

COLLEGE OF
OSTEOPATHIC MEDICINE
at the Cherokee Nation

History & Pandemics

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TERMINOLOGY



Terminology

- **OUTBREAK**
 - Disease occurs in a greater number than expected
 - Occur in a community or a region, or can occur during a season
- **EPIDEMIC**
 - Illness in a community or a region that clearly exceeds normal expected level
- **PANDEMIC**
 - Worldwide epidemic of a disease

WHO Pandemic Phases

Phases	Phase Description	Level
Inter-Pandemic Phase	Low Risk of Human Cases	1
New Virus in Animals, No Human Cases	Higher Risk of Human Cases	2
Pandemic Alert	No or Very Limited Human-To-Human Transmission	3
New Virus Causes Human Cases	Evidence of Increased Human-To-Human Transmission	4
	Evidence of Significant Human-to-Human Transmission	5
Pandemic	Efficient and Sustained Human-to-Human Transmission	6

Terminology

- Cell Tropism
 - Ability of a pathogen to infect a particular cell type
- Endemic
 - Prevalence of human infection
- Fomite
 - An inanimate object that transmits infection
- Host-Switching
 - Process by which a pathogen adapted to one host species becomes adapted to another host species
- Disease Emergence
 - Appearance of a disease in a new host
- Zoonosis
 - Human infection caused by an animal pathogen that may be either a dead-end infection or that may initiate person-to-person spread

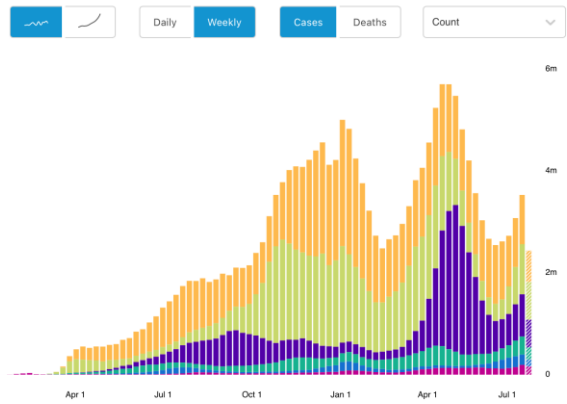
Death Toll

Major Pandemics (High to Low)

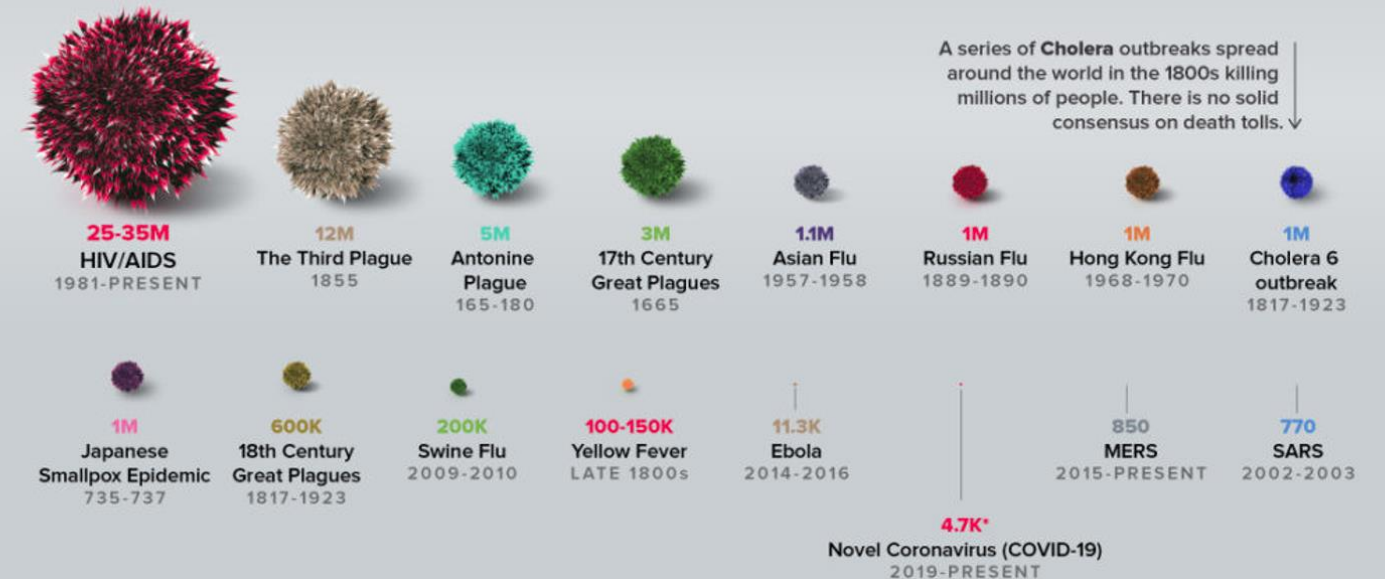
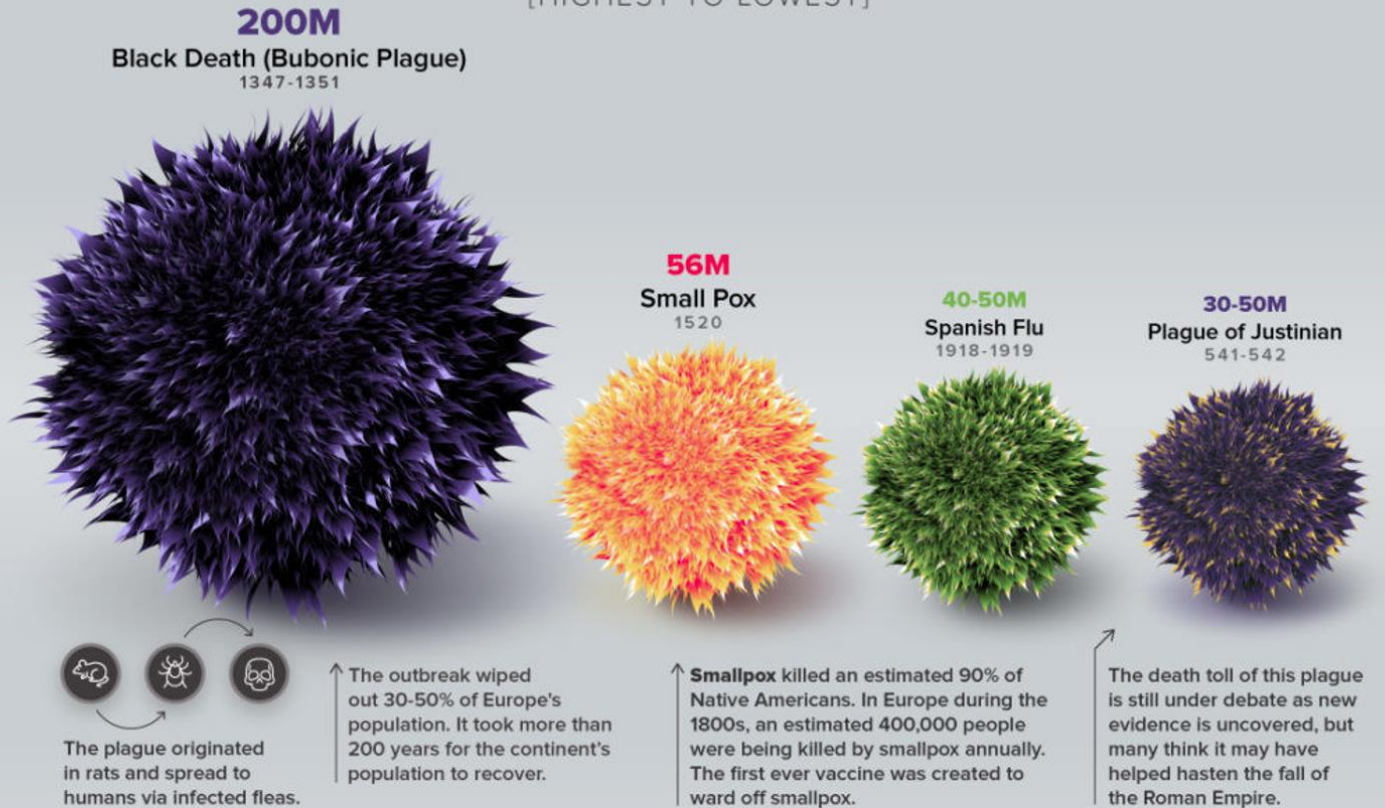
- Graphic – March 2020
- WHO (July 23, 2021)
 - Cases: 192,284,207 (confirmed)
 - Deaths: 4,136,518 (confirmed)
 - Vaccine doses (3,646,968,156)

Situation by WHO Region

Region	Confirmed Cases
Americas	75,349,353
Europe	58,740,133
South-East Asia	37,305,824
Eastern Mediterranean	12,035,379
Africa	4,722,513
Western Pacific	4,130,241



Source: World Health Organization
Data may be incomplete for the current day or week.



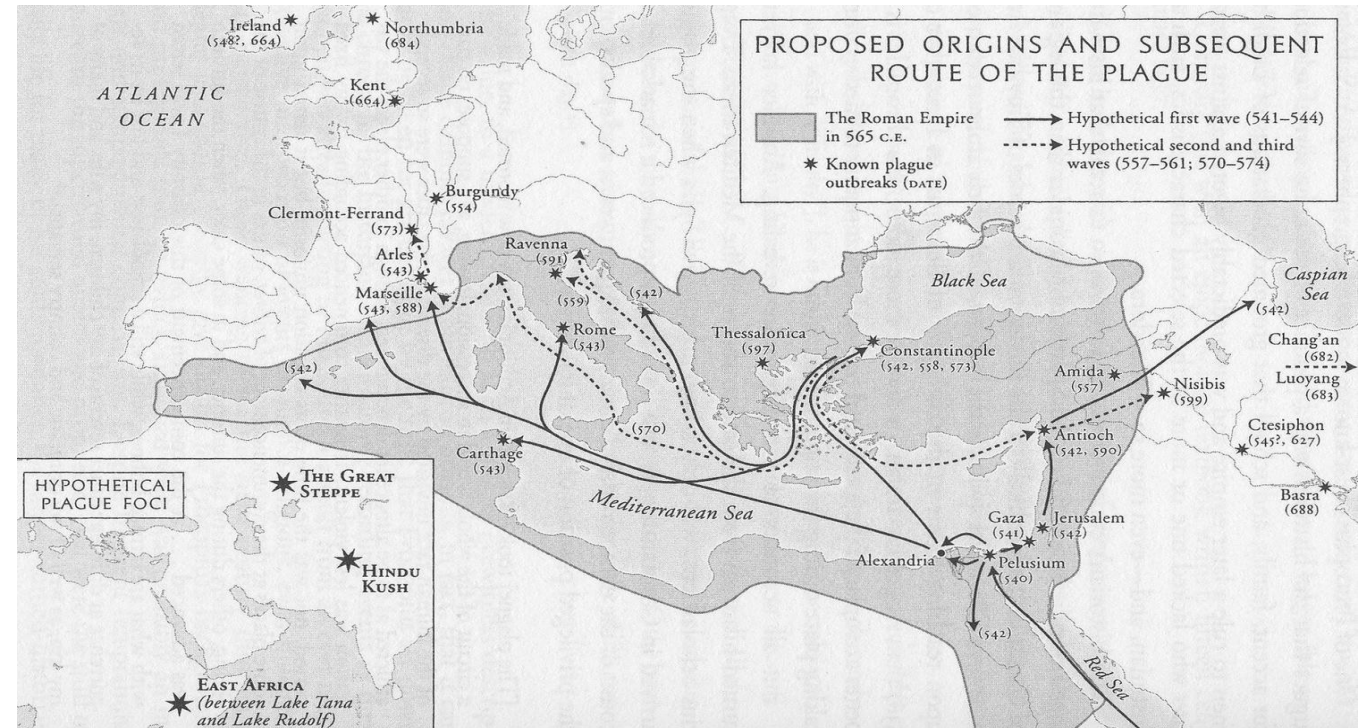
HISTORY



The Plague of Athens, Michiel Sweerts, c. 1652-1654



The angel of death striking a door during the plague of Rome; Source: <https://wellcomeimages.org/indexplus/image/V0010664.html>



By Josse Lieferinxe - Unknown source, Public Domain, <https://commons.wikimedia.org/w/index.php?curid=539827>



The Chronicles of Gilles Li Muisis (1272-1352), abbot of the monastery of St. Martin of the Righteous, Bibliothèque royale de Belgique, MS 13076-77, f. 24v.



Pieter Bruegel the Elder, *Triumph of Death*, c. 1562, Museo del Prado, Madrid.

