

An Initial Offering Of Swine Flu Shots Is Undersubscribed

With 40,000 Injections Ready, Only 6,019 People Appear For New England Session

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MANCHESTER, N.H.—By 5 p.m. on Saturday, William E. Arnold was a dejected host. Guests invited to his party had stayed away in droves.

Mr. Arnold, the 56-year-old chief of the city's health department, had invited most adult residents of this aging mill town of 90,000 to the biggest event of his career—a vaccination program against swine flu. But six months of national confusion over the dangers of swine flu and its prevention apparently converged to spoil the affair.

For four of those months, Mr. Arnold had been trying doggedly to plan for his big event, hampered by the changing instructions and guidelines from state and federal authorities. It was only eight days before the actual event that Mr. Arnold learned of the precise date, and he was told then that he could have vaccine for 20,000 people. On Thursday before D day, his allocation was raised to 40,000 doses.

Manchester's mass immunization against swine flu was one of the first in the country, kicking off a controversial \$135 million national campaign that has been plagued with problems and delays ever since it was announced last March. The city's experience on Saturday could indicate the additional problems that other areas around the nation still face.

By late in the overcast New England afternoon here, it was clear that the turnout would be disappointing. The final tally, 6,019 shots given at two clinic sites.

The Post Mortem

As the last latecomers to the cavernous National Guard Armory here trickled past the volunteer registrars, screeners, arm-swabbers, injection-gun operators and cotton-ball dabbers at 5 p.m., Mr. Arnold hunched over a folding table and tried to figure out what went wrong. "I'm disappointed, very disappointed," he said. "But I just don't know what we could have done better."

It is indeed hard to imagine anything Mr. Arnold, the Manchester health department or the 250 volunteers recruited on eight days' notice could have done better. Their clinics were staffed and ready. Registration forms were even available in Vietnamese in case any of the state's eight Vietnamese residents showed up. The registration, screening and vaccination of those who came were so efficiently organized that most persons completed the process in five minutes.

But talks with state and local officials, doctors, people who came for their shots and some who stayed away suggest that prolonged controversy and confusion over the program took its toll here.

Because Manchester, like other communities, had been getting continuously changing information about when it might receive vaccine, several plans to administer it had been drawn up and then scrapped, Mr. Arnold says. "The guidelines changed every time we turned around. We were going to start vaccinating 18-year-olds using three different vaccines. Then we thought we were going to have a large block of vaccine and run clinics over five days at 20 different sites," including factories and large businesses.

Views of the No-Shows

Of more than a dozen no-shows interviewed on the streets of Manchester last Saturday, three said they hadn't gone to the clinics because they were expecting to be vaccinated at their place of work. By Saturday, however, plans for clinics at office and industrial sites had been canceled.

Uncertainty over the vaccine itself hurt, too. Michael Lupa, a shoe salesman resting his feet on a bench at the center of town said a lot of his friends "aren't sure about the shot. They think you might get flu from it. They aren't sure it works." Mr. Lupa thought he would get a shot, but he wasn't certain when.

Complexities over who should get what dosage seemed to confuse the public, too. Manchester was giving a "monovalent" shot against swine flu on Saturday only to persons aged 25 to 55. Older persons or those with chronic diseases are advised to get a "bivalent" dose good against both swine flu and so-called A-Victoria flu. Younger persons were excluded because they are considered a lower-risk group, and it was feared there wouldn't be enough vaccine for them this time.

As it turned out, of course, there was more than enough vaccine, and the unused doses had to be sent back to the state's laboratory in Concord for future redistribution.

Manchester expects to give bivalent vaccine to those over 55 and the chronically ill at a later date. And even though Mr. Arnold went on the radio Saturday morning to urge citizens to come for their shots because no further clinics giving monovalent vaccine "are presently planned," the possibility of a make-up clinic for monovalent shots was under active discussion by the end of the day.

It was all too much for one Manchester man who said he wanted a shot. He didn't go Saturday, he explained because he understood, incorrectly, that the clinic was only for persons "under 25 and over 55."

The seeds of the uncertainty here reflect the nature of the disease itself and the controversy over how it might be prevented from sweeping the country. The swine flu virus, properly known as Type A-New Jersey, was detected last February among a few military recruits at Fort Dix, N.J. It cre-

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ated alarm largely because it seemed similar to the virus believed to have caused a world-wide epidemic in 1918-19 that killed half a million Americans.

If such a virus began to spread this year it was feared, there would be very little immunity in the population to stop it. Doctors still disagree about whether swine flu is likely to strike this year. But many agree with the Ford administration that to have done nothing would have been taking too great a risk.

