

60  
MINUTES

produced by  
Heather Abbott

# A New Global Reality

## The Need for Resilience to Global Epidemic Threats

Kamran Khan MD, MPH, FRCPC

**Founder & CEO**

BlueDot

**Professor**

Faculty of Medicine, Division of Infectious Diseases

Dalla Lana School of Public Health

University of Toronto

**Physician-Scientist**

St. Michael's Hospital

Li Ka Shing Knowledge Institute

OUTBREAK  
SCIENCE

**“Those who cannot remember the past are condemned to repeat it...”**

**– *George Santayana (1905)* –**



2020



2016



2015



2014



2013



2009



# SARS CLINIC PATIENTS

PLEASE USE ENTRANCE DOOR TO LEFT

← 非典型肺炎診所病人請用左邊入口

except  
• Expectant  
 Mothers/partners  
• Mothers &  
 Fathers of High  
 Risk Babies

All  
Scheduled  
Clinics  
CANCELLED

2003

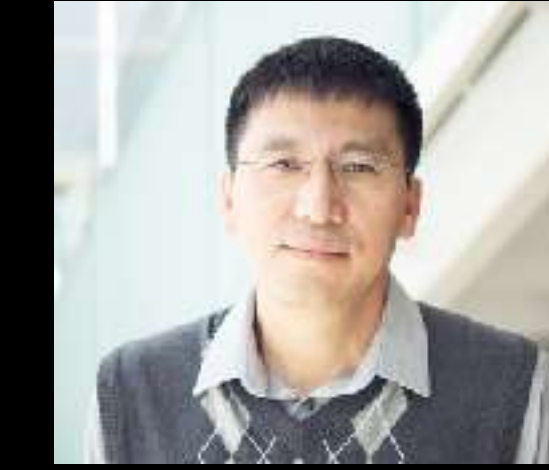




**Epidemics Spread Fast**



# The World Needs To Move Faster and Smarter



bluedot

# Global Epidemic Intelligence Platform



**INTELLIGENCE  
GATHERING**

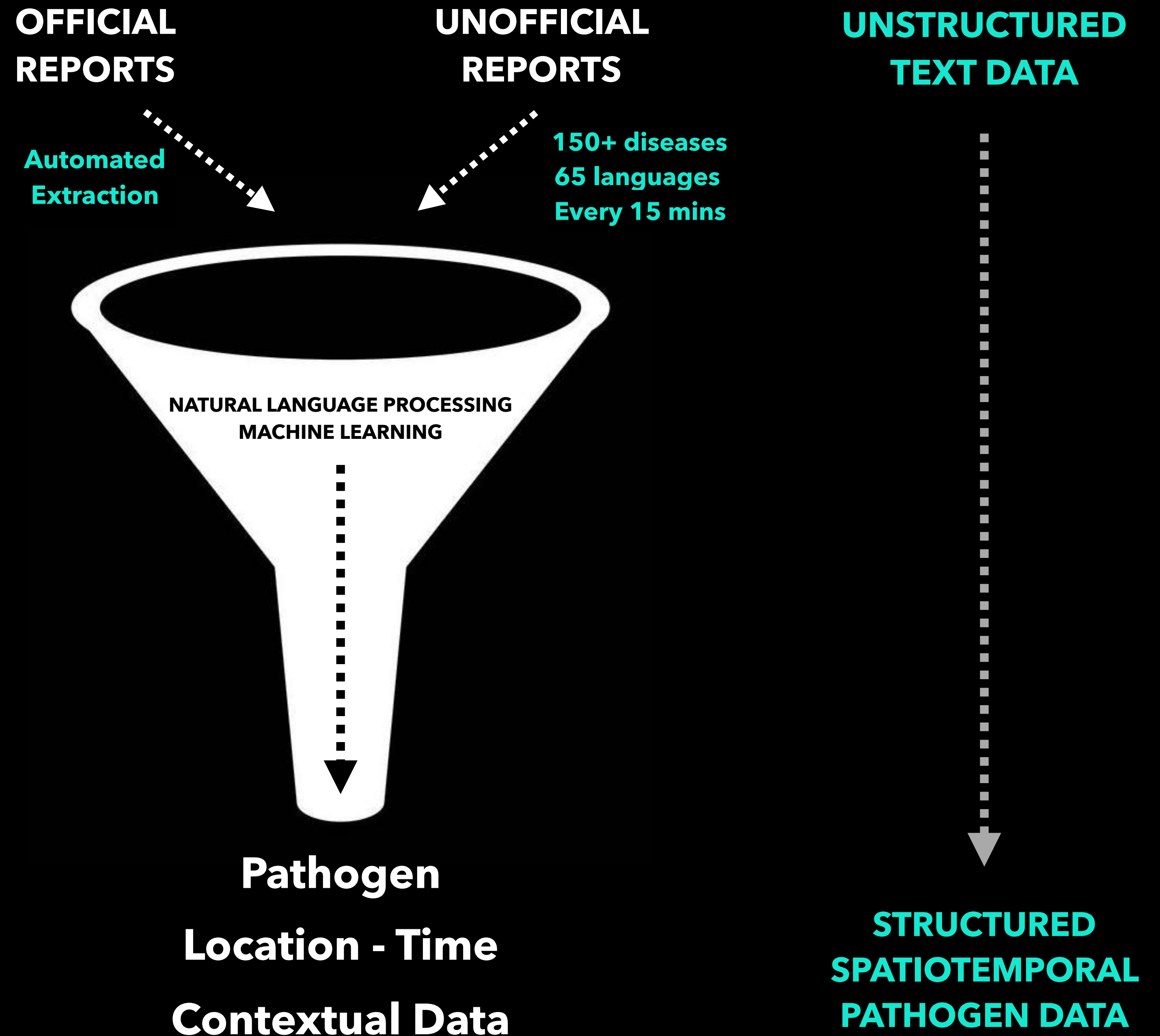


**DATA  
ANALYTICS**



**INSIGHT  
TO ACTION**

# Using A.I. to Gather Infectious Disease Intel Around the World in Near-Real-Time



该文件称，根据上级紧急通知，武汉市部分医疗机构陆续出现不明原因肺炎病人。各医疗机构要强化门急诊管理，严格执行首诊负责制，发现不明原因肺炎病人积极调动力量就地救治，不得出现拒诊推诿情况。

文件还强调，各医疗机构要有针对性地加强呼吸、感染科、重症医学等多学科专业力量，畅通绿色通道，做好门诊和急诊之间的有效衔接，完善医疗救治应急预案。