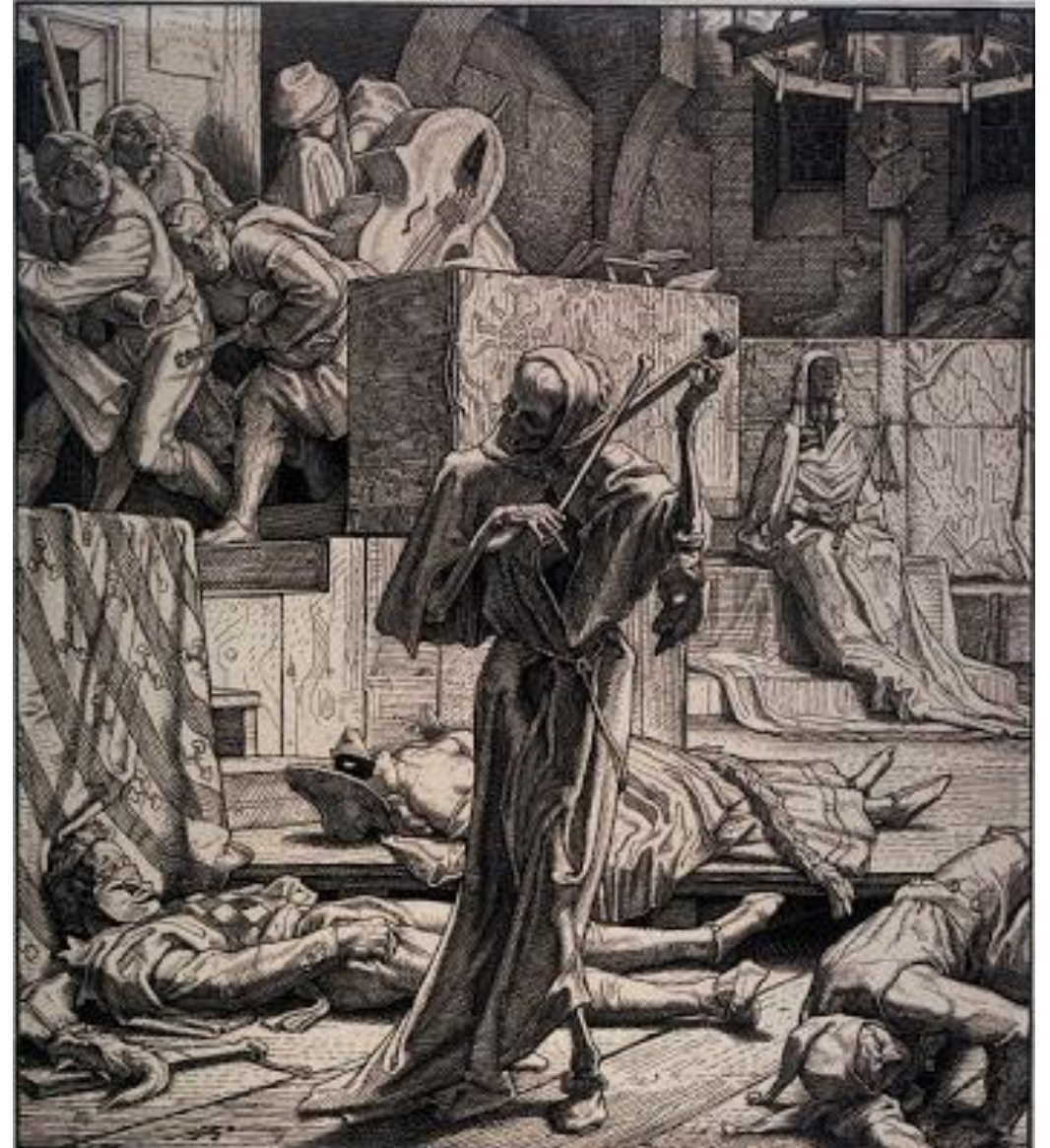
"That night, the balls were more crowded than ever; hilarious laughter all but drowned the louder music; one grew hot in the chahut [dance], and gulped all kinds of ices and other cold drinks—

when suddenly the merriest of the harlequins felt a chill in his legs, took off his mask, and to the amazement of all revealed a violet-blue face.

It was soon discovered that this was no joke; the laughter died, and several wagon loads were driven directly from the ball to the Hotel-Dieu, the main hospital, where they arrived in their gaudy fancy dress and promptly died, too...

[T]hose dead were said to have been buried so fast that not even their checkered fool's clothes were taken off them; and merrily as they lived they now lie in their graves.

~ Heinrich Heine, 1832



Rethel, Alfred "Death as Cutthroat" (1851)

THE DAILY GRAPHIC

An Illustrated Evening Newspaper



39 & 41 BROAD PLACE

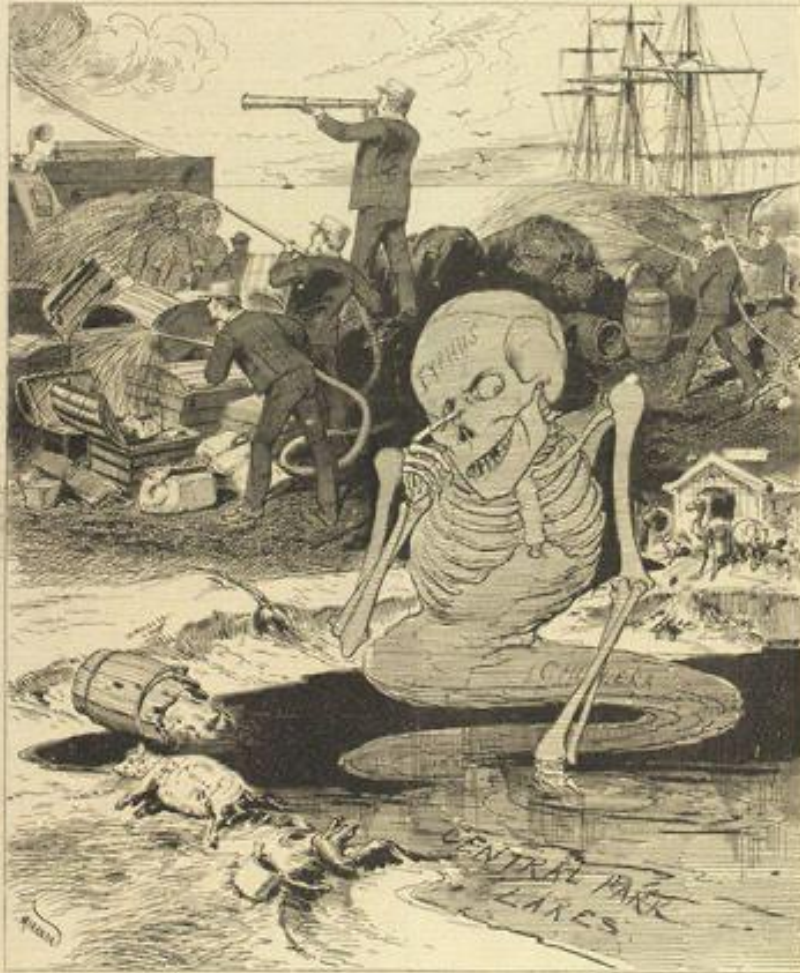
VOL. XXIV

No. 10,000

NEW YORK, THURSDAY, APRIL 28, 1885

No. 10,000

50 CENTS



THE ADVANCING SCOURGE

LOOK TO THE EAST, WHERE THE SCOURGE IS FIRST SEEN, AND TO ALL THE LAKES AND RIVERS OF THE CITY.

Central Park Lake
New York, 1885

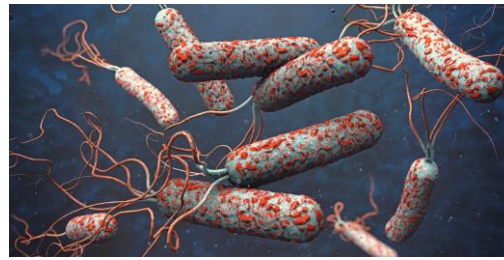
*“The Advancing Scourge,”
from The Daily Graphic, April
28, 1885.*

Year (s)	Pathogen	Geographic Location	Cases/mortality	Other Notes
1918-1920	Influenza (Spanish Flu)	Worldwide	500 million cases / ~ 50 million deaths	The Spanish flu claimed the lives of 2-5% of the world's population, far exceeding the death toll of WWI.
1957-1958	Influenza (Asian flu)	Worldwide	1 to 2 million deaths	Accelerated development of a vaccine limited the spread of the responsible influenza strain
1968-1969	Influenza (Hong Kong flu)	worldwide	500,000 – 2 million deaths	The Hong Kong flu was the first virus to spread extensively due to air travel.
1961-present	Cholera	Worldwide	1.4-4 million annual cases / 21,000-143,000 annual deaths	The seventh cholera pandemic began in South Asia in 1961. Recent notable outbreaks include those in Zimbabwe from 2008 to 2009, Haiti from 2010 – present, and Yemen from 2016 - present
1974	Smallpox	India	130,000 cases / 26,000 deaths	One of the worst smallpox epidemics of the twentieth century occurred just 3 years before the disease was eradicated.
1981	HIV/AIDS	Worldwide	70 million cases / ~ 37 million deaths	HIV was first identified in 1981. the earliest known case came from a blood sample collected in 1959. *Ongoing Pandemic
1994	Plague	India	693 suspected cases / 56 deaths	The outbreak originated in Surat, India. Within days, hundreds of thousands of the city's 1.6 million residents fled, spreading the disease across five states.

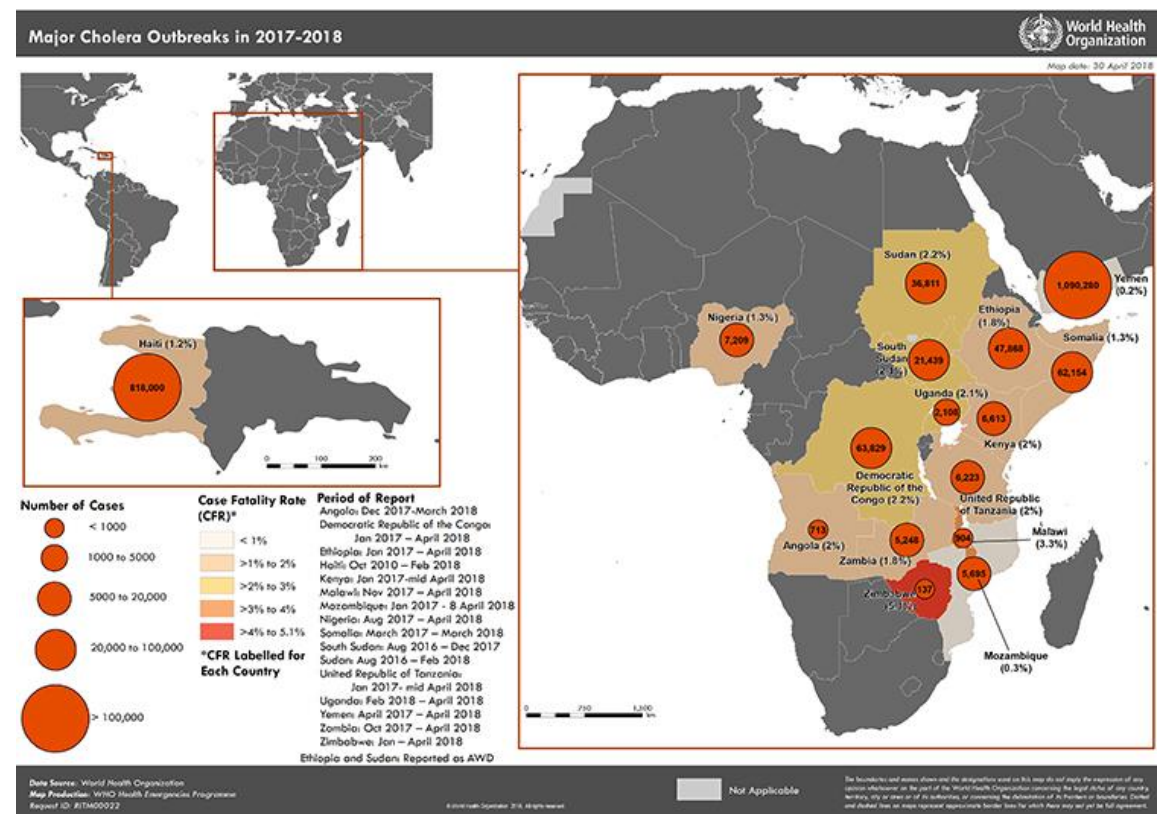


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Cholera



- WHO
 - 78% of the populations in less developed countries is without clean water
 - 85% without adequate fecal waste disposal
- Calcutta, India, 1953
- South Vietnam, 1964 – 1967
- India, 1971
 - Bangladeshi refugees
 - 6500 deaths
- Peru, 1991



Year (s)	Pathogen	Geographic Location	Cases/mortality	Other Notes
2002-2003	SARS	Originated China, (37 countries)	8,098 cases / 813 deaths	International business travel allowed the SARS virus to spread quickly across the continents.
2009	Influenza H1N1 (Swine flu)	Worldwide	284,000 deaths	Many public and private facilities in Mexico closed to prevent the spread of “swine flu” during the early days of the epidemic. The pork industry also suffered losses, even though eating pork products posed no risk.
2014-2016	Ebola	West Africa	28,600 cases / 15,258 deaths	First recognized in 1976; 29 regional epidemics to 2020. 300,000 doses of an experimental Ebola vaccine were subsequently stockpiled
2015 – present	Zika	The Americas (Brazil)	Unknown number of cases and deaths (~1,000*)	The Zika epidemic has resulted in few, if any, deaths. However, birth defects resulting from infection in pregnant women occurred frequently, which prompted some governments to encourage delaying pregnancy for as long as 2 years.
2016	Dengue	Worldwide	100 million cases / 38,000 deaths	Dengue outbreaks occur periodically in affected regions. 2016 was notable for the unusual scale of outbreaks across the globe.
2017	Plague	Madagascar	2,417 cases / 209 deaths	Plague is endemic in Madagascar, but an increase in pneumonic plague. Which can be transmitted from human to human, was associated with the recent spike in cases.

