



*United States Department of*

**Health & Human Services**

**Office of the Assistant Secretary for Preparedness and Response**



# ***Radiological and Nuclear Threat MCMs Program***

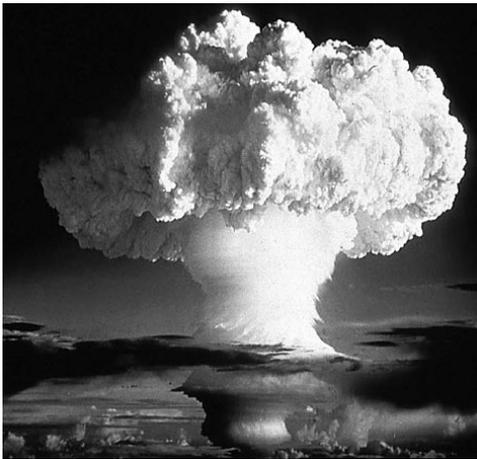
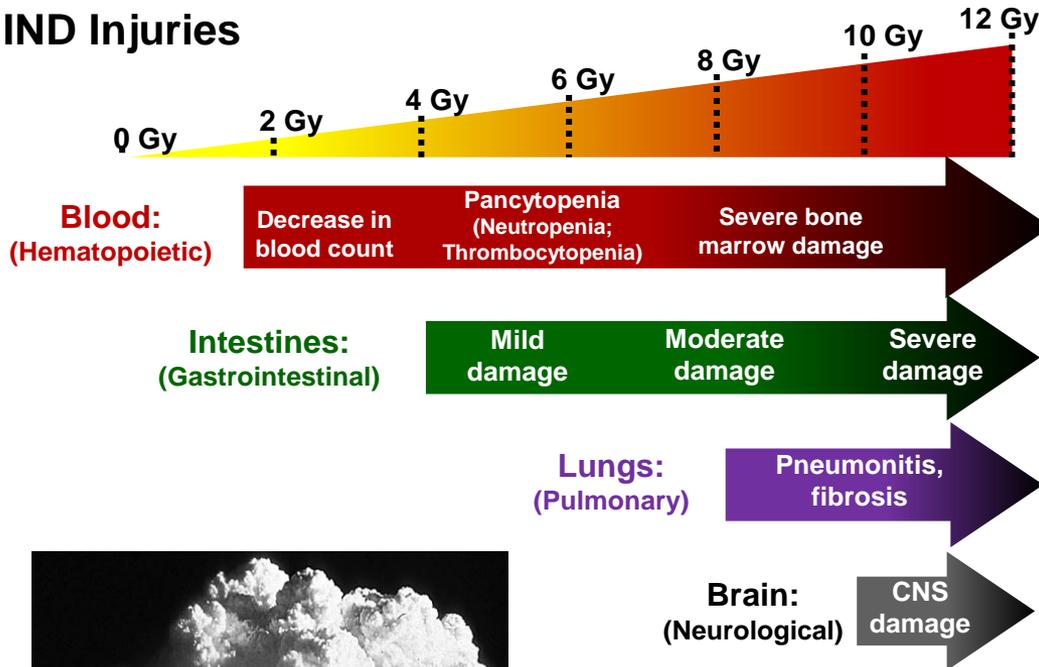
**Mary Homer – Acting Branch Chief**

October, 2014 (BARDA Industry Day)

*ASPR: Resilient People. Healthy Communities. A Nation Prepared.*

# Treatment Gaps from Radiological Nuclear Events

## IND Injuries



- Overall focus on injuries from:
  - Improvised Nuclear Device (IND) and
  - Radiological Dispersal Device (RDD) Events
- Priority on IND-related injuries - impact modeled/predicted to be greater.
- IND event will include:
  - radiation injuries,
  - trauma injuries,
  - burn injuries
- Radiation sub syndromes
  - Hematopoietic – predicted to have greatest number of injuries (neutropenia, thrombocytopenia)
  - GI injury – next greatest number of injuries

## Objective : Provide Solutions for Key Remaining Gaps

### • Overall

- Maintain preparedness for Neutropenia
- Repurpose drugs for sub-syndromes
  - Requires justifiable return on investment
  - Use sustainable preparedness stockpiling model (Managed inventories: UMI, VMI)
- Recognize CONOPS: Field Use and Definitive Care
- Leverage efforts of Public Health Emergency Medical Countermeasures Enterprise (PHEMCE) partners
  - E.g., NIAID Support services contract

### • Near Term:

- Thrombocytopenia
- Natural History GI-ARS – model development

### • Mid Term:

- GI-ARS – efficacy testing – commercial products
- Natural History Pulmonary Injury – model development

