

President PHILIP RUMORE



October 19, 2009

BUFFALO TEACHERS
FEDERATION, INC

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MEMO TO: Howard A. Freed, M.D., Director
Center for Environmental Health

FROM: Philip Rumore, President, BTF 

RE: H1N1/Hand Sanitizers

Thank you for your very informative and comprehensive letter of October 2, 2009, relating to our concern that the use of hand sanitizers with less than 60% alcohol (like most that are in use in our schools) presents a danger in that it creates a false sense of security.

We suggest that the information in your and the State Education Department's memos be sent to the appropriate people in the schools and other organizations that you deem appropriate.

We have, after months of trying by the Buffalo Teachers Federation and Buffalo Public School District, finally received a report prepared by Bio Science Laboratories (enclosed document 2), which appears to demonstrate that the product the Buffalo Public School District is using is effective (99.99%) against H1N1.

We assume that the claimed effectiveness against H1N1 is as a result of the .24% Benzalkonium chloride in the sanitizing foam used by the District (see document 1(d)) and that the concentration of Benzalkonium chloride in the lot they tested (0162213) was the same (24%) as in that used by the Buffalo Public Schools.

We would appreciate knowing whether you concur that Aero Instant Free Foaming Hand Sanitizer (document 1 (d)) is effective (>99.99% reduction) for the H1N1 virus.

Freed, M.D.
October 19, 2009

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Having met and spoken with the parents/guardians of both students who died as a result of H1N1, and having seen their grief, I want to know, as I am sure you do, that we have left no stone unturned to ensure that there are no further deaths as a result of H1N1.

Thank you again for your correspondence and for the Department's efforts to protect our citizens from H1N1.

PR/mm

Encl:

cc: E. Horn, Ph.D.
G. Recer, Ph.D.
Dr. James A. Williams, Superintendent
Members, Buffalo Board of Education
Will Keresztes, Associate Superintendent, Educational Services
Assunta R. Ventresca, Director of Health Related Services
Dr. Steven J. Lana, School District Medical Director



STATE OF NEW YORK DEPARTMENT OF HEALTH

Flanigan Square 547 River Street Troy, New York 12180-2216

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Richard F. Daines, M.D.
Commissioner

James W. Clyna, Jr.
Executive Deputy Commissioner

October 2, 2009

Philip Rumore, President
Buffalo Teachers Federation
271 Porter Ave
Buffalo, New York 14201

Dear Mr. Rumore:

I am writing in response to your September 15, 2009 letter to New York State Commissioner of Health, Richard F. Daines, M.D., to thank you for your positive feedback regarding our H1N1 public service radio message and to provide some additional information regarding hand sanitizer use as part of the H1N1 response.

As you are aware, the NYS Departments of Health and Education jointly issued novel H1N1 guidance to all public and private K-12 school administrators this past August. Schools are encouraged to promote good hand hygiene practices among students and staff as one element of the multi-layered mitigation plan aimed at reducing influenza transmission:

"Hand hygiene includes traditional hand washing (with soap and warm water, lathering for a minimum of 20 seconds) or the use of alcohol-based hand sanitizers (60% alcohol or greater) when soap and water are not available and hands are not visibly dirty. If alcohol-based hand sanitizers are not allowed in the school, hand sanitizers that do not contain alcohol may also be useful for killing flu germs on hands."

*o.k.
see
attached
letter from
State Ed.*

I trust you are also aware of the 2007 SED guidance memo regarding use of alcohol-based hand sanitizers in schools (<http://www.emsc.nysed.gov/sss/schoolhealth/schoolhealthservices/HandSanitizersMemo.pdf>).

Antiseptic hand washes, hand rubs and hand wipes (collectively, hand sanitizers) are regulated by the federal Food and Drug Administration (FDA) as over-the-counter drug products. Active ingredients for hand sanitizer products are approved by FDA as safe and effective in a 1994 document known as the Tentative Final Monograph (TFM).¹ Under the TFM, hand sanitizer active ingredients are only tested for their ability to reduce levels of bacteria from hands. Tests for virus reduction have, so far, not been part of the formal FDA assessment of any hand sanitizer active ingredient.