因相关文件中均写的是“不明原因肺炎”，网上迅速有“SARS冠状病毒”的传言。

不过，在12月31日下午，武汉市卫健委发布了最新的情况通报。

情况通报披露，近期部分医疗机构发现接诊的多例肺炎病例与华南海鲜城有关联，市卫健委接到报告后，立即在全市医疗卫生机构开展与华南海鲜城有关联的病例搜索和回顾性调查，目前已发现27例病例，其中7例病情严重，其余病例病情稳定可控，有2例病情好转拟于近期出院。

病例临床表现主要为发热，少数病人呼吸困难，胸片呈双肺浸润性病灶。目前，所有病例均已隔离治疗，密切接触者的追踪调查和医学观察正在进行中，对华南海鲜城的卫生学调查和环境卫生处置正在进行中。

It is reported that an "Urgent Notice on Doing a Good Job in the Management of Unknown Cause of Pneumonia" was posted on the Internet in the evening of yesterday.

According to the document, according to the emergency notice from a superior, some medical institutions in Wuhan have successively appeared patients with pneumonia of unknown cause. All medical institutions should strengthen the management of outpatient and emergency departments, strictly implement the system of first-in-patient responsibility, and find that patients with unknown cause of pneumonia actively adjust the power to treat them on the spot, and there should be no refusal and pushback.

The document also emphasizes that medical institutions must strengthen the multidisciplinary professional strength of respiratory, infectious diseases, and intensive medicine in a targeted manner, open green channels, effectively link between outpatient and emergency departments, and improve emergency plans for medical treatment.

