, database and system administrator and analyst in EU SHIPSAN and EU SHIPSAN TRAINET Projects. He works as IT administrator for the EU SHIPSAN ACT Joint Action and EU AIRSAN Project.

**Elisavet Antoniadou** has a BSc in Economics, worked as scientific coordinator and manager of many National and European projects regarding Life Long Learning and employment. Since 2010 she was the Financial Manager of EU SHIPSAN TRAINET. She is currently involved in the financial administration of EU SHIPSAN ACT Joint Action and EU AIRSAN Project.



AIRSAN Team at UTH-EL (left to right): George Rachiotis, Elisavet Antoniadou, Christos Hadjichristodoulou, Barbara Mouchtouri, Nick Bitsolas