THREATS & VULNERABILITIES

Newly Emerging Infectious Disease

Key Elements

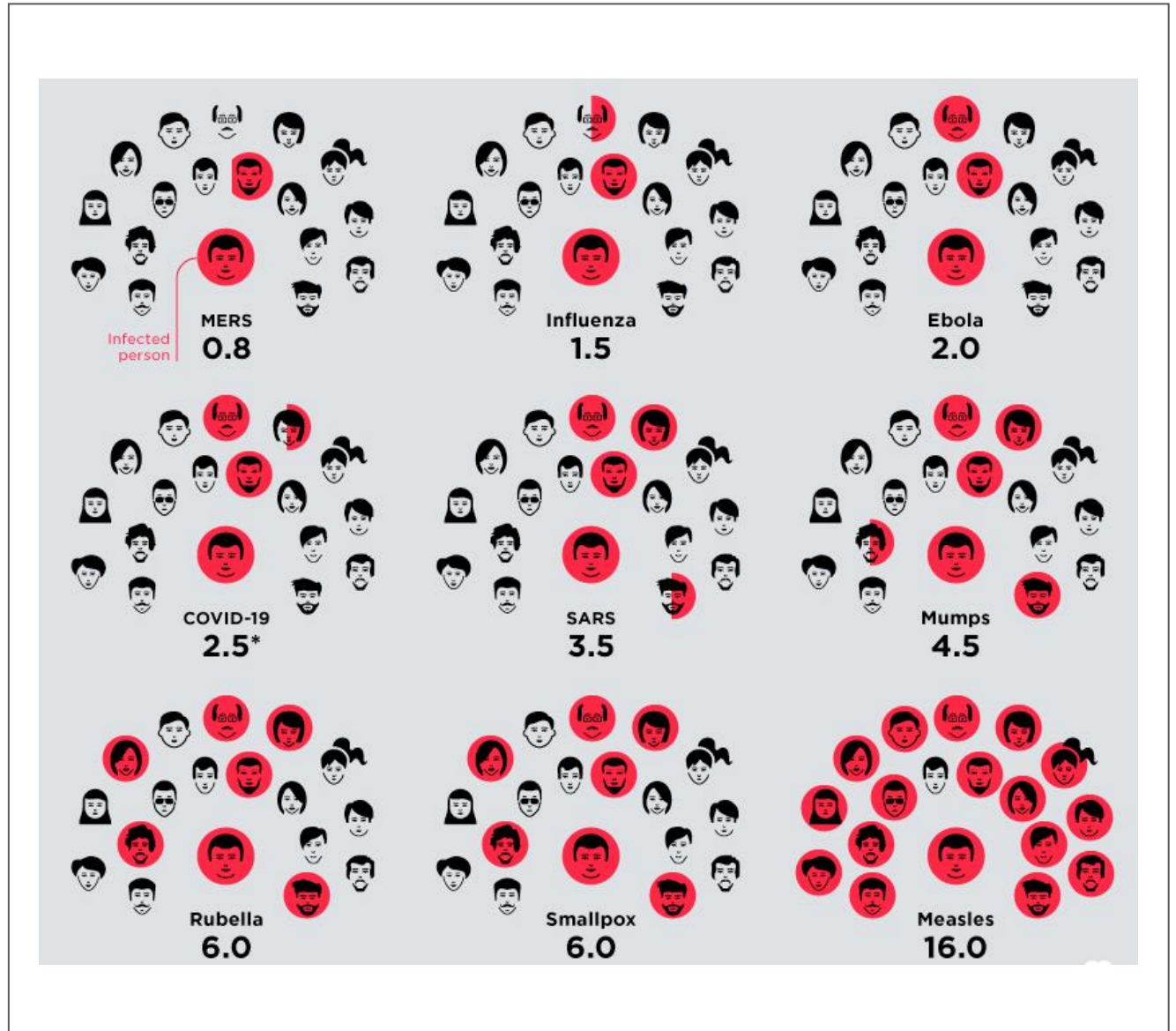
- Infection that does not infect humans in a sustained manner
- Effectively transmit person to person
- High level of morbidity and mortality



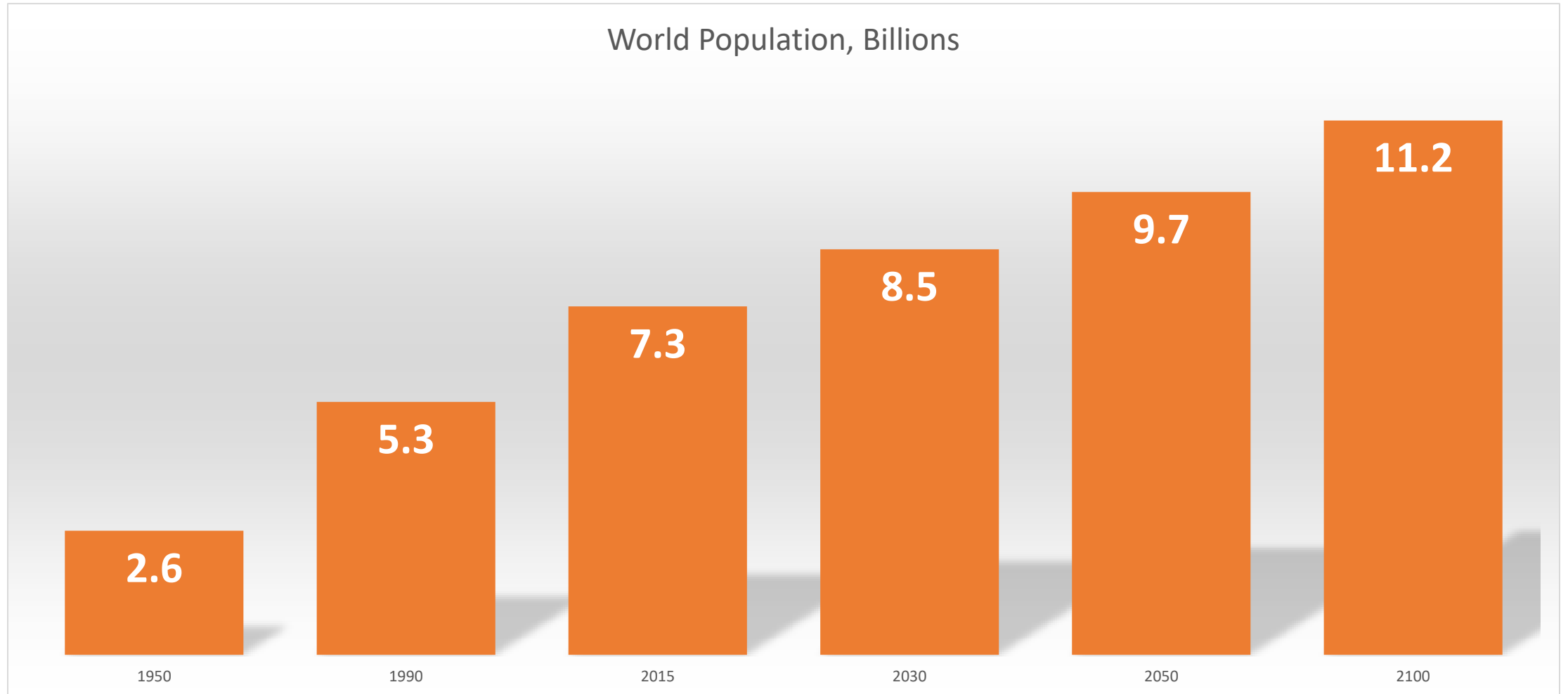
RO

Measure of how many people each sick person will infect on average.

- RO COVID-19 (March 2020) – 2.5
- RO COVID-19 (March 2021) – 2.2
- RO COVID-19 (July 2021) – 2.7
- RO COVID-19 (Delta Variant July 2021) – 6

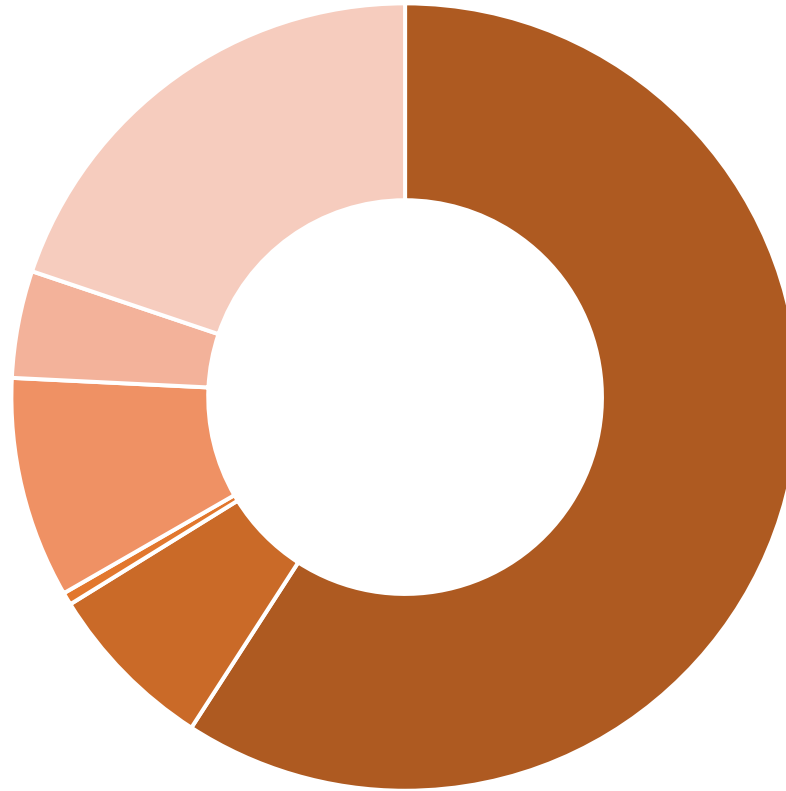


Global Population



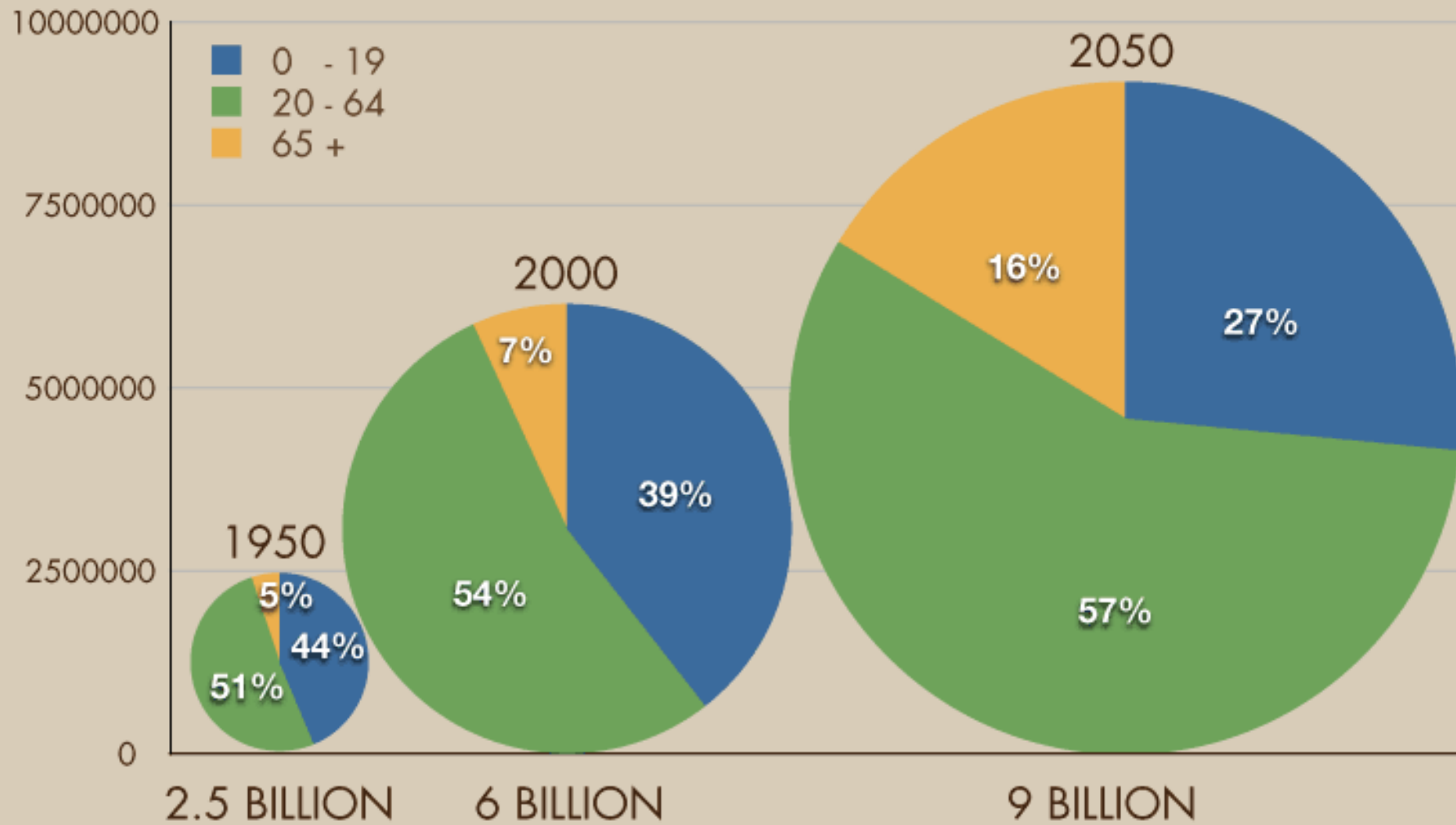
Data Source: <https://www.un.org/en/sections/issues-depth/population/index.html>

World Population by Continents - Year 2050



■ Asia ■ Europe ■ Oceania ■ South America ■ North America ■ Africa

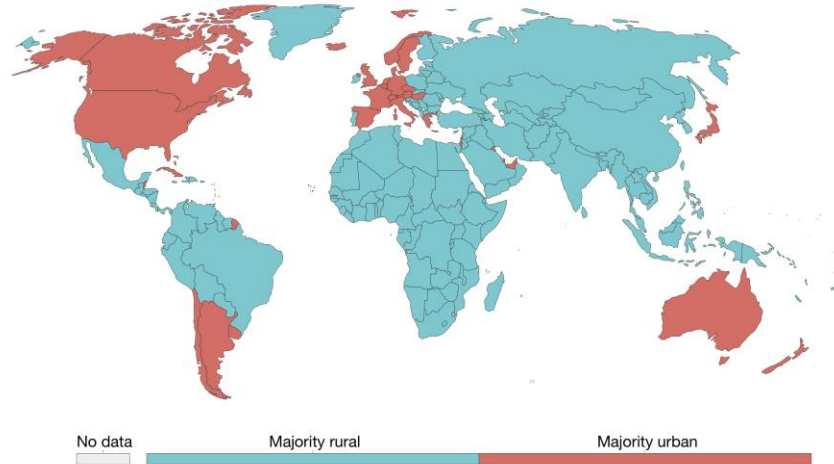
POPULATION BY AGE GROUP



Do more people live in urban or rural areas?, 1950

Share of the population which live in urban versus rural areas. Here, 'majority urban' indicates more than 50 percent of the population live in urban centres; 'majority rural' indicates less than 50 percent. Urban populations are defined based on the definition of urban areas by national statistical offices. This is based on estimates to 2016, combined with UN projections to 2050.

