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Objective

To timely assess the potential health impact on the population living or working in a terrorist attack area using syndromic surveillance

Introduction

Since the terrorist attacks against the satirical newspaper Charlie Hebdo in January 2015, France has activated the highest level of its national anti-terrorism security plan. A new terrorist attack occurred the 26th of June at 9:50 AM in a gas production plant located in the industrial area of Saint Quentin Fallavier near Lyon (East-South of France). The plant produces several different chemical products like gas and plastics and employed 40 people. The attack resulted in an explosion followed by fire. The French Institute for Public Health Surveillance (InVS) was alerted at 11 AM and decided to implement with its Rhône-Alpes regional office a protocol to timely assess the potential health impact on the population living or working around the attack area on emergency health care facilities (EHCF).

Methods

The French SurSaUD® system is national syndromic surveillance system led by InVS and based on the daily collection of data from emergency departments (ED) network OSCOUR® and General practitioner’s emergency associations SOS Médecins. Individual data including medical diagnoses are analyzed by InVS through syndromic groups of interest for public health surveillance, including groups related with potential CBRNE exposure. In the 26th of June attack, the analysis focused on CBRNE groups related with potential respiratory and cutaneous exposure or psychological effects in selected structures. A few SOS Médecins visits (n=11) with the specific labelling code were recorded from the 26th of June to the 2nd of July. However since early 2015 we found out that this code was already used by SOS Médecins in other circumstances. It was not possible, retrospectively, to distinguish visits associated to the event.

Conclusions

The surveillance implemented during the 26th of June terrorist attack in France is in favor of no significant impact on the EHCF. This study shows that a labelling procedure to assess a potential impact of an intentional event like a terrorist attack can be implemented fairly rapidly. However, the attack was limited in terms of modus operandi, geographical area and population concerned. One limitation was the non-specificity of the labelling code chosen for SOS Médecins, which has been used in other circumstances. The use of this specific code has to be evaluated with the partners. Some other aspects should be assessed, particularly the acceptability of ED and SOS Médecins physicians to implement the labelling protocol and its feasibility in a most severe situation.

Keywords

impact assessment; intentional event; emergency data; terrorist attack

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