As the relevant documents wrote "unknown cause of pneumonia", there were rumors of "SARS coronavirus" on the Internet.

However, in the afternoon of December 31, the Wuhan Municipal Health and Health Commission issued the latest briefing.

# December 31<sup>st</sup> 2019

# The New York Times

“All the News That’s Fit to Print”

THURSDAY, JUNE 20, 2013

Reprinted With Permission

## Business Day



# In New Tools to Combat Epidemics, the Key Is Context

By AMY O’LEARY

**N**ot long ago, Google Flu seemed like magic — a smart, cheap way to sift digital data for the public good.

But Google Flu, which tries to track flu outbreaks faster than the government, has shown its limitations. Not only did it grossly overestimate the flu this year, but its methods did little to track new, deadly diseases that could emerge anywhere, in places as random as a mass religious gathering on the banks of the Ganges or a poultry market in Shanghai.

Now a new project called BioMosaic is building a more comprehensive picture of foreign-borne disease threats in the United States, by merging three separate data tools into a single app for guiding decisions at the time of an outbreak.

a global event in Haiti becomes a local event in five counties in Florida and five counties in New York,” Dr. Cetron said. “When you see it, you get these aha! moments of appreciation.”

One of the doctors in the field who can benefit from these types of insights is Dr. Kamran Khan, an infectious disease specialist and researcher at St. Michael’s Hospital in Toronto.

Dr. Khan, who said he had a “bad habit of being around emerging diseases,” has worked on the front lines of the 1999 West Nile virus outbreak and the H1N1 pandemic of 2009. But the event that hit closest to home was when his own hospital was affected by a deadly outbreak of severe acute respiratory syndrome, or SARS, which hit Toronto in 2003.

That spring, the city had received an infected passenger from Hong Kong who passed SARS to family mem-

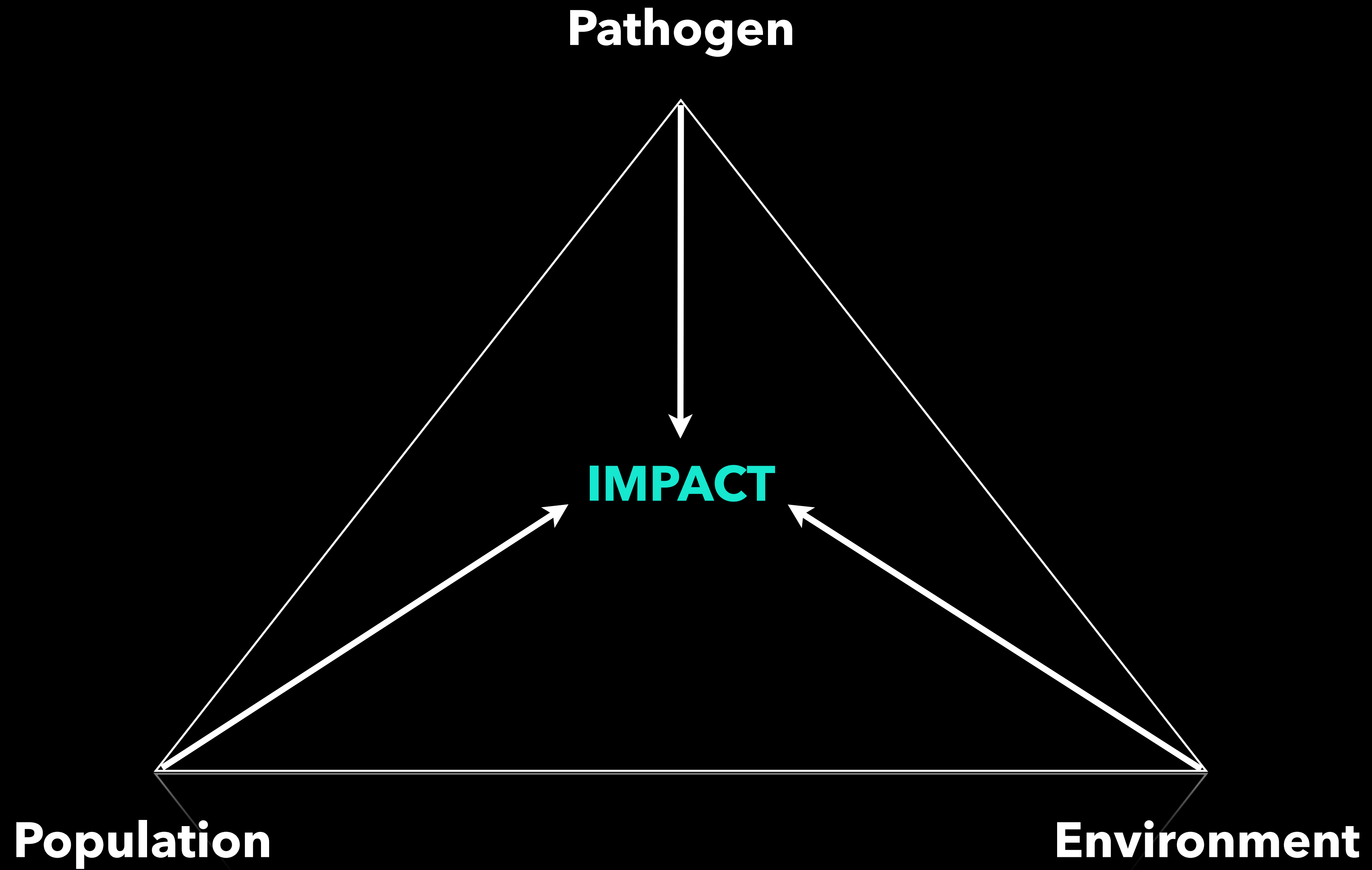
ments and airlines to amass a database of human movement around the globe, encompassing 4,000 airports and 30 million flights a year, carrying 2.5 billion passengers.

