ICAO Session

Orlando, May 2015

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IATA Medical Advisor
ICAO Session

International Airline Medicine
The last 15 years
Some aerospace medicine practitioners have an impact in the international arena by virtue of their positions.
ICAO Session

The Practice of International Aerospace Medicine

- ICAO
- IATA (International Airline Medicine)
- IAPA
- International Space Medicine
- IAASM
- CAMA
- IFALPA
- AMDA
- AsMA
International Air Transport Association

- Trade association of world’s airlines
  - Represent, lead, serve
- Incorporated in Canada in 1945
  - ‘Not for profit’ organization
- ~ 250 member airlines in 130 nations
  ~ 84% of passenger and cargo traffic
- ~ 1300 employees around the globe
- Mains offices: Montreal and Geneva
  - several regional/national offices
What does IATA do?

- Aircraft Operations
- Airport Development and Infrastructure
- Cargo
- Finance
- Industry Initiatives
- Passenger
- Regulatory and Public Policies
- **Health and Safety**
- Security and Facilitation
IATA Health and Safety

Medical Advisory Group
disbanded in 1987

International Airline Medical Advisory Council
1988 – 2001

Medical Advisory Group resuscitated
2001 –
Up to 10 members (hopefully different regions), only 7 currently
IATA

Medical Advisory Group

- Medical director Air France
- “ British Airways
- “ Emirates Airlines
- “ Air New Zealand
- “ KLM
- “ Qantas
- “ Virgin Atlantic
International Airline Medicine

Why choose the last 15 years?

Medical Advisory Group resuscitated 2001

and
International Airline Medicine

Section 1 of IATA Medical Manual

Role and responsibilities of an airline medical department

- Introduction
- Passenger health (also Section 6: Passenger Care)
- Employee health
- Position in the corporate organization
- Structure within the medical department
- The role of the medical department
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Section 1 of IATA Medical Manual

Role of the medical department

- Pre-Employment Assessment
- Periodic Health Assessment
- Care of Air Crew
- Health Supervision of the Work Environment
- Health and Safety Education
- Accident and Emergency Services
- Aircraft Accidents
- Immunization
- Advice to Management
Section 6: Passenger care

- Fitness to fly

- Airline initial emergency medical response programmes

- MEDIF and FREMEC Cards (Medical clearance)
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Is there anything missing or not emphasized enough?
Public Health Issues
SARS
What You Need to Know
The New Age of Epidemics
SARS 2003
Lessons from SARS

- Aviation industry not well prepared for an international public health emergency
- Reaction time is critical
- Lack of attention to aviation by public health authorities
- Lack of coordination between aviation industry and public health authorities
Lessons from SARS

- Very limited amount of guidance for airlines

- Desperate situations promote urgent & desperate measures “Due to the spread of SARS disease, all nationals and residents of the following five countries (........) are not permitted to enter the country of .....for any purpose.”
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**SARS** was the trigger to initiate or improve preparedness planning for diseases described by the World Health Organization (WHO) as having potential to cause a “public health emergency of international concern”.
IATA Medical Advisor

- Develop industry positions on airline medical issues in association with the Medical Advisory Group
- Represent the industry with governments, the media and other groups on airlines Medical issues
- **Establish and maintain effective working relations with WHO and other international bodies involved in airline medical issues**
- Provide advices to member airlines on airline medical issues
- Develop and update IATA guidance material as required
Public Health Passenger Locator Form: To protect your health, public health officers need you to complete this form whenever they suspect a communicable disease onboard a flight. Your information will help public health officers to contact you if you were exposed to a communicable disease. It is important to fill out this form completely and accurately. Your information is intended to be held in accordance with applicable laws and used only for public health purposes.

Thank you for helping us to protect your health.

One form should be completed by an adult member of each family. Print in capital (UPPERCASE) letters. Leave blank boxes for spaces.

<table>
<thead>
<tr>
<th>FLIGHT INFORMATION:</th>
<th>1. Airline name</th>
<th>2. Flight number</th>
<th>3. Seat number</th>
<th>4. Date of arrival (yyyy/mm/dd)</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>PERSONAL INFORMATION:</th>
<th>5. Last (Family) Name</th>
<th>6. First (Given) Name</th>
<th>7. Middle Initial</th>
<th>8. Your sex</th>
</tr>
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<td>Male ☐ Female ☐</td>
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</table>

9. Mobile

10. Business

11. Home

12. Other

13. Email address

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<tr>
<th>PHONE NUMBER(S) where you can be reached if needed. Include country code and city code.</th>
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</thead>
</table>

14. Number and street (Separate number and street with blank box)

15. Apartment number

<table>
<thead>
<tr>
<th>PERMANENT ADDRESS:</th>
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16. City

17. State/Province

18. Country

19. ZIP/Postal code

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<tr>
<th>TEMPORARY ADDRESS:</th>
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</thead>
</table>

20. Hotel name (If any)

21. Number and street (Separate number and street with blank box)

22. Apartment number

23. City

24. State/Province

25. Country

26. ZIP/Postal code

<table>
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<tr>
<th>EMERGENCY CONTACT INFORMATION of someone who can reach you during the next 30 days</th>
</tr>
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</table>

27. Last (Family) Name

28. First (Given) Name

29. City

30. Country

31. Email

32. Mobile phone

33. Other phone

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<thead>
<tr>
<th>34. TRAVEL COMPANIONS – FAMILY: Only include age if younger than 18 years</th>
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<tbody>
<tr>
<td>(1) Last (Family) Name</td>
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<tr>
<th>35. TRAVEL COMPANIONS – NON-FAMILY: Also include name of group (if any)</th>
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<tbody>
<tr>
<td>(1) Last (Family) Name</td>
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2004

- Guidelines for suspected communicable diseases for cabin crew, cleaning crew, and passenger agents. Eventually adding maintenance crew and cargo and baggage agents.

