

To: Scheidel, O.F. (Ciska) (10)(2e) @minvws.nl  
From: (10)(2e)  
Sent: Thur 1/30/2020 7:57:32 PM  
Subject: FW: info over pheic

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Van: (10)(2e) <(10)(2e)@minvws.nl>  
Datum: donderdag 30 jan. 2020 5:15 PM  
Aan: (10)(2e) <(10)(2e)@minvws.nl>, Dienstpostbus DCC-VWS <DCC@minvws.nl>, (10)(2e) <(10)(2e)@minvws.nl>, (10)(2e) <(10)(2e)@minvws.nl>  
Onderwerp: FW: info over pheic

Ter info, zo zag de PHEIC er uit bij zika, dan weten we een beetje wat we kunnen verwachten.  
Dus: aanbevelingen voor personen, voor specifieke landen en voor overige landen.  
Groet, (10)(2e)

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Van: (10)(2e) <(10)(2e)@minvws.nl>  
Verzonden: donderdag 30 januari 2020 17:00  
Aan: (10)(2e) <(10)(2e)@minvws.nl>; (10)(2e) <(10)(2e)@minvws.nl>; (10)(2e) <(10)(2e)@minvws.nl>; (10)(2e) <(10)(2e)@minvws.nl>; (10)(2e) <(10)(2e)@minvws.nl>  
CC: Driee, R.A. <(10)(2e)@minvws.nl>  
Onderwerp: RE: info over pheic

Beste (10)(2e)

Het is een beetje koffiedik kijken, omdat iedere PHEIC anders is. Mexicaanse griep ging de hele wereld aan, maar was anders omdat er aanbevolen werd te vaccineren. Ebola natuurlijk ook weer anders. Daarom is de Zika verklaring wel handig om naar te kijken hoe het er ongeveer uit zal zien. Ik verwacht dat als de WHO een PHEIC verklaart er specifieke aanbevelingen van de committee worden gedaan. Bijv. Uitgesplitst naar getroffen landen (China en de landen waar al besmettingen zijn), de rest van de wereld. Wellicht ook nog potentiële patientengroepen.

Groet,

(10)(2e)

The third meeting of the Emergency Committee (EC) convened by the Director-General under the International Health Regulations (2005) (IHR 2005) regarding microcephaly, other neurological disorders and Zika virus was held by teleconference on 14 June 2016, from 13:00 to 17:15 Central European Time. In addition to providing views to the Director-General on whether the event continued to constitute a Public Health Emergency of International Concern (PHEIC), the Committee was asked to consider the potential risks of Zika transmission for mass gatherings, including the Olympic and Paralympic Games scheduled for August and September 2016, respectively, in Rio de Janeiro, Brazil.

The Committee was briefed on the implementation of the Temporary Recommendations issued by the Director-General on 8 March 2016 and updated on the epidemiology and association of Zika virus infection, microcephaly and Guillain-Barré Syndrome (GBS) since that time. The following States Parties provided information on microcephaly, GBS and other neurological disorders occurring in the presence of Zika virus transmission: Brazil, Cabo Verde, Colombia, France, and the United States of America. Advisors to the Committee provided further information on the potential risks of Zika virus transmission associated with mass gatherings and the upcoming Olympic and Paralympic Games, and the Committee thoroughly reviewed the range of public perspectives, opinions and concerns that have recently been aired on this subject.

The Committee concurred with the international scientific consensus, reached since the Committee last met, that Zika virus is a cause of microcephaly and GBS, and, consequently, that Zika virus infection and its associated congenital and other neurological disorders is a Public Health Emergency of International Concern (PHEIC). The Committee restated the advice it provided to the Director-General in its 2<sup>nd</sup> meeting in the areas of public health research on microcephaly, other neurological disorders and Zika virus, surveillance, vector control, risk communications, clinical care, travel measures, and research and product development.