Our World
in Data

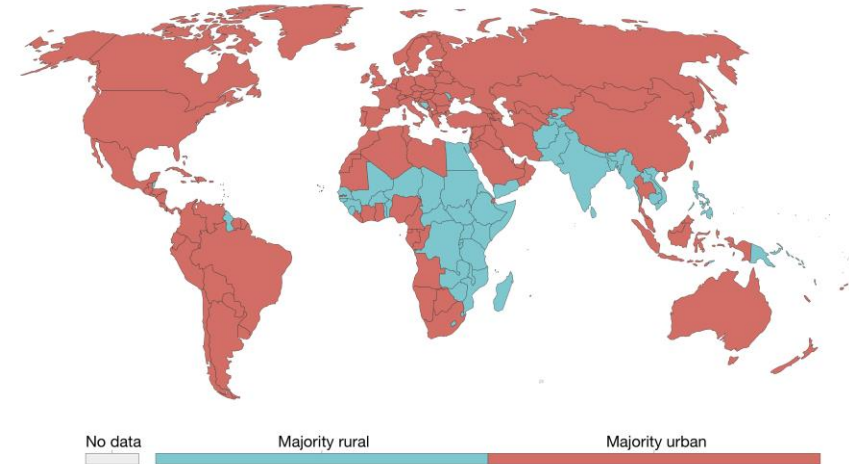


Source: OWID based on UN World Urbanization Prospects (2018) & Historical Sources (see Sources tab)
OurWorldInData.org/urbanization • CC BY

Do more people live in urban or rural areas?, 2020

Share of the population which live in urban versus rural areas. Here, 'majority urban' indicates more than 50 percent of the population live in urban centres; 'majority rural' indicates less than 50 percent. Urban populations are defined based on the definition of urban areas by national statistical offices. This is based on estimates to 2016, combined with UN projections to 2050.

Our World
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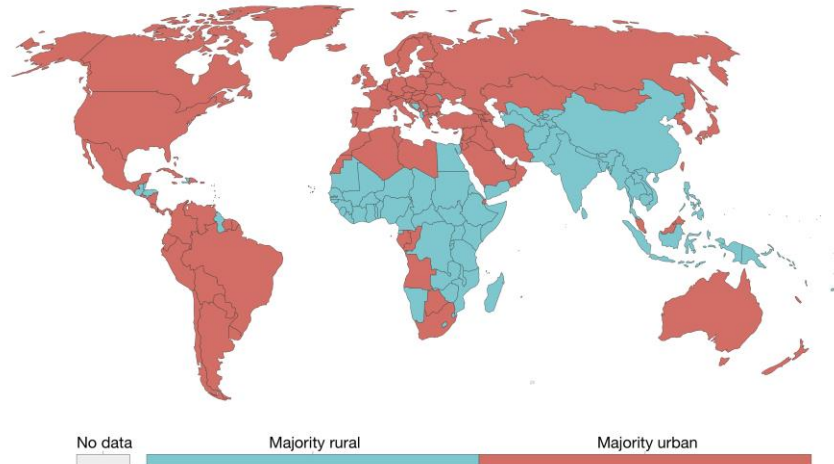


Source: OWID based on UN World Urbanization Prospects (2018) & Historical Sources (see Sources tab)
OurWorldInData.org/urbanization • CC BY

Do more people live in urban or rural areas?, 2000

Share of the population which live in urban versus rural areas. Here, 'majority urban' indicates more than 50 percent of the population live in urban centres; 'majority rural' indicates less than 50 percent. Urban populations are defined based on the definition of urban areas by national statistical offices. This is based on estimates to 2016, combined with UN projections to 2050.

Our World
in Data

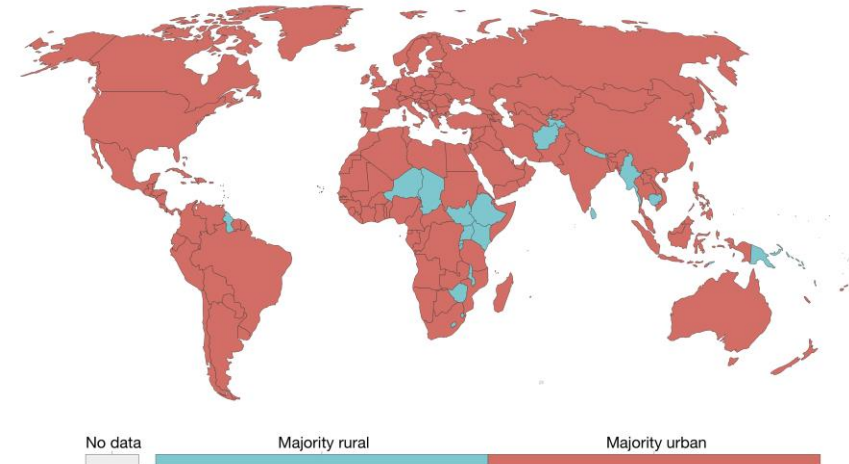


Source: OWID based on UN World Urbanization Prospects (2018) & Historical Sources (see Sources tab)
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Do more people live in urban or rural areas?, 2050

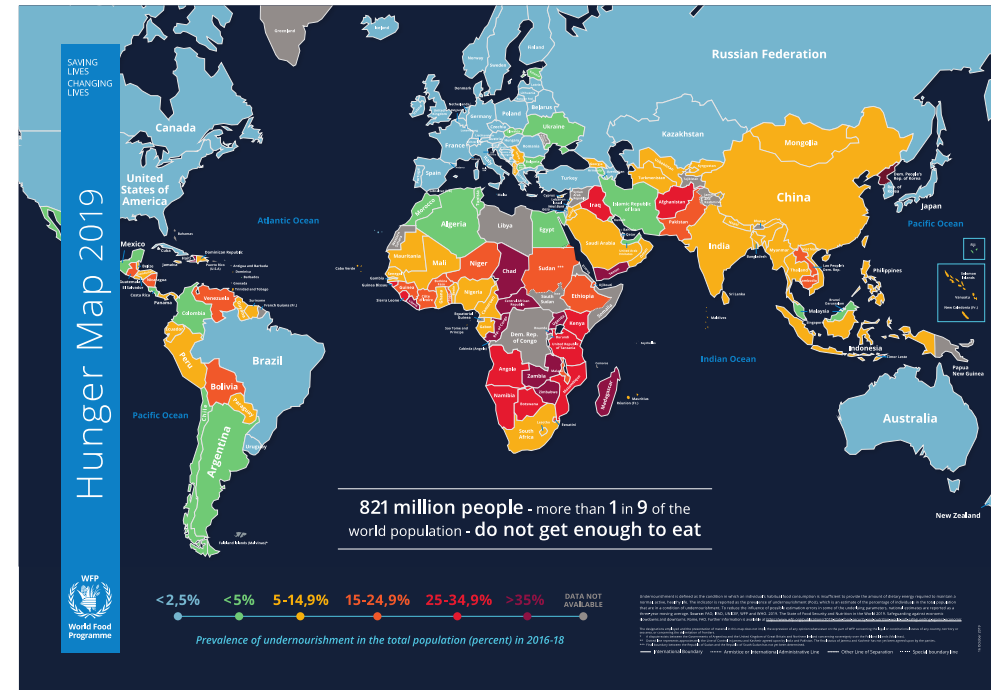
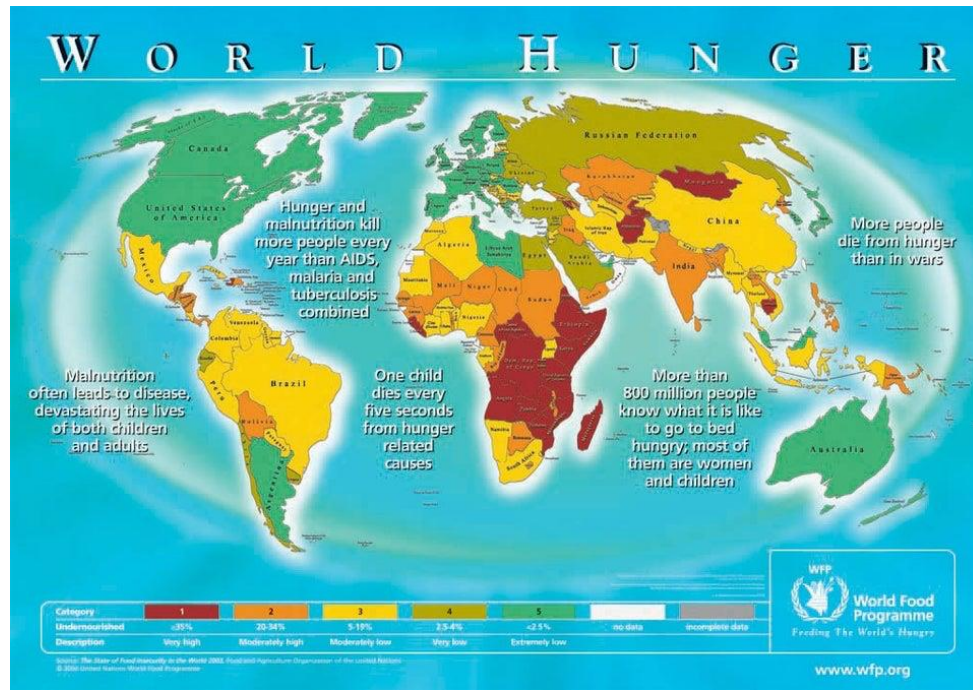
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in Data



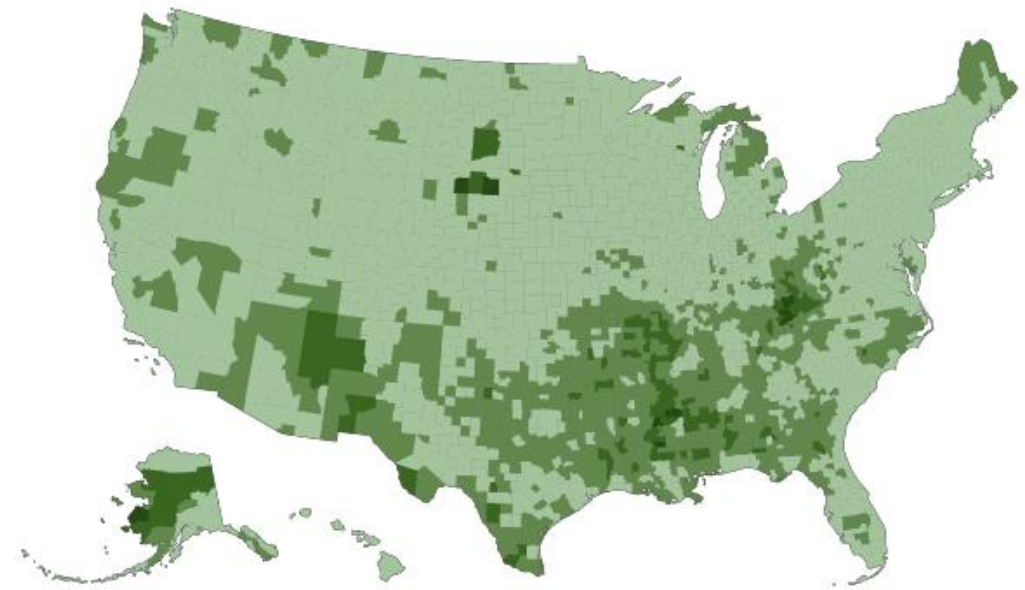
Source: OWID based on UN World Urbanization Prospects (2018) & Historical Sources (see Sources tab)
OurWorldInData.org/urbanization • CC BY

World Hunger

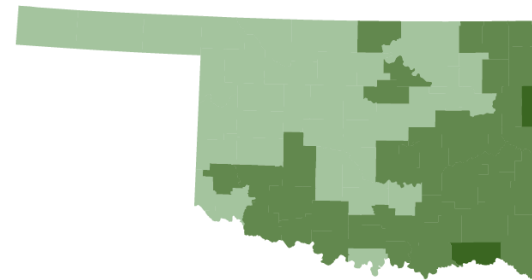
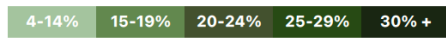