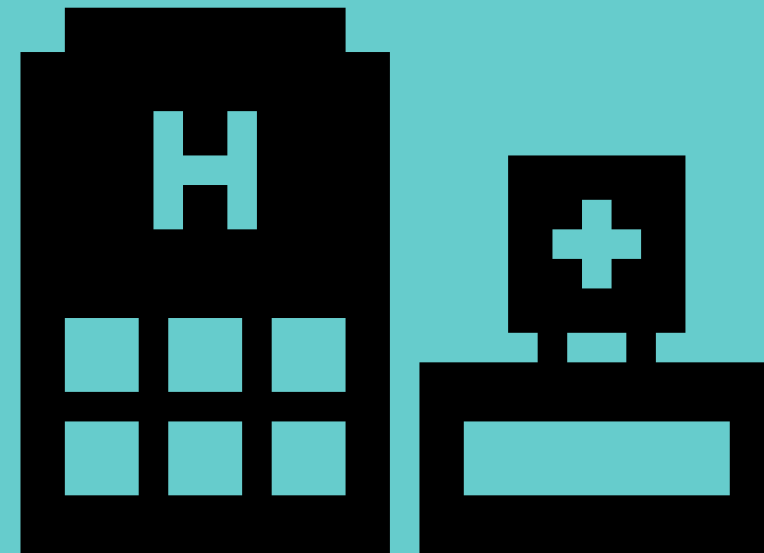
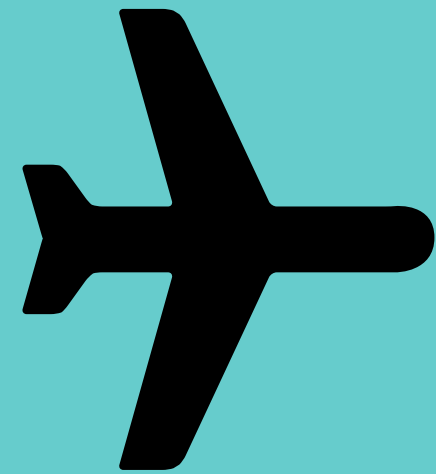
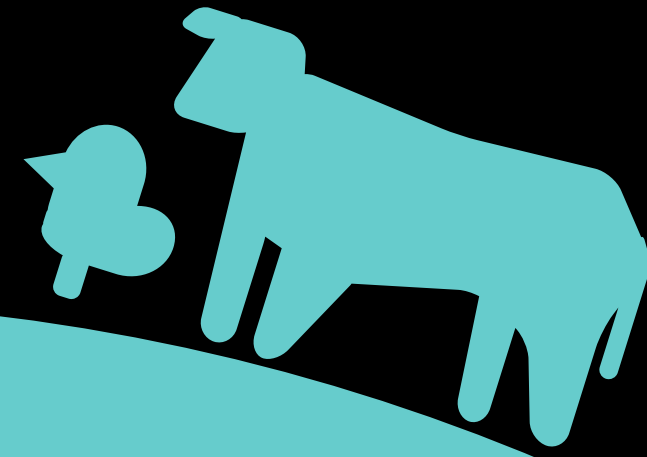
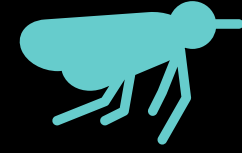
With that information, he can better predict the likelihood of where a single case of bird flu in Asia, for instance, might eventually surface on other continents.