The Committee noted that mass gatherings, such as the Olympic and Paralympic Games, can bring together substantial numbers of susceptible individuals, and can pose a risk to the individuals themselves, can result in the amplification of transmission and can, potentially, contribute to the international spread of a communicable disease depending on its epidemiology, the risk factors present and the mitigation strategies that are in place. In the context of Zika virus, the Committee noted that the individual risks in areas of transmission are the same whether or not a mass gathering is conducted, and can be minimized by good public health measures. The Committee reaffirmed and updated its advice to the Director-General on the prevention of infection in international travellers as follows:

- Pregnant women should be advised not to travel to areas of ongoing Zika virus outbreaks; pregnant women whose sexual partners live in or travel to areas with Zika virus outbreaks should ensure safe sexual practices or abstain from sex for the duration of their pregnancy,
- Travellers to areas with Zika virus outbreaks should be provided with up to date advice on potential risks and appropriate measures to reduce the possibility of exposure through mosquito bites and sexual transmission and, upon return, should take appropriate measures, including practicing safer sex, to reduce the risk of onward transmission,
- The World Health Organization should regularly update its guidance on travel with evolving information on the nature and duration of risks associated with Zika virus infection.

Based on the existing evidence from the current Zika virus outbreak, it is known that this virus can spread internationally and establish new transmission chains in areas where the vector is present. Focusing on the potential risks associated with the Olympic and Paralympic Games, the Committee reviewed information provided by Brazil and Advisors specializing in arboviruses, the international spread of infectious diseases, travel medicine, mass gatherings and bioethics. The Committee concluded that there is a very low risk of further international spread of Zika virus as a result of the Olympic and Paralympic Games as Brazil will be hosting the Games during the Brazilian winter when the intensity of autochthonous transmission of arboviruses, such as dengue and Zika viruses, will be minimal and is intensifying vector-control measures in and around the venues for the Games which should further reduce the risk of transmission.

The Committee reaffirmed its previous advice that there should be no general restrictions on travel and with countries, areas and/or territories with Zika virus transmission, including the cities in Brazil that will be hosting the Olympic and Paralympic Games. The Committee provided additional advice to the Director-General on mass gatherings and the Olympic and Paralympic Games as follows:

- Countries, communities and organizations that are convening mass gatherings in areas affected by Zika virus outbreaks should undertake a risk assessment prior to the event and increase measures to reduce the risk of exposure to Zika virus,
- Brazil should continue its work to intensify vector control measures in and around the cities and venues hosting Olympic and Paralympic Games events, make the nature and impact of those measures publicly available, enhance surveillance for Zika virus circulation and the mosquito vector in the cities hosting the events and publish that information in a timely manner, and ensure the availability of sufficient insect repellent and condoms for athletes and visitors,
- Countries with travellers to and from the Olympic and Paralympic Games should ensure that those travellers are fully informed on the risks of Zika virus infection, the personal protective measures that should be taken to reduce those risks, and the action that they should take if they suspect they have been infected. Countries should also establish protocols for managing returning travellers with Zika virus infection based on WHO guidance,
- Countries should act in accordance with guidance from the World Health Organization on mass gatherings in the context of Zika virus outbreaks, which will be updated as further information becomes available on the risks associated with Zika virus infection and factors affecting national and international spread.

Based on this advice the Director-General declared the continuation of the Public Health Emergency of International Concern (PHEIC). The Director-General reissued the Temporary Recommendations from the 2<sup>nd</sup> meeting of the Committee, endorsed the additional advice from the Committee's 3<sup>rd</sup> meeting, and issued them as Temporary Recommendations under the IHR (2005). The Director-General thanked the Committee Members and Advisors for their advice.

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**Van:** (10)(2e) <(10)(2e)@minvws.nl>  
**Datum:** donderdag 30 jan. 2020 2:14 PM  
**Aan:** (10)(2e) <(10)(2e)@minvws.nl>, (10)(2e) <(10)(2e)@minvws.nl>, (10)(2e) <(10)(2e)@rivm.nl>  
**Onderwerp:** RE: info over pheic

Top!

