

RICIN ATTACK: LEARN FROM ANTHRAX CSIS Analyst Outlines Ways to Protect Public, Manage Response

WASHINGTON, Feb. 3, 2004—A CSIS analyst made the following comment and outlined a policy prescription for responding to the ricin attack on Capitol Hill:

David Heyman, senior fellow and director, CSIS Homeland Security Program (202-775-3293; dheyman@csis.org): “For the second time in three years, Senate offices have received letters containing deadly materials. Although ricin is different from anthrax, the response to this ricin attack can usefully build on what we learned from the anthrax attacks. We are in a far better position today to respond swiftly and effectively because of our anthrax education.”

Protecting the Public

- **Alert the medical community and expand public health surveillance as early into an attack as possible.** Raising awareness of the medical community prior to final confirmation of a bioterrorist attack allows practitioners the earliest possible opportunity to assess cases that might be linked to the attack. In Florida, for example, increased awareness and vigilance helped save the life of a second victim with inhalational anthrax.
- **Establish a “1-800” number/ emergency call center** and/or a website for answering questions. The anthrax attacks were not a single isolated incident, but occurred at multiple times in multiple locations. Consequently, should this *not* be an isolated incident, establishing a single place of authority for real-time answers can help provide a clear message to the public and reduce public panic.

Stopping the Vector of Attack

- **Shut down the physical site** of the attack including shutting down the HVAC systems to curtail the spread of an aerosolized agent.
- **Collect and screen all the mail** that was previously distributed to the U.S. Congress to prevent further similar attacks. In the anthrax attack, this action stopped dissemination of the Leahy letter and reduced the possibility of additional exposures in D.C.
- **Assess upstream and downstream mail handling** of the contaminated site to identify and protect mail clerks or others who may have handled the contaminated letter and to ensure that cross-contamination downstream did not occur. In November 2001, a 94-year-old woman in Oxford, Connecticut is likely to have died as a result of coming in contact with *Bacillus anthracis* from letters that she received that had been contaminated while traveling through the postal system.

Managing the Response

- **Establish an incident command infrastructure** to coordinate response and recovery efforts. Without clear command and control over an incident, time lost working out bureaucratic issues can lead to more casualties. Many federal and local agencies and organization contributed to mounting a response to the anthrax attacks. These included: officials from the U.S. Capitol; civilian agencies from the federal government; response units from the U.S. armed services; local DC government managers; as well as private organizations. While there

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are issues regarding the separation of powers between the legislative and executive branches, it is important to recall that the U.S. Coast Guard and the old Federal Emergency Management Agency (FEMA)—now both part of the Department of Homeland Security—provided valuable technical assistance at the U.S. Capitol during the anthrax attacks.

- **Incorporate mental health needs into response plans.** The stresses associated with a terror attack often go unrecognized, but can manifest themselves in both physical and psychological trauma. Mental health care should be offered as part of a comprehensive response and recovery plan.
- **Establish a Joint Information Center** for multi-jurisdictional attacks. Information plays a central role in public response. The U.S. Capitol is unique in that it has, at a minimum, 535 public officials and public affairs officers who play a role communicating key messages to their constituents. Beyond that, federal and local authorities also play a role in managing the response and will also seek to communicate with the public. The lack of a clear message to the public during the anthrax attacks caused confusion and diminished public confidence. In a crisis, officials need to coordinate public messages and provide accurate and timely information to encourage supportive public action and minimize panic and fear.
- **Establish a joint scientific/ technical advisory group.** The challenges of detection, diagnosis, treatment, and decontamination require expert understanding of the pathology and biochemical properties of ricin. Public officials need the best technical advice for critical decisions. In the anthrax attacks, conflicting understanding of the nature of the disease and how to treat it (e.g., whether to vaccinate) created confusion and anxiety among those who were—or thought they might have been—exposed.

Related Report

In April 2002, CSIS completed a report on a December 2001 Dept. of Defense-sponsored workshop reviewing the response to the October 2001 anthrax attacks. That report, *Lessons from the Anthrax Attacks: Implications for U.S. Bioterrorism Preparedness*, is available to U.S. government officials and may be requested from the Defense Threat Reduction Agency.

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