It is powerful data, but made even more so when placed in BioMosaic alongside a mapping tool that tracks on-the-ground disease reports. That part of the puzzle is HealthMap, which was created by a team at Boston Children’s Hospital under the direction of John Brownstein, a professor at Harvard Medical School.

His staff monitors everything from Arabic news reports on cholera to a local television story about a rabid bat in Ohio. Each report is tagged







# Global Epidemic Intelligence Platform



**INTELLIGENCE  
GATHERING**



**DATA  
ANALYTICS**



**INSIGHT  
TO ACTION**

**The  
Economist**

Brazil's economic quagmire

Germany lurches towards leadership

America's oversold manufacturing boom

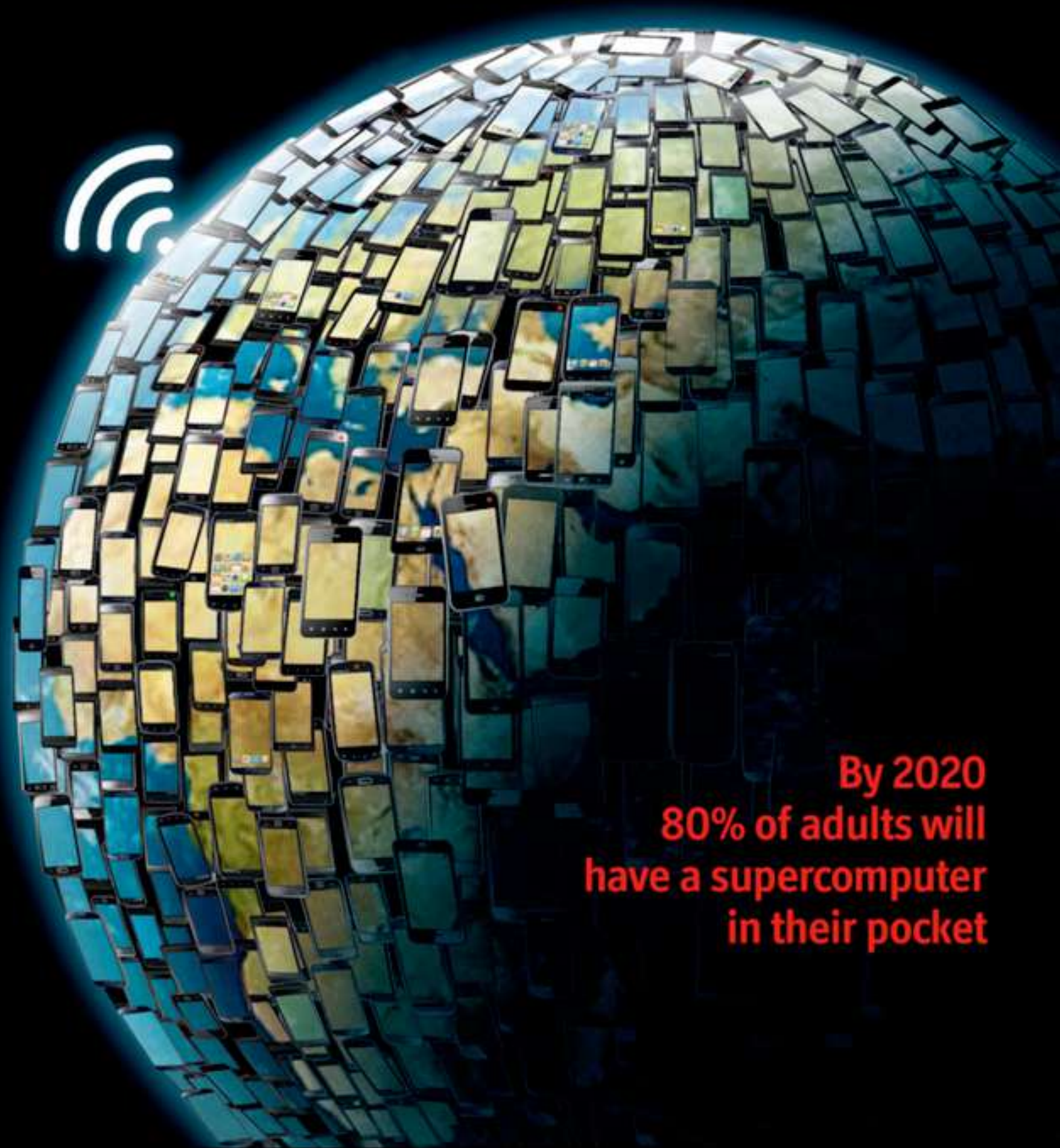
The theology of jihad

Mosquito sex and malaria

FEBRUARY 28TH-MARCH 6TH 2015

Economist.com

# Planet of the phones



**Anonymously analyzing  
location data from nearly  
400 million mobile devices  
worldwide in near-real-time**

**By 2020  
80% of adults will  
have a supercomputer  
in their pocket**

# Mobile Devices Departing Wuhan, December 2019



**December 31<sup>st</sup>, 2019**

**Final Destinations of Passengers  
and Flights Departing Wuhan, China**



Rapid Communication

