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guest commentary

Antiviral decision defended

By Ned Calonge

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We were surprised and disappointed to read the editorial, "Lesson learned with swine flu," in Wednesday's Denver Post. The editorial is not helpful because it provides misinformation and even may serve to unnecessarily frighten the public about swine flu.

The decision not to purchase additional antivirals, over and above what already is available commercially and as part of the strategic national stockpile, was not made in isolation. Rather, it was vetted by experts in a wide range of health care fields and had the support of the Governor's Expert Emergency Epidemic Response Committee, the Colorado Medical Society, the Public Health Directors of Colorado and the Colorado Association of Public Health Leaders.

In its editorial, The Post attempts to reduce the decision about the purchase of additional antivirals to a financial decision — completely ignoring the modest potential effectiveness of

these medications and whether or not the state already has an adequate supply with its 678,000 courses of medication available to Colorado from the federal national stockpile.

While The Post cites a February 2008 memo about the decision not to purchase additional antivirals, it chose not to share with readers the significant analysis and thought that went into that decision. The state opted not to purchase the additional medications "due to lack of scientific evidence of antiviral effectiveness during a pandemic" and because Colorado's federal allotment of 677,699 doses will be "more than sufficient to cover all hospitalized patients, all high risk patients who get the flu and seek care, all essential service workers . . . who get the flu and seek care, and at least eight weeks of continuous prophylaxis for all health care workers taking care of flu patients."

It is difficult to know what additional doses, which would have to be obtained with Colorado taxpayers' money, would be used for.

The decision made more than a year ago still appears to be the best decision for use of our precious state resources. Even the 167,000 courses of medication already in Colorado from the federal stockpile are more than enough to treat every patient that Mexico has identified since the outbreak began more than a month ago. The medication from the stockpile may not need to be used in Colorado, but they are here in the event they are needed. Again, that buttresses the decision Colorado's health experts made a year ago.

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As we told The Post, antiviral medications will play a very small role in a successful response to any flu epidemic. There is no conclusive evidence of significant benefit from the use of these drugs for the seasonal flu.

All public health officials are emphasizing that the best strategies are prevention through hand washing, keeping sick individuals at home and away from school and work, and avoiding contact with people experiencing respiratory illness. While the CDC has stated the drugs are somewhat active against the swine flu, this does not mean they are effective.

As late as Tuesday, the CDC admitted it has no evidence that the drugs work. The drugs would be expected to have a role in preventing the flu in those individuals who are at high risk for exposure and may have a role in people with severe illness or those with underlying medical conditions. With antivirals from the national stockpile now in state, we have plenty for these purposes.

Ned Calonge is chief medical officer for the Colorado Department of Public Health and Environment. Also signing this guest commentary are:

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