- Creation of IATA Health Page

- WHO was dealing with the WRIGHT Project, the IHR revision, Polio outbreak in Nigeria, beginning of Avian Flu, and International travel and health

- Creation of the WHO Informal Transportation Working Group for IHR, of which IATA was a member
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IHR

Article 2 Purpose and scope

The purpose and scope of these Regulations are to prevent, protect against, control and provide a public health response to the international spread of disease in ways that are commensurate with and restricted to public health risks, and which avoid unnecessary interference with international traffic and trade.
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IHR

Article 43 Additional health measures

............For the purpose of this Article, significant interference generally means refusal of entry or departure of international travellers, baggage, cargo, containers, conveyances, goods, and the like, or their delay, for more than 24 hours.
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2005

- H5N1
- Revised IHR voted by the Health Assembly
- Addition of one full page for communicable disease to the IATA original Health Page
- Transport of diagnostic specimen
- Revision of WHO TB guidelines (2nd)
- WHO manual "International Travel and Health"
- IATA status as NGO in official relations with the WHO (1959)
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ICAO intervention

- 2005 WHO meeting on Avian Influenza and Human Pandemic Influenza
- WHO recognized the importance of the aviation sector but did not offer any plan to go forward
- As a result, ICAO took the lead to coordinate the activities of the aviation industry
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2006

- ICAO Singapore seminar: preparedness guidelines
- Creation of CAPSCA
- IATA ERP template for carriers
- Polonium-210 incident
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2007

- ICAO Working Group on aircraft disinfection
- WHO, Aircraft manufacturers, disinfection experts, US CDC
TUBERCULOSIS and AIR TRAVEL

GUIDELINES
FOR PREVENTION AND CONTROL

THIRD EDITION

World Health Organization
International Airline Medicine

2008

- Working group to review the methods and requirements for aircraft disinsection

Communication and coordination between the stakeholders is critical.

- Guide to Hygiene and Sanitation in Aviation
- Case management of Influenza A(H1N1) in air transport

**WHO global Preparedness**

**ICAO Standards & Guidelines for States**

- Airports Council International: Airport Guidelines
- International Air Transport Association: Airline Guidelines

**IHR 2005**
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As a result of the cooperative efforts during the pandemic planning phase, the following critical activities happened quickly during the H1N1 crisis:

- Excellent cooperation between WHO, ICAO and IATA to publish the WHO document “Guide to hygiene and sanitation in aviation” in warp time

- WHO technical advice for case management of H1N1 in air transport

IATA propose a template for Health Declaration Form
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2011

- Tsunami and nuclear accident in Japan

- ICAO, IAEA, WMO, UNWTO, IMO, ILO, ACI

- Lead to creation of IACRNE (Inter-Agency Committee on Radiological and Nuclear Emergencies)
Sick nurse was on this jet & CDC knew

AIR EBOLA
Frantic hunt for 132 passengers
EBOLA

UN Joint Travel and Transport Task Force
- ICAO (Coordinator); WHO; UNWTO; IMO
- IATA; ACI; CLIA; ICS

CDC Ebola Response Team
- WHO; ICAO
- IATA; ACI
EBOLA

- ICAO Aviation Action Plan in cooperation with WHO

- WHO Sub regional Workshops to Enhance Capacity at Points of Entry for Preparedness and Response to Ebola Virus Disease
Public Health Emergency

Aviation Issues

- Entry and exit screening
- Aircraft disinsection
- Aircraft disinfection
- Transport of biological specimen
- Management of suspected communicable diseases on board
- Personal Protective Equipment
- Contact tracing
- Coordination with public health authorities
- IHR Article 43
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Other Issues relevant to aviation

- Cabin Air Quality
- Cosmic radiation
- Medical guidelines for air travel and Medical clearance for ill passengers
- Management of in-flight medical events
- Medical diversion and death on board
- Medical kits on board
- Medical fitness for cabin crew
- Mental illness in aircrew
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Other relevant issues in aviation (cont.)

- Fatigue risk management
- Passengers with reduced mobility
- Aircraft drinking water
- International Transport of Human Remains
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In summary:

- We are still dealing with the common issues in international airline medicine

- Public health issues are and will continue to take the lion’s part of the time

- Better cooperation within the International Aviation Industry stakeholders: ICAO, ACI, IATA
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In summary:

- Better cooperation between WHO and the International Aviation Industry stakeholders

- Better cooperation between some States and the International Aviation Industry stakeholders

- Unfortunately many States still pay more attention to political information than scientific information and international public health information to make public health decisions
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Challenges 2005

- Cultural differences
- WHO structure and operations
- WHO and the private industry
- Speed of international bodies
- Lack of interaction between different governmental departments
- Recognition within IATA
- Decisions are people dependent
Thank you for your attention