

**BACKGROUND**

The National Biodefense Science Board (NBSB) formed the Personal Preparedness Working Group in response to information presented at the Board's June 2008 meeting on specific efforts to promote personal preparedness. Those efforts included: 1) exploring home stockpiles of antibiotics to be used in case of an anthrax attack and 2) guidance documents from the U.S. Department of Health and Human Services (HHS) to the public and health care providers on prescribing antibiotics so that individuals may maintain their own home stockpiles.

Immediately following the June meeting, and again in August, the Board wrote letters to the Secretary of HHS describing its discomfort with the pace at which promotion of home stockpiling through use of individual prescriptions appeared to be proceeding. In this letter, the Board recommended addressing concerns of government officials, clinicians, and the community and obtaining answers to specific scientific questions before moving too abruptly into the promotion of home stockpiling.

Working Group Co-Chair Ruth Berkelman, M.D., said that she and other members of the Board are fully supportive of the need to increase personal preparedness in this country. Home stockpiling of antibiotics is one of many strategies that may be utilized to build personal preparedness, and HHS officials have expressed their interest in pursuing this particular strategy as preparedness for an anthrax attack. As such, the Board should determine what information is needed before the Board would be willing to support widespread implementation of such a strategy. Co-Chair Andrew Pavia, M.D., suggested focusing on identifying rational, science-based approaches to the two issues above raised in June. Over the longer term, the working group should consider larger questions, such as how to develop true personal preparedness and resilience. The chair of the Board, Patricia Quinlisk, also noted that the threat of an anthrax attack is probably not uniform across the country, in that more rural areas there may need to be a greater focus on personal preparedness for natural disasters, such as floods and tornadoes, rather than for anthrax.

At the conclusion of the NBSB Personal Preparedness Working Group meeting held in Arlington, VA, on September 24, 2008, the working group discussed and developed the following recommendations to be put forward to the full National Biodefense Science Board for consideration.

**RECOMMENDATION #1:**

High-quality information can and should be obtained from an operational evaluation during the pre-positioning of antibiotic countermeasure programs. Collecting quantitative and qualitative information would enhance rather than detract from the operational aspects of those programs. Moreover, it would provide complementary and supportive data to that gathered in planned studies that make up the core of a new drug application (NDA) package for purpose-built antibiotic stockpiles. This recommendation should be considered for the two separate activities specified below.

- a. Regarding the planned implementation of the Cities Readiness Initiative (CRI) Postal Module in Minnesota, we believe that there is extensive experience and expertise among the epidemiologists at the Minnesota Department of Health, as well as at the Centers for Disease Control and Prevention for this activity.
- b. Regarding the potential pre-positioning of antibiotics for the January 2009 Inaugural Capitol Region, we believe that there is extensive experience and expertise among the epidemiologists within the National Capitol region, as well as at the Centers for Disease Control and Prevention for this activity.

**RECOMMENDATION #2:**

We recommend that operational and qualitative research be conducted in order to better understand what issues and triggers drive individual decisions to participate in personal preparedness activities and their adherence to instructions on proper storage and use of individual antibiotic caches. Lessons can be learned from disaster preparedness in high risk areas for storms (high probability, moderate impact) and earthquakes (low probability but possibly catastrophic impact) where personal preparedness has been emphasized for many years.

**RECOMMENDATION #3:**

A draft HHS document, "Personal Preparedness for an Anthrax Emergency: Benefits and Risks of Home Storage of Antibiotic Drugs: Questions and Answers," was provided to the NBSB members at the August 11, 2008 teleconference. Pending review by the Personal Preparedness working group of the NBSB, we recommend that this draft document be considered for pilot testing in programs such as the CRI Postal Module in Minnesota or any other separate program such as the January 2009 Inaugural Capitol Region program.