Food Insecurity

Overall Food Insecurity Rate



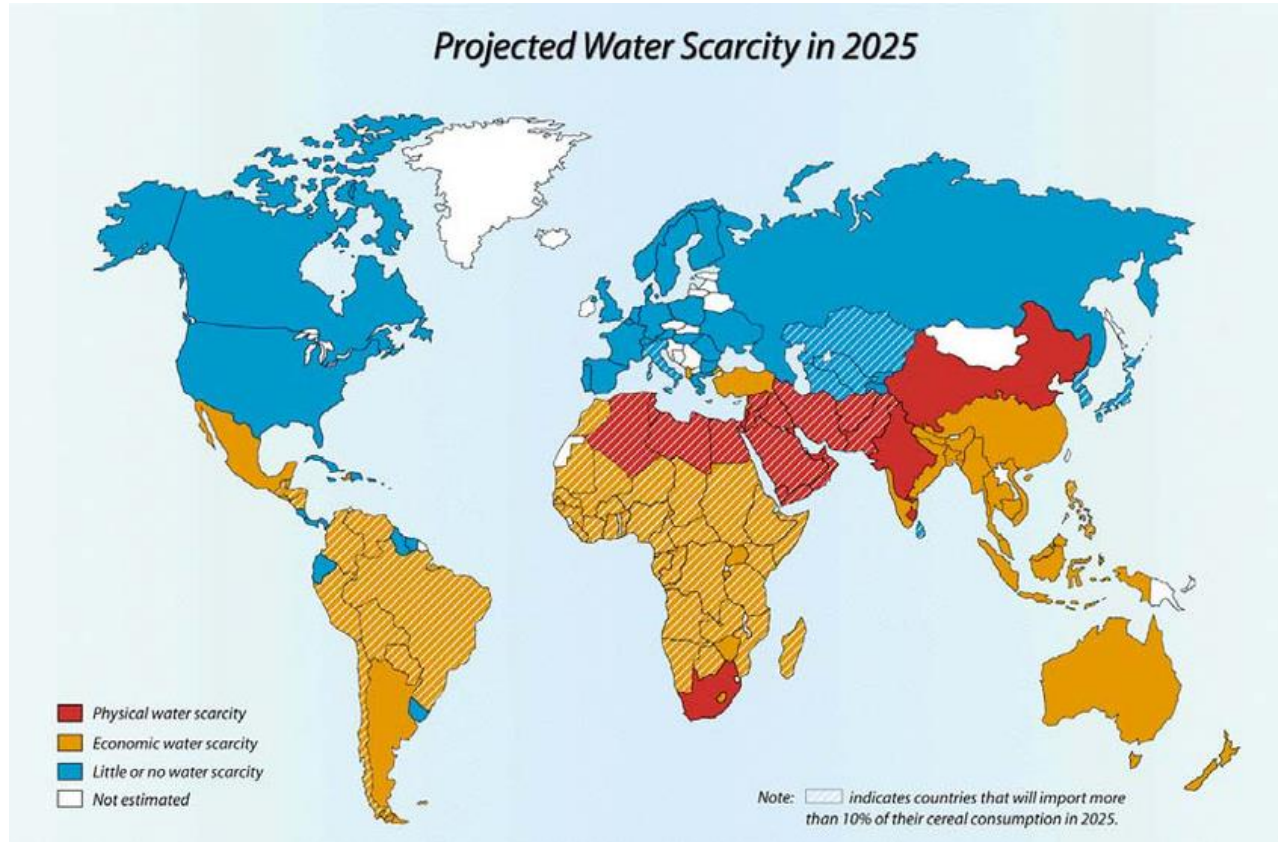
Overall Food Insecurity Rate



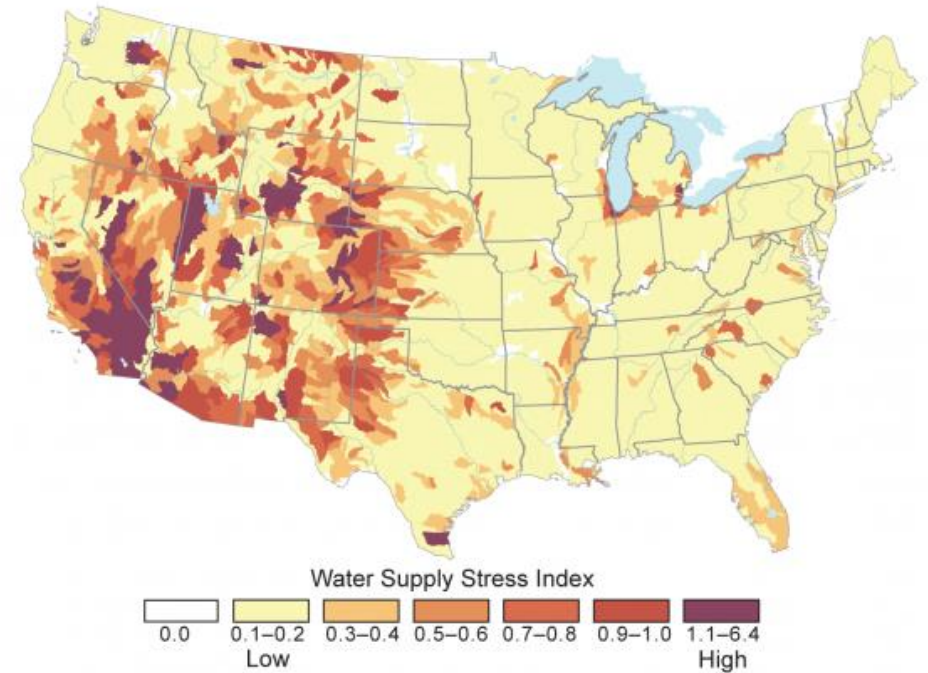
Source: Adapted from the USDA Economic Research Service.

Water, 2025

Projected Water Scarcity in 2025



Water Stress in the U.S.



Biological Terrorism

Category A Agents

- Anthrax (*Bacillus anthracis*)
- Botulism (*Clostridium botulinum toxin*)
- Plague (*Yersinia pestis*)
- Tularemia (*Francisella tularensis*)
- Smallpox (*variola major*)
- Viral Hemorrhagic Fevers
 - Filoviruses (Ebola & Marburg)
 - Arenaviruses (Lassa Fever, Machupo)

Category A List (CDC)

- Easily Transmitted Person to Person
- High Mortality
- Potential for Panic & Social Disruption
- Requires Special Public Health Actions



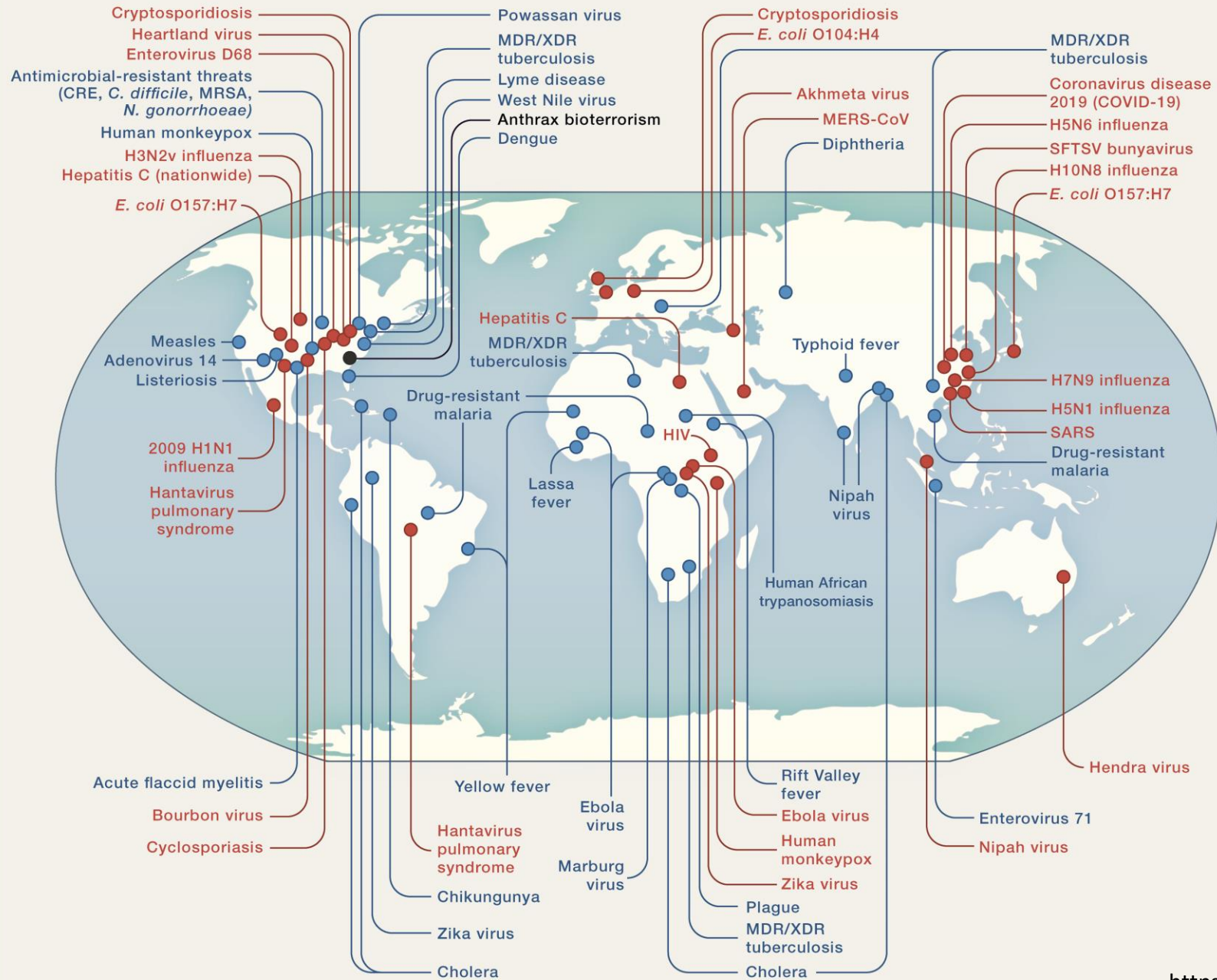
Paulus Furst of Nuremberg, *Doctor Schnabel von Rom*, 1656, British Museum, London.

EMERGING INFECTIOUS DISEASES & PATHOGENS

● Newly emerging

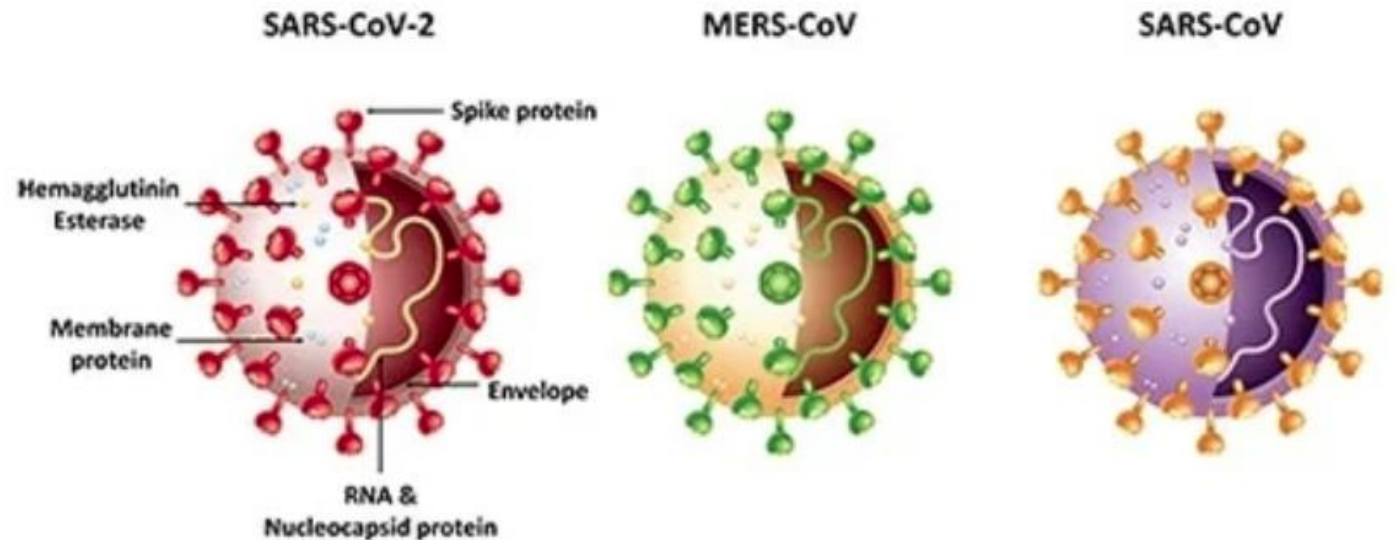
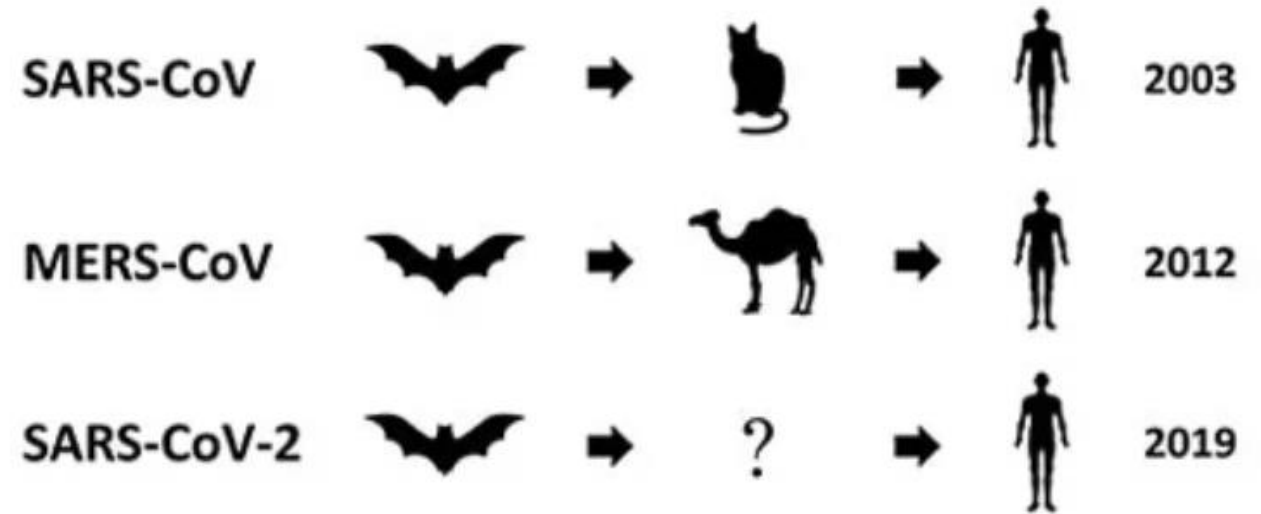
● Re-emerging/resurging

