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Office of the White House Press Secretary

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THE WHITE HOUSE

FACT SHEET
SWINE INFLUENZA IMMUNIZATION PROGRAM

BACKGROUND

Last month an outbreak of swine influenza was isolated among recruits in training at Fort Dix, New Jersey. Although only 12 cases were confirmed, extensive blood testing has indicated that several hundred recruits were probably infected during this outbreak, and it was associated with the one death.

This flu strain, which had been dormant for almost half a century, was the cause of an epidemic in 1918-19 that killed an estimated 548,000 Americans.

The entire U.S. population under the age of 50 is susceptible. Hundreds of blood samples of individuals tested from various parts of the country show that approximately 80% of people over the age of 50 have swine-like virus antibodies in their blood from exposure to the influenza which circulated until 1930. However, the presence of these antibodies does not insure protection against the disease if it returns.

Prior to 1930, this strain was the predominant cause of human influenza in the U.S. Since 1930, the virus has been limited to transmission among swine with only occasional transmission from swine to man -- with no secondary person-to-person transmission.

Although there has been only one outbreak of swine influenza, person-to-person spread has been proven and additional outbreaks cannot be ruled out. Present evidence and past experience indicate a strong possibility that this country could experience widespread swine influenza in 1976-77. Swine flu represents a major antigenic shift from recent viruses and the population under 50 is almost universally susceptible. These are the ingredients for a severe epidemic, or pandemic. Pandemics of influenza occur at approximately 10-year intervals. In 1968-69, influenza struck 20 percent of our population causing more than 33,000 deaths (14 per 100,000) and cost an estimated $3.2 billion.

While there is no evidence that the flu has spread beyond the Army base, the reemergence of this strain has caused great concern in the medical community. Over the last few days the President has consulted with members of the Administration, health community leaders and public officials. On the basis of these consultations, the President believes that it is important to take effective counter-measures to avoid an outbreak similar to the one in 1918.
In view of these facts, the President has announced the following actions:

-- He is asking the Congress to appropriate $135 million prior to their April recess so that orders can be placed with the pharmaceutical industry to ensure the production of enough vaccine to inoculate every man, woman, and child in the United States.

-- He is directing HEW Secretary David Mathews, to develop plans that would make this vaccine available to all Americans during the three-month period from September to November of this year.

-- He is asking each and every American to receive an inoculation this fall.

Extraordinary measures are necessary because of the short time period available to assure adequate vaccine production and to mobilize the nation's health care delivery system. An extensive immunization program must be in full-scale operation by the beginning of September and should be completed by the end of November, 1976.