## Pneumonia of unknown aetiology in Wuhan, China: potential for international spread via commercial air travel

Isaac I. Bogoch<sup>1,2,\*</sup>, Alexander Watts<sup>3,4</sup>, Andrea Thomas-Bachli<sup>3,4</sup>, Carmen Huber<sup>3,4</sup>, Moritz U.G. Kraemer<sup>5,6</sup> and Kamran Khan<sup>1,3,4</sup>

<sup>1</sup>Department of Medicine, University of Toronto, Toronto, Canada, <sup>2</sup>Divisions of General Internal Medicine and Infectious Diseases, University Health Network, Toronto, Canada, <sup>3</sup>Li Ka Shing Knowledge Institute, St. Michael's Hospital, Toronto, Canada, <sup>4</sup>BlueDot, Toronto, Canada, <sup>5</sup>Department of Zoology, University of Oxford, Oxford, UK and <sup>6</sup>Centre for the Mathematical Modelling of Infectious Diseases, London School of Hygiene & Tropical Medicine, London, UK

\*To whom correspondence should be addressed. Email: isaac.bogoch@uhn.ca

Submitted 8 January 2020; Revised 9 January 2020; Editorial Decision 10 January 2020; Accepted 10 January 2020

### Abstract

There is currently an outbreak of pneumonia of unknown aetiology in Wuhan, China. Although there are still several unanswered questions about this infection, we evaluate the potential for international dissemination of this disease via commercial air travel should the outbreak continue.