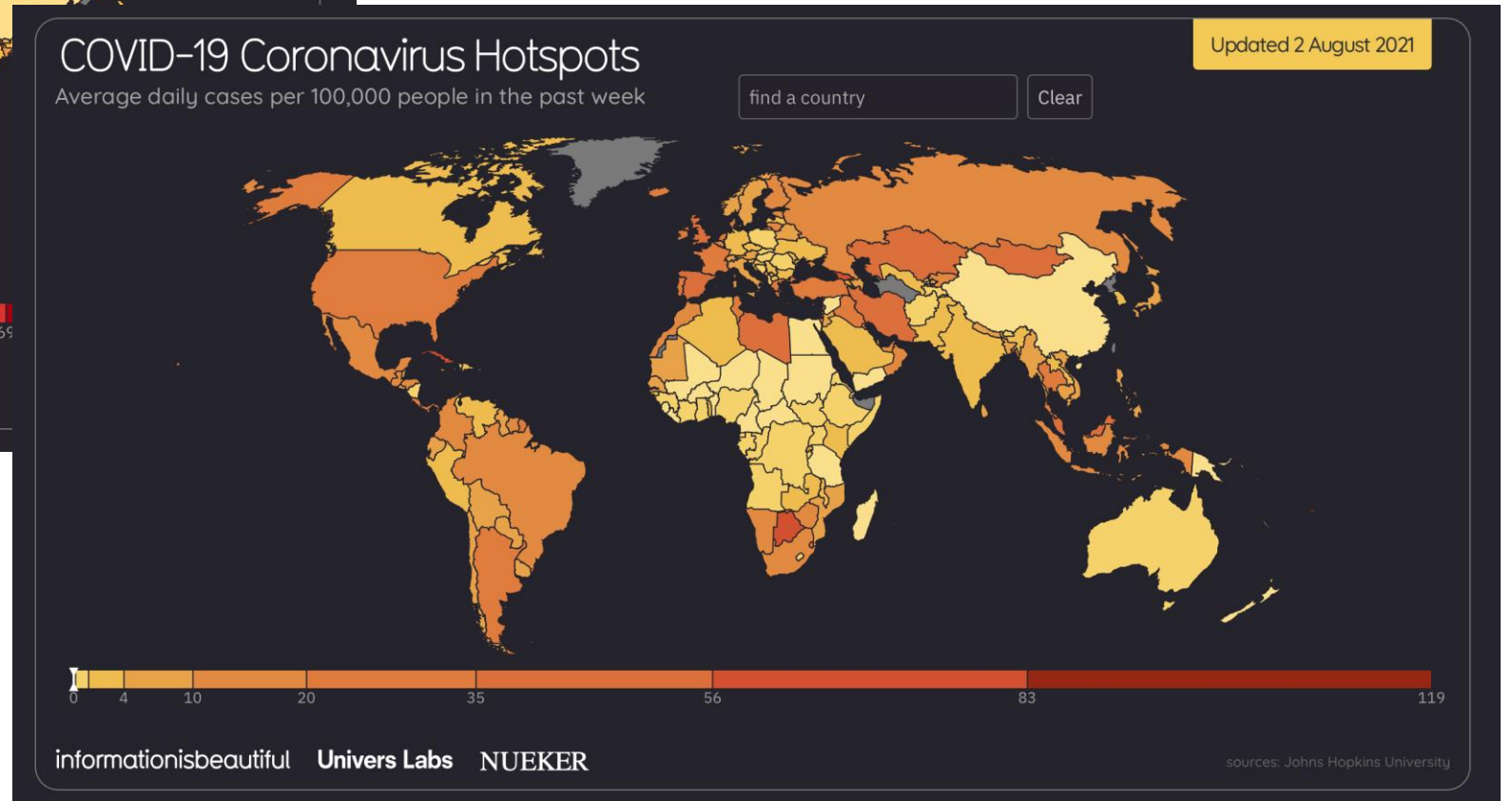
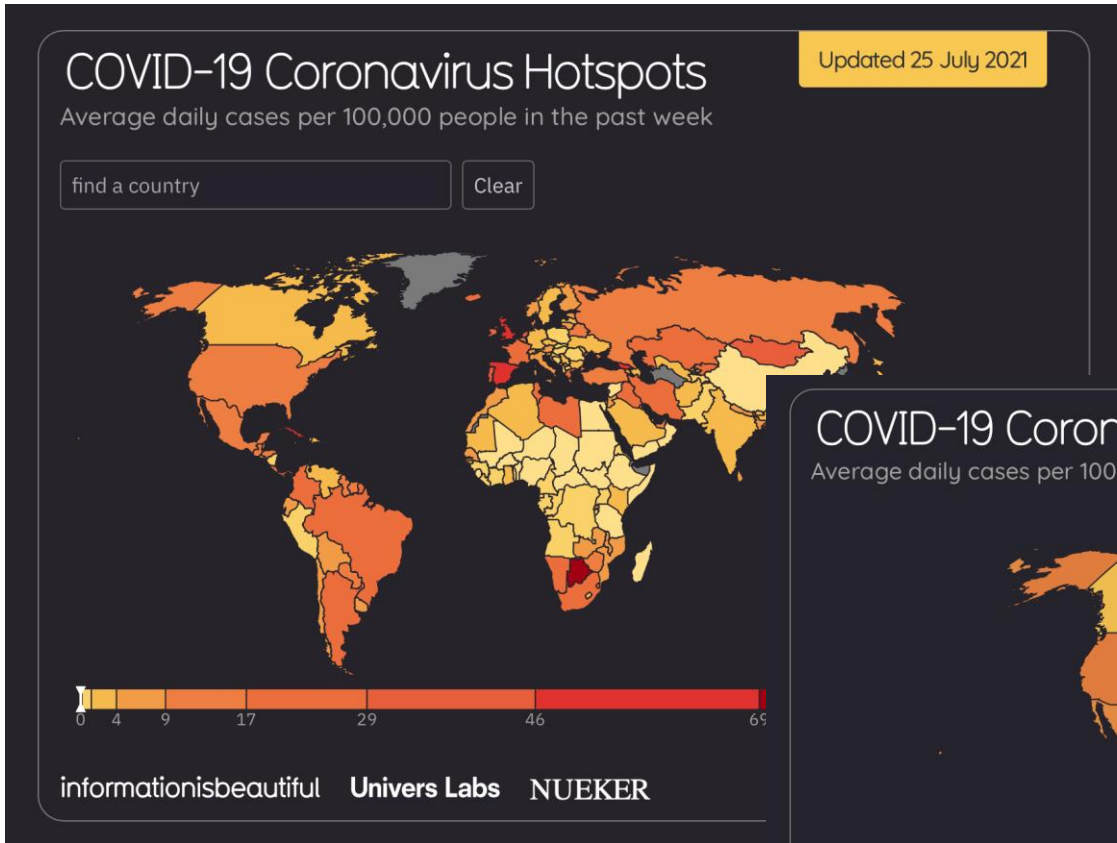
● "Deliberately emerging"



Coronaviruses

- SARS-CoV-2 (2019)
 - Enveloped (+)ssRNA virus
 - Upper & Lower Respiratory Infection
- SARS (2003)
 - 9.6% mortality
 - 8,098 cases; 774 deaths
- MERS (2012)
 - Lower Respiratory Infection
 - Fever, Cough, SOB
 - 35% mortality
 - 2,538 Cases; 871 Deaths





<https://informationisbeautiful.net/visualizations/covid-19-coronavirus-infographic-datapack/>

Coronavirus Riskiest Activities

According to 500+ epidemiologists & health professionals

📍 risk factors to consider

- 👤 **people** how many?
- 📏 **space** how close is the contact?
- 🕒 **time** how long the exposure?
- 📍 **location** inside or outside?
- 👉 **surfaces** lots of high touch?
- 📍 **area** high number of cases?
- 👤 **covidcioc** how likely is compliance?

LOW RISK



if both families have been taking care

MEDIUM RISK



HIGH RISK

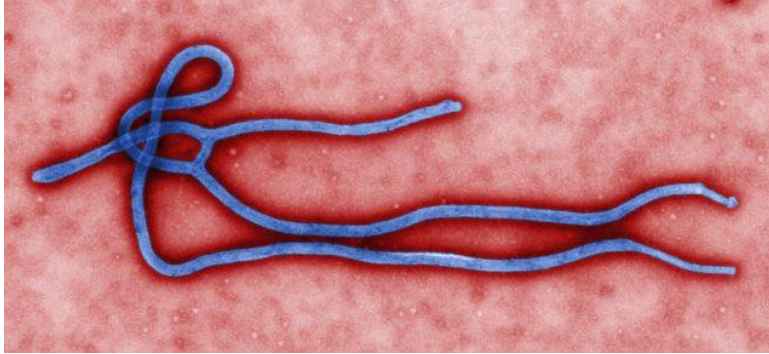


INCREASING RISK →

Risk reduced by wearing a mask, social distancing & washing hands

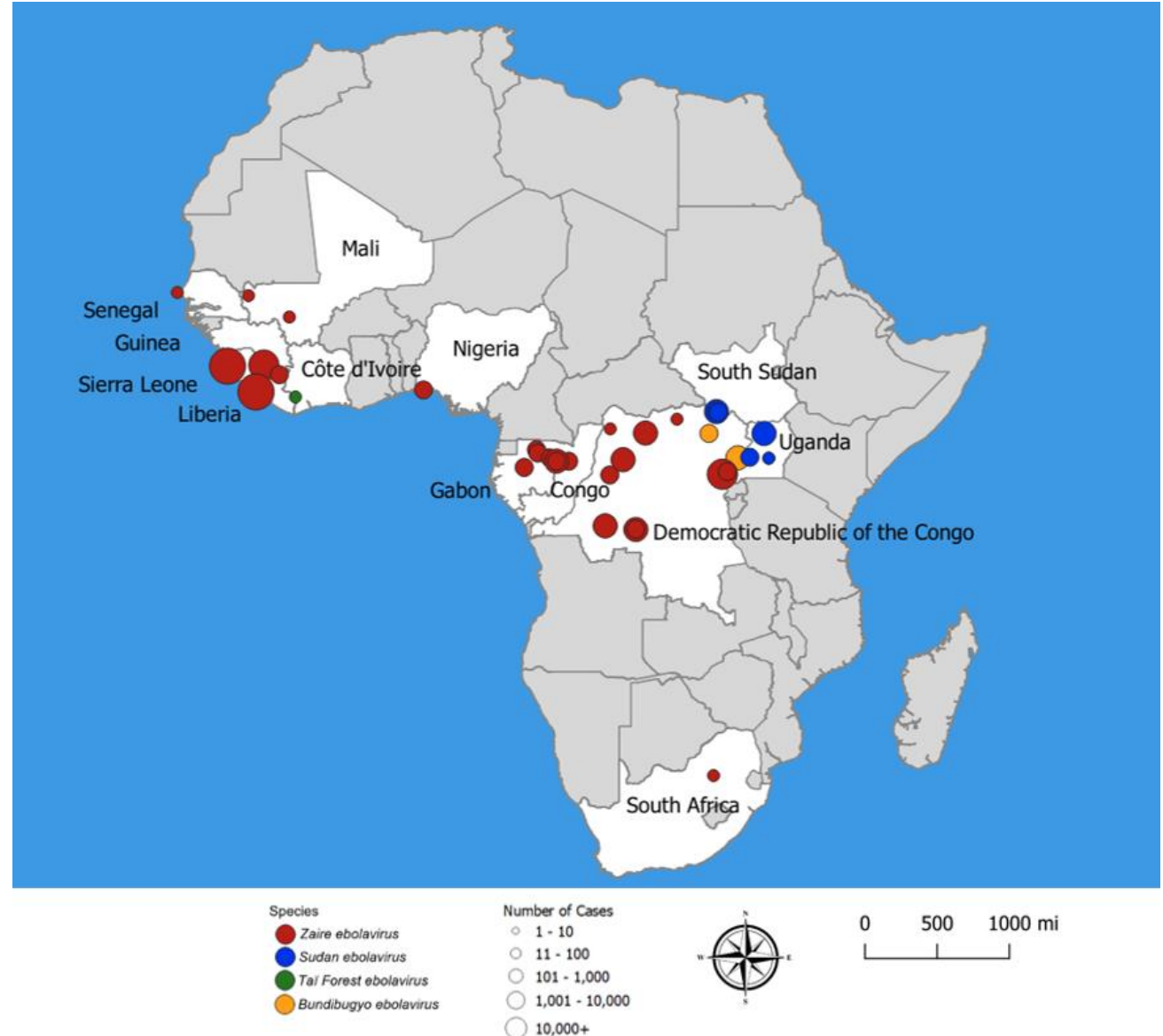
informationisbeautiful

sources: New York Times, Reuters, NPR, SF Gate & others



Filoviruses

- Ebola
 - Fatal hemorrhagic fever
 - Population growth, encroachment into forested areas, direct interaction with wildlife contributed to spread
 - Natural Host: African fruit bats
- Marburg
 - Natural host: African fruit bat