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**Van:** (10)(2e) <(10)(2e)@minvws.nl>  
**Verzonden:** donderdag 30 januari 2020 13:10  
**Aan:** (10)(2e) <(10)(2e)@minvws.nl>, (10)(2e) <(10)(2e)@minvws.nl>, (10)(2e) <(10)(2e)@minvws.nl>, (10)(2e) <(10)(2e)@rivm.nl>  
**Onderwerp:** RE: info over pheic

Hoi (10)(2e)

Ik neem (10)(2e) mee in dit verzoek. Hij houdt zich met GHSA en IHR bezig. Ik zit momenteel vast in overleg. Daarna zal ik bij de heren langslopen en mijn ervaringen met PHEIC delen.

Groet,

(10)(2e)

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**Van:** (10)(2e) <(10)(2e)@minvws.nl>  
**Datum:** donderdag 30 jan. 2020 12:06 PM  
**Aan:** (10)(2e) <(10)(2e)@minvws.nl>, (10)(2e) <(10)(2e)@minvws.nl>  
**Onderwerp:** info over pheic

Ha beiden,  
 Kunnen jullie wellicht bijgaand document nog aanvullen met jullie (ervarings)kennis over pheics?  
 Zou super zijn als dat snel kan.  
 Groet, (10)(2e)

**Van:** (10)(2e)  
**Verzonden:** donderdag 30 januari 2020 10:58  
**Aan:** (10)(2e) <(10)(2e)@minvws.nl>, (10)(2e) <(10)(2e)@minvws.nl>, (10)(2e) <(10)(2e)@minvws.nl>, (10)(2e) <(10)(2e)@minvws.nl>, (10)(2e) <(10)(2e)@minvws.nl>  
**Onderwerp:** RE: Briefing dr. Tedros during PBAC 29-01-2020 17:00

Dit is alvast wat ik opgesnord heb over PHEIC, daar zal ik info die nog van (10)(2e) komt invoegen.  
 Groet, (10)(2e)

**Van:** (10)(2e) <(10)(2e)@minvws.nl>  
**Verzonden:** donderdag 30 januari 2020 10:51  
**Aan:** (10)(2e) <(10)(2e)@minvws.nl>, (10)(2e) <(10)(2e)@minvws.nl>, (10)(2e) <(10)(2e)@minvws.nl>  
**Onderwerp:** FW: Briefing dr. Tedros during PBAC 29-01-2020 17:00

**Van:** (10)(2e)  
**Verzonden:** donderdag 30 januari 2020 10:47  
**Aan:** (10)(2e) <(10)(2e)@minbuza.nl>, (10)(2e) <(10)(2e)@minvws.nl>  
**CC:** (10)(2e) <(10)(2e)@minvws.nl>, (10)(2e) <(10)(2e)@minvws.nl>, \_Dienstpostbus DCC-VWS <DCC@minvws.nl>  
**Onderwerp:** RE: Briefing dr. Tedros during PBAC 29-01-2020 17:00

Dag (10)(2e),

Dankjewel! Kun je ons alvast info geven over wat het betekent/ kan betekenen als er een PHEIC wordt uitgesproken?  
 -Welke maatregelen kan de WHO opleggen of adviseren?  
 -Verandert er iets in coördinatie / geldstromen?  
 -Wat zijn (eventuele) verdere gevolgen van een PHEIC?

Groet,

(10)(2e)

**Van:** (10)(2e) <(10)(2e)@minbuza.nl>  
**Verzonden:** donderdag 30 januari 2020 10:19  
**Aan:** (10)(2e) <(10)(2e)@minvws.nl>  
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**Onderwerp:** FW: Briefing dr. Tedros during PBAC 29-01-2020 17:00

Collega's, zie bijgaand bericht, eerste reactie van DGWHO, om 1200u is er een algemene briefing. Ik zal daarover rapporteren.

(10)(2e)

From: (10)(2e) <(10)(2e)@minbuza.nl>

Sent: woensdag 29 januari 2020 18:51

To: (10)(2e) <(10)(2e)@minbuza.nl>; (10)(2e) <(10)(2e)@minbuza.nl>; (10)(2e)

<(10)(2e)@minbuza.nl>

Cc: (10)(2e) <(10)(2e)@minbuza.nl>

Subject: RE: Briefing dr. Tedros during PBAC 29-01-2020 17:00

Dank je wel (10)(2e) – alsof ik er bij was! (10)(2e) ook interessant voor jou.

Dubbel