**Key words:** SARS, air travel, coronavirus, pneumonia, outbreak, zoonosis

On 30 December 2019, a report of a cluster of pneumonia of unknown aetiology was published on ProMED-mail, possibly related to contact with a seafood market in Wuhan, China.<sup>1</sup> Hospitals in the region held an emergency symposium, and support from federal agencies is reportedly helping to determine the source of infection and causative organism. The seafood market has since been closed, but purportedly sold a variety of live animal species. On 5 January 2020, the World Health Organization (WHO) published a document outlining their request for more information from Chinese public health authorities, and detailed 44 patients had 'pneumonia of unknown aetiology', with 121 close contacts under surveillance ([www.who.int/csr/don/05-january-2020-pneumonia-of-unknown-cause-china/en/](http://www.who.int/csr/don/05-january-2020-pneumonia-of-unknown-cause-china/en/)). The WHO reported that 11 patients were severely ill, and many affected individuals had contact with the Huanan Seafood market. Some patients were reported to have fever, dyspnea and pulmonary infiltrates on chest radiography. At the time of publication, limited information has been produced directly by Chinese public health authorities; however, media reports documenting interviews with such authorities have stated that the aetiology is not yet identified, that there are now 59 affected patients, and

that severe acute respiratory syndrome (SARS), the Middle East respiratory syndrome (MERS), avian influenza and several other common respiratory pathogens have been ruled out (<http://news.hebei.com.cn/system/2020/01/05/100154729.shtml>). On 8 January 2020, news outlets and ProMED-mail reported that genetic sequencing demonstrated a novel coronavirus as the potential causative organism.<sup>2</sup> Given the recent history of zoonotic transmission of a coronavirus emerging from a live-animal market in China in 2002, and the potential for novel pathogens to rapidly spread globally via commercial air travel,<sup>3,4</sup> we sought to evaluate international travel patterns from Wuhan, China in order to anticipate patterns of disease dispersion should this outbreak evolve.

We evaluated 2018 travel data generated from the International Air Transport Association (IATA) to quantify passenger volumes originating from the international airport in Wuhan, China, between January and March, inclusive. IATA data accounts for ~90% of passenger travel itineraries on commercial flights, excluding transportation via unscheduled charter flights (the remainder is modelled using market intelligence). These data represent direct origin (Wuhan) to destination trips, and indirect

**Table 1.** Top 20 passenger destination cities from Wuhan, China, January–March 2018 and corresponding IDVI of destination countries

Destination city	Population* (in millions)	Destination province	Destination country	IDVI	Direct volume <sup>***</sup>	Total volume <sup>***</sup>
● Bangkok	8.28	Bangkok Metropolis	Thailand	0.711	38 457	41 080
● Hong Kong	7.39	Hong Kong SAR	Hong Kong SAR	0.664**	23 608	23 707
● Tokyo	9.27	Tokyo	Japan	0.926	18 581	20 001
● Taipei	2.62	Taipei	Taiwan	0.710	15 086	17 645
● Phuket	0.39	Phuket	Thailand	0.711	14 097	16 656
● Seoul	9.78	Seoul	Korea (South)	0.879	11 771	13 727
● Singapore	5.61	Singapore	Singapore	0.878	8 599	13 123
● Kota Kinabalu	0.25	Sabah	Malaysia	0.761	12 340	12 661
● Macau	0.62	Macau SAR	Macao SAR	0.664**	10 918	10 932
● Denpasar Bali	0.79	Bali	Indonesia	0.563	7 759	9 065
● Sydney	5.23	New South Wales	Australia	0.913	5 093	8 431
● Dubai	3.14	Dubai	The UAE	0.765	6 389	7 389
● Kuala Lumpur	1.81	WP Kuala Lumpur	Malaysia	0.761	2 393	6 822
● Kaohsiung	2.77	Kaohsiung City	Taiwan	0.710	6 373	6 617
● Osaka	2.69	Osaka	Japan	0.926	3 062	5 745
● Krabi	0.46	Krabi	Thailand	0.711	5 012	5 718
● Melbourne	4.94	Victoria	Australia	0.913	0	5 648
● Surat Thani	0.13	Surat Thani	Thailand	0.711	5 044	5 624
● Chiang Mai	0.13	Chiang Mai	Thailand	0.711	4 354	5 293
● Penang	1.77	Pulau Pinang	Malaysia	0.761	4 436	5 059

Submitted 8 January 2020;