The doubts, however, have meant something less than wholehearted backing for the immunization program from local doctors. Health officials here say they encountered people whose doctors told them not to bother with the shots.

Dr. Frank L. Kennedy, president of the New Hampshire Medical Society, says that although the society is backing the swine flu program, "we don't have consensus." He added, "Not everyone thinks it's terrifically worthwhile. But we had to agree that we couldn't take the risk of not backing it. My gut feeling is that this is a false alarm. But I'm sure as hell going to get a shot. If swine flu does hit, it could be a serious blow to the country."

Start of Planning

Planning for the Manchester clinics began last May when the federal government made \$90,000 in cash and \$8,000 of equipment available to New Hampshire. The government has also promised all along to provide vaccine to be given free at clinics and free to doctors who will agree not to charge for the vaccine itself. But the amount and timing of vaccine availability has always been in doubt.

Original plans for New Hampshire had called for starting in July and vaccinating the entire 800,000 population of the state, says John Hedderick, a federal public health adviser and coordinator of the flu program for the state, based 25 miles away in Concord. But delays in the manufacture of the vaccine plus disputes over who would assume liability for any problems with it, meant the first shipment of 90,000 doses didn't arrive until last Wednesday, and Thursday Mr. Hedderick had hoped to begin clinics at the far northern end of the state and "get out of there before the snow hits." But after checking around, he found Manchester to be the first locality properly organized to go ahead.

The armory and a school were reserved as clinic sites, and the local Red Cross and New Hampshire Medical Society Auxiliary, a group composed mainly of doctors' wives, began to recruit 250 volunteers to help out. Nineteen rapid-fire injector guns were on hand to give the shots. They can give up to 600 doses an hour, Mr. Hedderick says, but it takes 30 car-parkers, clerks, nurses and other backup personnel to keep a gun going at that pace, he figures.

Preparing the Staff

At 3 p.m. Friday, 150 volunteers assembled in the auditorium of the Beech Street School to hear Mr. Arnold say: "Bear with us. This is the first time we've run a clinic of this size. Other people in the state and around the country are going to learn how to do it from us."

By 8:15 Saturday morning, the volunteers were in their places, and lines of over a 100 people were tailing away from the doors waiting for the 9 a.m. start. It looked as if it was going to be a big turnout. By 10 a.m. the lines had cleared up, however, and the pace had slowed.

Going through the line was easy. At the door to the armory, this reporter was handed two forms explaining the nature of swine flu, the vaccine and the possible side effects—a slight sore arm and possible mild

chills and fever for 48 hours. According to Mr. Hedderick, 2% of those who got the vaccine in a test program reported such symptoms, while 1 7% of those who received inert placebos reported similar symptoms.

The forms took me about two minutes to read, or about one minute and fifty seconds longer, than most people required. I wrote down my name and address and signed a statement saying I had read the form and requested the vaccination. After handing this to a registrar I proceeded to a screener, a volunteer nurse, who asked me if I was allergic to eggs. The vaccine is cultured in eggs, and those with egg allergies are advised to get the shot under the supervision of their personal doctor.

Screening Process

Persons who had recently had tuberculin skin tests were also screened out, and persons who looked ill or feverish were detained to have their temperatures taken. But as I didn't fall into either category, I passed on to the swabber. She dabbed my arm with a cotton ball soaked in acetone. The procedure was to get any body fats and oils off the skin so that the injector gun wouldn't slip on the surface of my arm.

Swabbed, I stepped up to the man with the gun, a Buck Rogers contraction looking like an oversized German Luger pistol with a bottle of vaccine strapped on top of it. The operator, a National Guard medical corpsman getting credit for a drill hour, pressed the barrel firmly against my biceps and pulled the trigger. I felt a pinprick sensation as the compressed air drove the vaccine under my skin, and I moved on to the dabbler. That was it.

Most people walked away smiling and pleased that it turned out to be so easy. "Unbelievable how fast it went," said Jane Scanlon, a 29-year-old housewife who passed through the line in four minutes and 50 seconds. "Our doctor's nurse told us we might have to wait four to five hours."

Out of 6,000 people, less than half a dozen said they felt dizzy from the shots, and nobody fainted. "This concrete floor'll keep 'em up," said Mr. Hedderick at the armory. "People will think twice before they faint on this baby."

There was only one reported delayed reaction. Ronald Clement, age 30, got his shot at 9:15 at Beech Street. At 1:30 p.m. he broke out in itchy hives but otherwise felt fine. State health department workers manning a toll-free flu information telephone in Concord that Mr. Clement called advised him to return to Beech Street. There, a doctor examined him, and ambulance men who hadn't had anything to do all day took him to the hospital to pick up a pill for hives.