Flaviviruses

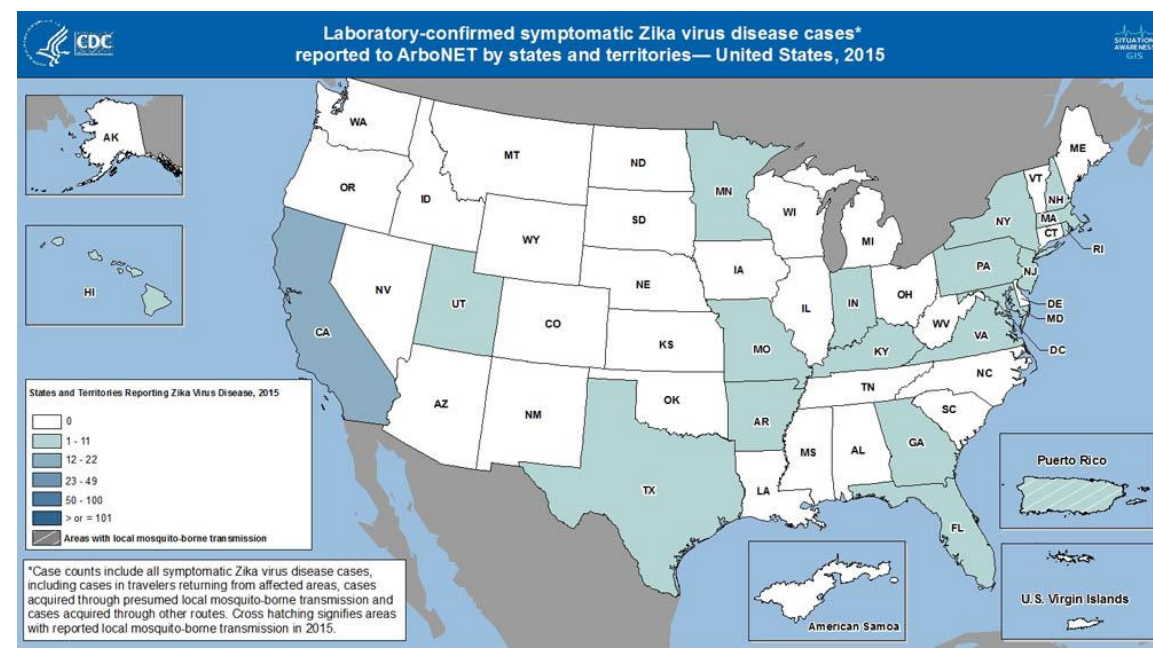
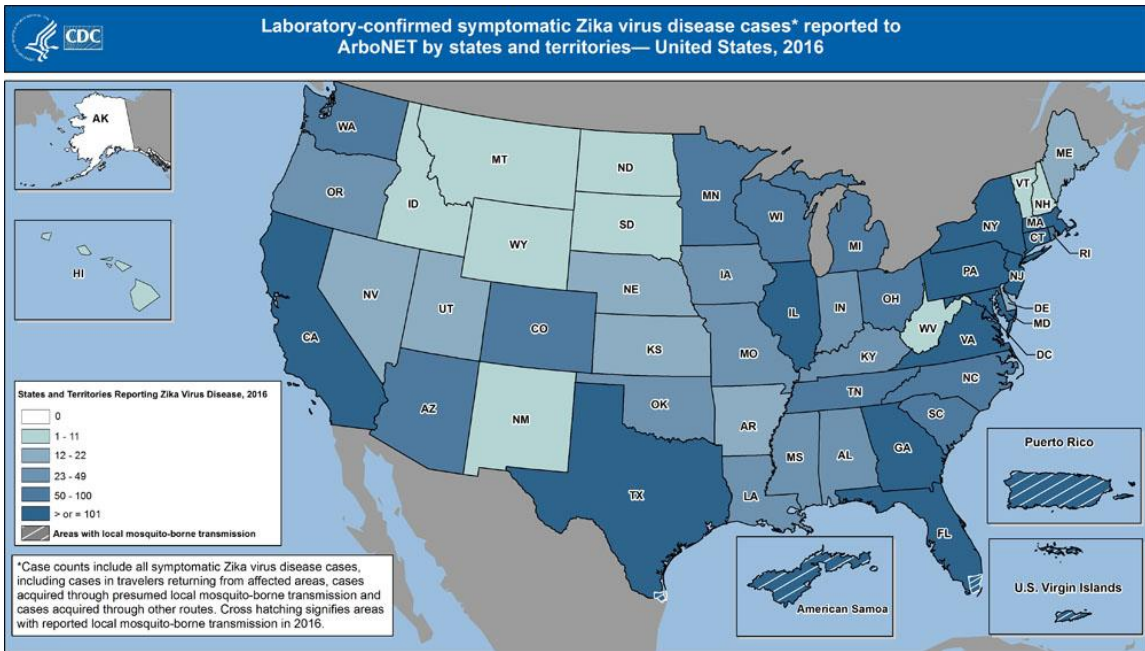
- **Mosquitoe-Transmitted**

- Yellow Fever
- Dengue Fever*
- Japanese Encephalitis
- West Nile Virus
- Zika Virus*


- **Tick-Transmitted**

- Tick-borne Encephalitis
- Kyasanur Forest Disease
- Alkhurma Disease
- Omsk Hemorrhagic Fever





Zika Virus

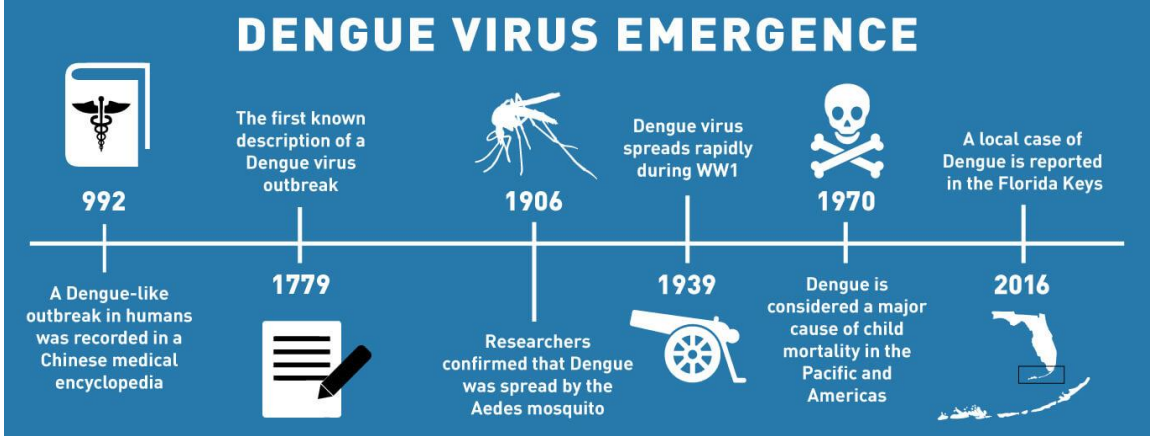


Aedes aegypti-mosquito causing dengue

Symptoms

Febrile Phase	Critical Phase	Recovery Phase
sudden-onset fever	hypotension	altered level of consciousness
headache	pleural effusion	seizures
mouth and nose bleeding	ascites	itching
muscle and joint pains	gastrointestinal bleeding	slow heart rate
vomiting		
rash		
diarrhea		

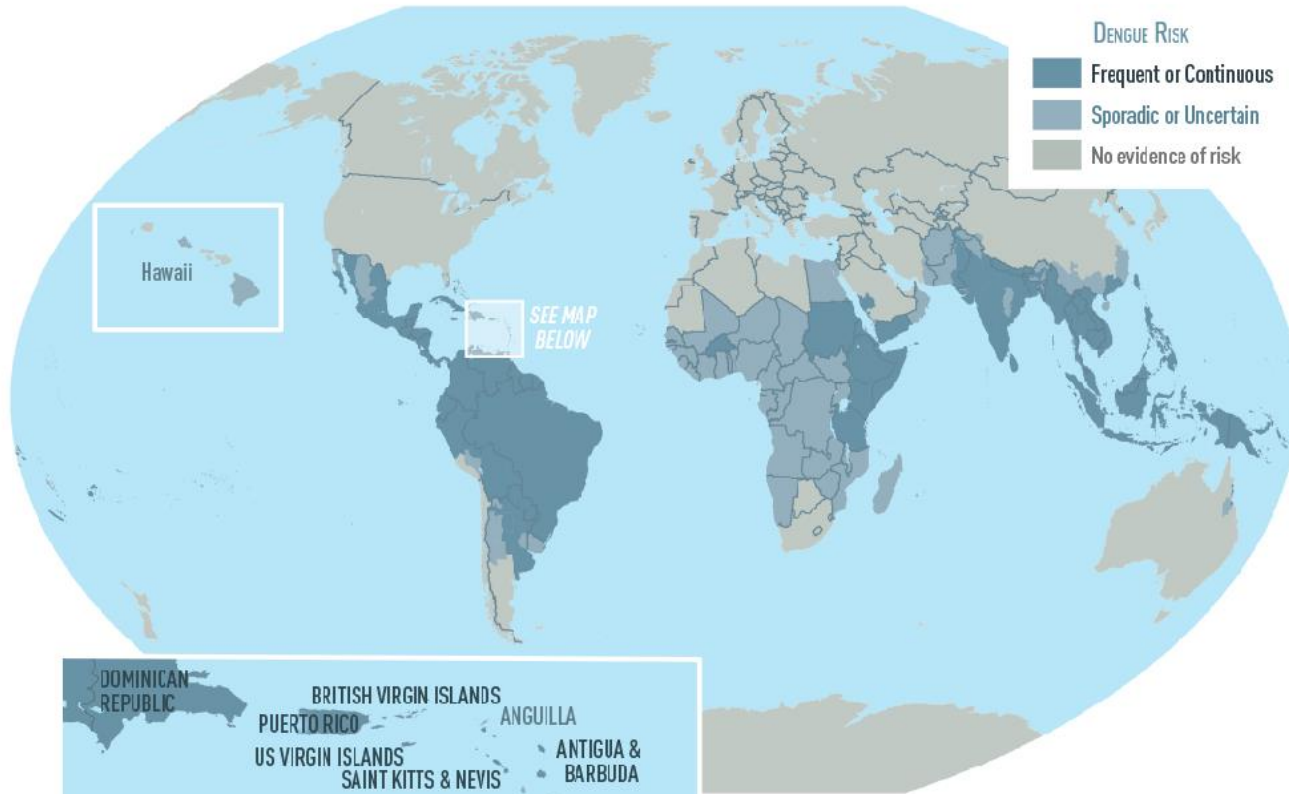
DENGUE VIRUS EMERGENCE



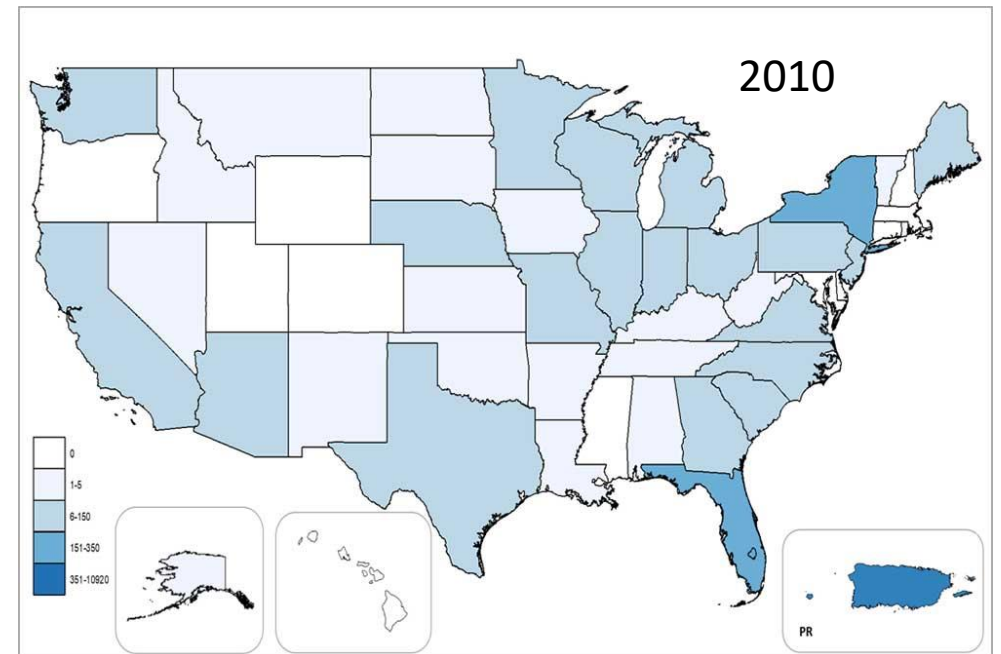
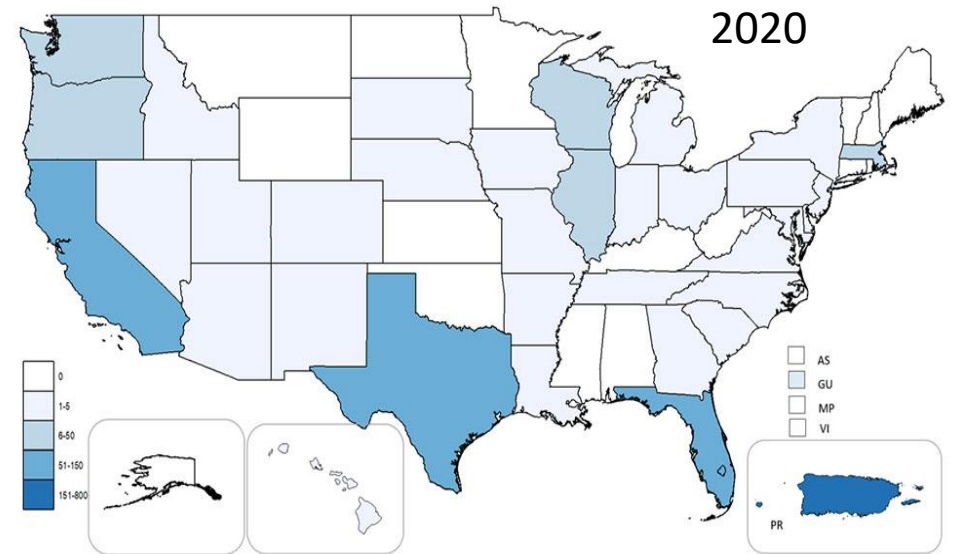
A timeline illustrating the historical emergence and spread of the Dengue virus. Key events include a Dengue-like outbreak in humans recorded in a Chinese medical encyclopedia in 992, the first known description of a Dengue virus outbreak in 1779, researchers confirming that Dengue was spread by the Aedes mosquito in 1906, Dengue virus spreading rapidly during WW1 in 1939, Dengue being considered a major cause of child mortality in the Pacific and Americas in 1970, and a local case of Dengue reported in the Florida Keys in 2016.