Although FDA's current testing criteria under the TFM only apply to bacteria, manufacturers and independent researchers have tested some hand sanitizer products for effectiveness against

¹ US Food and Drug Administration. 1994. Topical antimicrobial drug products for over-the-counter human use. Tentative final monograph for health care antiseptic products. Federal register, code of federal regulations, parts 333 and 369, vol 59, no 116. p. 31402-52.

viruses. Some laboratory studies indicate that existing hand sanitizer formulations are effective against influenza A virus. Most of these products contain either >60% ethyl alcohol or benzalkonium chloride as active ingredients. Studies also show that influenza virus is rapidly inactivated on skin by air drying and by plain soap and water hand washing.

Many studies have attempted to assess the effect of hand washing or hand sanitizer use on school absenteeism or on the incidence of acute respiratory or gastrointestinal illness in communities. Several recent reviews of these intervention studies have found that most have design limitations that could exaggerate the apparent intervention effectiveness. Nevertheless, there are consistent observations suggesting that hand hygiene interventions convey some benefit in terms of reducing illness in community settings. In general, encouraging increased hand washing with plain soap and water tends to reduce acute gastrointestinal and respiratory illness rates by about 15 - 50% compared to baseline. Using antibacterial soap has not been shown to improve substantially on this benefit. Most reviews of hand sanitizer interventions have found similar reductions in acute gastrointestinal and respiratory illness rates with regular use of products containing alcohol or other active ingredients such as benzalkonium chloride or benzethonium chloride.

Good hand hygiene is expected to be an important element of infection control for novel H1N1. However, preventing direct person-to-person spread from contact with sick individuals and airborne droplets spread by coughing and sneezing should be emphasized. To slow the spread of H1N1, it is important to focus on guidance such as excluding ill students and staff from school and respiratory etiquette that are aimed at reducing the chances of direct influenza spread. Improved hand hygiene complements these recommendations.

Effective hand hygiene is an area of active investigation, and guidance could be updated as new information becomes available. If you have additional questions or need further assistance, please contact Ed Horn, Ph.D. at (518) 402-7511 or Gregg Recer, Ph.D. at (518) 402-7820 of my staff.

Sincerely,



Howard A. Freed, M.D.
Director
Center for Environmental Health

cc: E. Horn, Ph.D.
G. Recer, Ph.D.
ECU2009258.7348



SENIOR DEPUTY COMMISSIONER OF EDUCATION – P-16
Office of Elementary, Middle, Secondary and Continuing Education
Office of Higher Education

October 2007

To: District Superintendents
Superintendents of Schools
Administrators of Charter and Nonpublic Schools

From: Johanna Duncan-Poitier
Senior Deputy Commissioner of Education-P-16

Subject: Updated Information Regarding Alcohol-Based Sanitizers

We are writing to inform you of an emergency exemption to the requirements concerning administration of over-the-counter medication in school settings.

In April 2002, the State Education Department sent out a guidance memo titled "Administration of Medications in the School Setting." This memo may be viewed at <http://www.schoolhealthservicesny.com/uploads/AdminMed.pdf>. This memo states that a written order from a duly licensed prescriber and written parental permission is required to administer nonprescription (over-the-counter) medication to students in the school setting. Alcohol-based hand sanitizers are considered over-the-counter drugs by the United States Food and Drug Administration.

Recently there has been an increase in MRSA (Methicillin-Resistant Staphylococcus Aureus) cases reported in schools. Careful hand-washing and sanitation is the most effective way to control the spread of MRSA.

Effective immediately, School Medical Directors may approve and permit the use of alcohol-based hand sanitizers for use in their facilities without a physician's order. Parents may provide written notification to the school if they do not wish to have their child use this product. If hand sanitizers are made available, students should use them under adult supervision. It is recommended that hand sanitizers should be used where traditional soap and water is not readily accessible.

Please note that hand sanitizers which contain alcohol are flammable. They should not be placed in hallways or near an open flame or source of sparks. If you require further guidance please contact your BOCES health and safety staff, the Facilities Planning Unit in the State Education Department, or the Fire Prevention Bureau of the State Office of Fire Prevention and Control.

For a fact sheet on alcohol-based hand sanitizers, please visit the New York Statewide School Health Services Center's website at www.schoolhealthservicesny.com/. For additional information, please contact the: Statewide School Health Services Center, (518) 349-7630.