Year	Event
992	A Dengue-like outbreak in humans was recorded in a Chinese medical encyclopedia
1779	The first known description of a Dengue virus outbreak
1906	Researchers confirmed that Dengue was spread by the Aedes mosquito
1939	Dengue virus spreads rapidly during WW1
1970	Dengue is considered a major cause of child mortality in the Pacific and Americas
2016	A local case of Dengue is reported in the Florida Keys

Dengue Fever

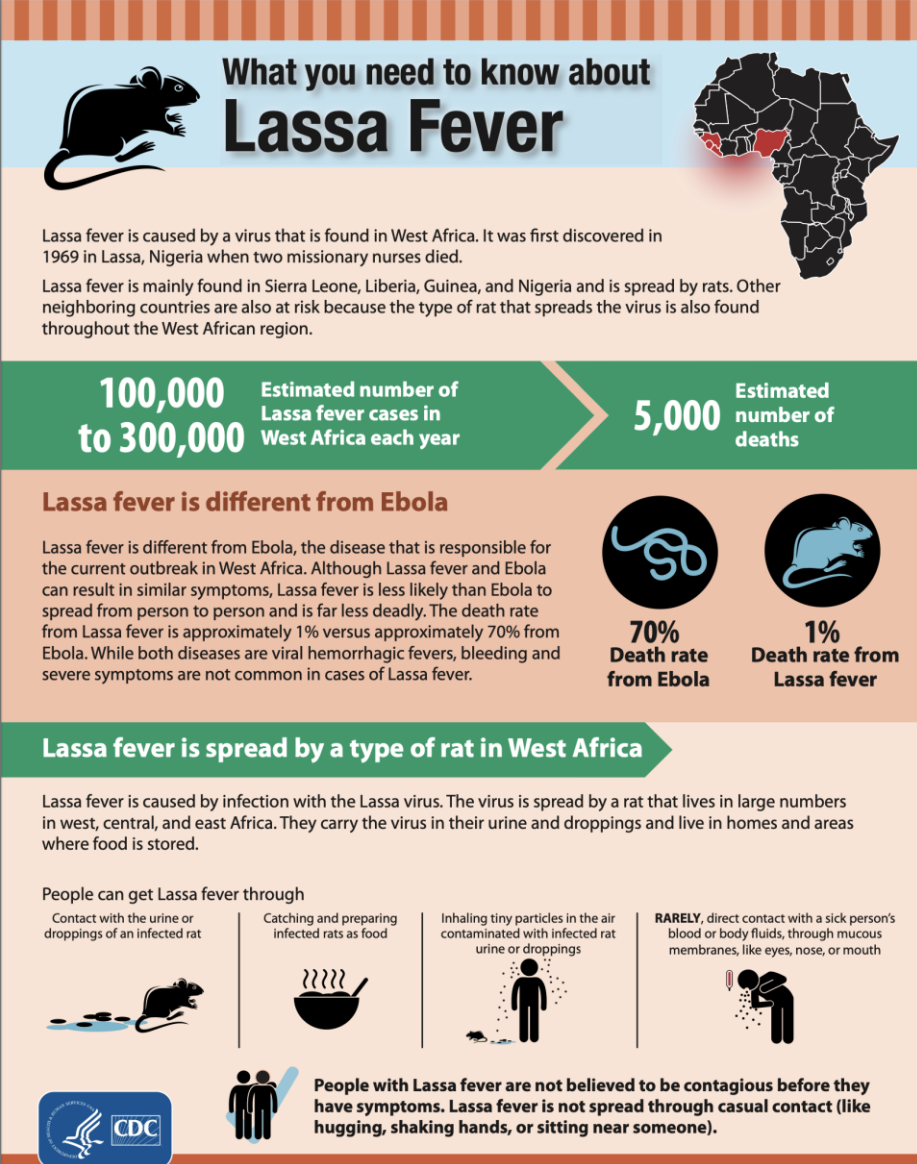


- **Worldwide Prevalence**
 - 2000: 505,430
 - 2010: 2.4 million
 - 2019: 5.2 million
- **Worldwide Deaths**
 - 2000 : 960
 - 2015: 4,032



Bunyavirales

- Crimean-Congo Hemorrhagic Fever
- Lassa
- Rift Valley Fever



What you need to know about Lassa Fever

Lassa fever is caused by a virus that is found in West Africa. It was first discovered in 1969 in Lassa, Nigeria when two missionary nurses died.

Lassa fever is mainly found in Sierra Leone, Liberia, Guinea, and Nigeria and is spread by rats. Other neighboring countries are also at risk because the type of rat that spreads the virus is also found throughout the West African region.

100,000 to 300,000 Estimated number of Lassa fever cases in West Africa each year

5,000 Estimated number of deaths

Lassa fever is different from Ebola

Lassa fever is different from Ebola, the disease that is responsible for the current outbreak in West Africa. Although Lassa fever and Ebola can result in similar symptoms, Lassa fever is less likely than Ebola to spread from person to person and is far less deadly. The death rate from Lassa fever is approximately 1% versus approximately 70% from Ebola. While both diseases are viral hemorrhagic fevers, bleeding and severe symptoms are not common in cases of Lassa fever.

70% Death rate from Ebola

1% Death rate from Lassa fever


Lassa fever is spread by a type of rat in West Africa

Lassa fever is caused by infection with the Lassa virus. The virus is spread by a rat that lives in large numbers in west, central, and east Africa. They carry the virus in their urine and droppings and live in homes and areas where food is stored.

People can get Lassa fever through

- Contact with the urine or droppings of an infected rat
- Catching and preparing infected rats as food
- Inhaling tiny particles in the air contaminated with infected rat urine or droppings
- RARELY, direct contact with a sick person's blood or body fluids, through mucous membranes, like eyes, nose, or mouth

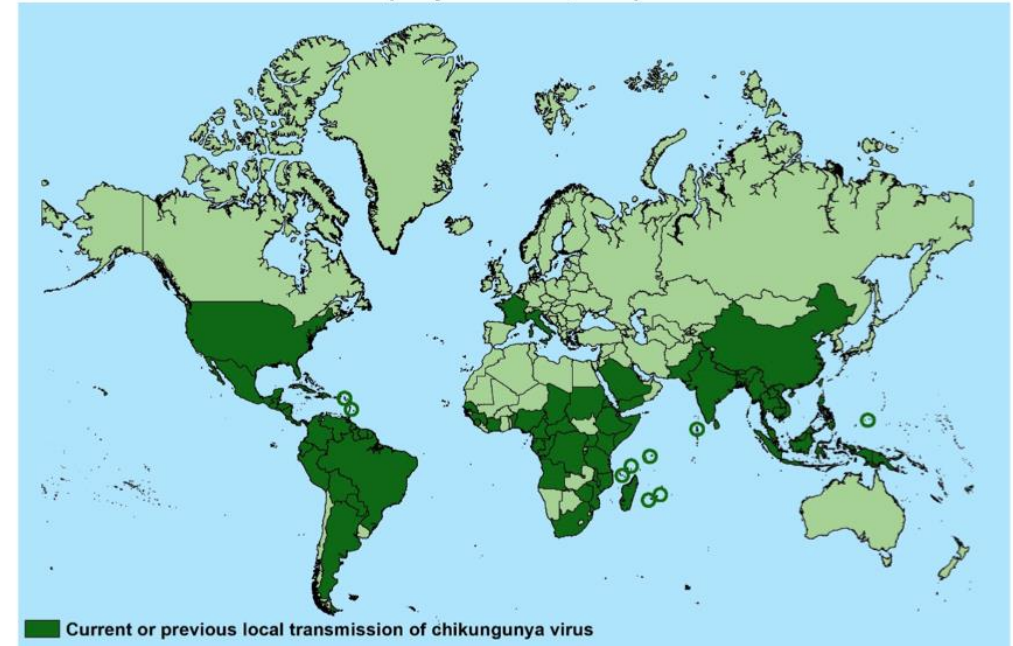
People with Lassa fever are not believed to be contagious before they have symptoms. Lassa fever is not spread through casual contact (like hugging, shaking hands, or sitting near someone).



Additional Pathogens of Interest

- Chikungunya – *Togaviride* virus family
- Nipah – *Paramyxoviridae* virus family
- Influenza

Countries and territories where chikungunya cases have been reported*
(as of October 30, 2020)



*Does not include countries or territories where only imported cases have been documented.

Principles & Preparation of Pandemic Response

Principles

- Keep the Science Straight
- Realistically evaluate threats & assets
- Rationally develop specific plans
- Identify needs
 - Doctrine
 - Organization
 - Communications
 - Equipment
 - Training
 - Speak with one voice

www.telone.co.zw

Cholera Kills Fast

1 Drink and use safe water*

2 Wash your hands often with soap and safe water

3 Cook food well, keep it covered, eat it hot, and peel fruits and vegetables

4

5 Clean up safely—in the kitchen and in places for bathing and washing clothes

STOP CHOLERA
PREVENTION TIPS

VPCG

Voice | Broadband | Satellite

Telone
Bringing You Together

The infographic features a central purple hand icon with the text 'STOP CHOLERA' and 'PREVENTION TIPS'. It is surrounded by five numbered tips: 1. Drink and use safe water* (with a person drinking from a glass icon); 2. Wash your hands often with soap and safe water (with a handwashing icon); 3. Cook food well, keep it covered, eat it hot, and peel fruits and vegetables (with a cooking pot icon); 4. (with a person holding a sign icon); 5. Clean up safely—in the kitchen and in places for bathing and washing clothes (with a person cleaning icon). The background is blue with horizontal stripes. Social media icons for Facebook, Twitter, and WhatsApp are in the top right. The Telone logo and tagline 'Bringing You Together' are at the bottom right. The website 'www.telone.co.zw' is at the top left. The acronym 'VPCG' is on the left side.

Action Phases: *Readiness*

1. Prevention
 - Shape the Battlefield
2. Preparation
 - CONOPS, Assets & Infrastructure
3. Surveillance
 - Scope, Sensitivity, Reliability, Security, & Cycle Time
4. Identification
 - Specificity, Confidence, Immediacy

Prevention: Shape the Battlefield

- Psychological Injury Management
- Public Health
- WMD -
 - Biological / Chemical / Radiological
- Risk Communication
- Education
 - Government Officials & Community Leaders
 - Responders
 - Population at Large

Prevention

Vs.

Preparation

- PREVENTION focuses on building a resistant and resilient environment.
- PREPARATION focuses on developing the capability for a coordinated, timely, and effective response.

PREPARATION

- **Assets**
 - Personnel
 - Numbers and Training
 - Equipment
 - Supplies
- **Infrastructure**
 - Authority
 - Command, Control, Communications, & Intelligence
 - Logistics

Medical Preparation

- Preparation
 - Planning
 - Facilities
 - People
 - Training
Equipment
 - Communications
- Public Education
- Community Contacts

Medical Preparation

- **Control of disease/injury**
 - Limit exposure
 - Individual. Protection
 - Mass protective measures
 - Evacuation
 - Quarantine
 - Early identification of population at risk
 - Effective communication
 - Authorities
 - Population of Responders
 - Population at Risk
 - Population at Large

Medical Preparation

- Decontamination
- Isolation as indicated
- Quarantine as necessary
- Prompt vaccination & prophylaxis
- Engineering
- Treatment of Victims
 - Surgical & Medical Emergencies
 - Specific threat-related care
 - External & Internal Decontamination
 - Antidote/Medical Therapy
 - Isolation
 - Medical evacuation
- Care of displaced Individuals / Refugees
- Continuing care of emergency workers
- Continuing care of population at large
 - Ongoing Care
 - Preventive Measures
 - Psychological Consequences

SURVEILLANCE

Scope

Sensitivity

Specificity

Reliability

Security

Cycle Time



**MAY
THE ODDS
BE EVER
IN YOUR
FAVOR**



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