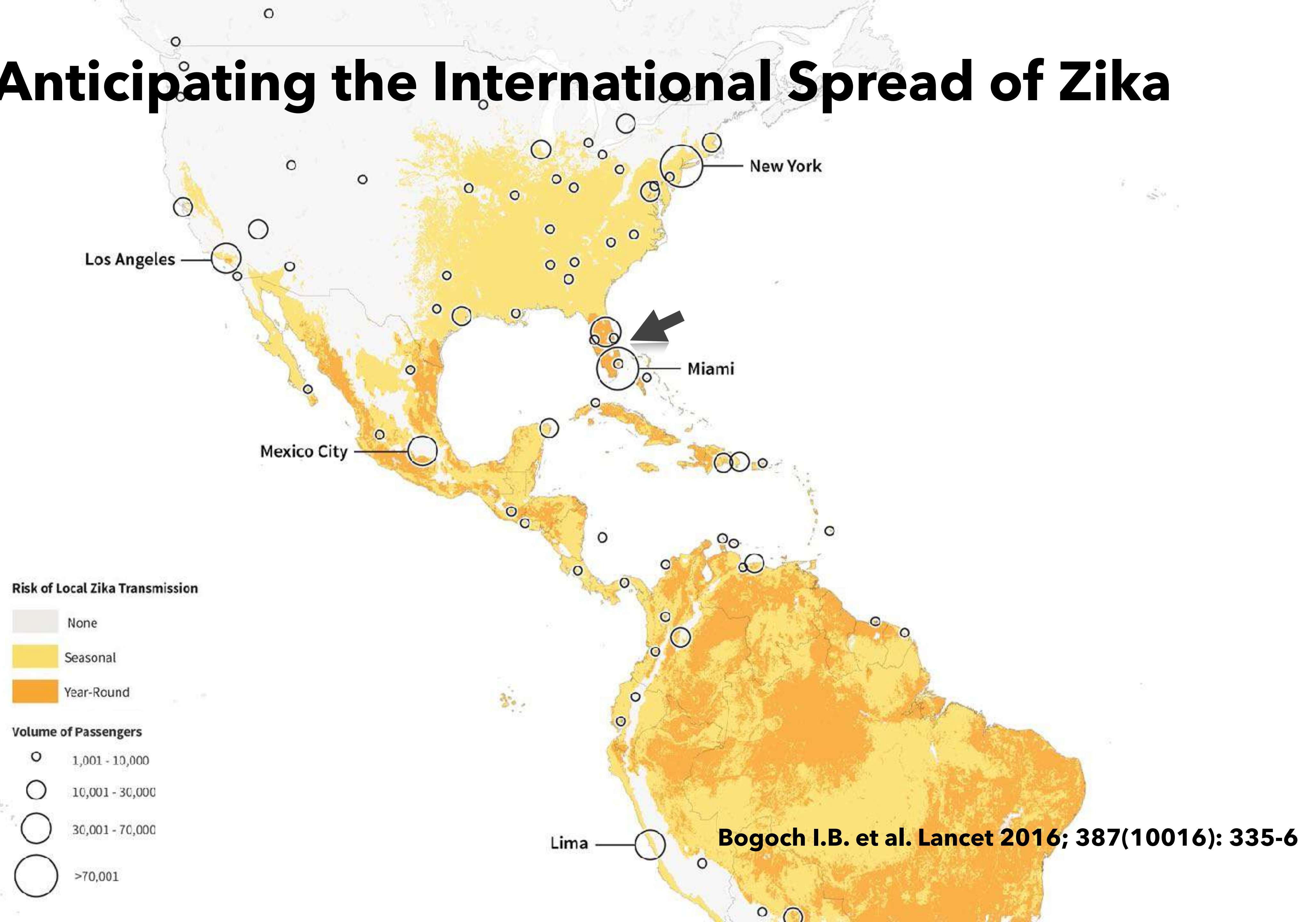


# Precision Public Health

04/09/20  
00:00:00am - 01:01:56am



# Anticipating the International Spread of Zika



**Bogoch I.B. et al. Lancet 2016; 387(10016): 335-6**

# Global Epidemic Intelligence Platform



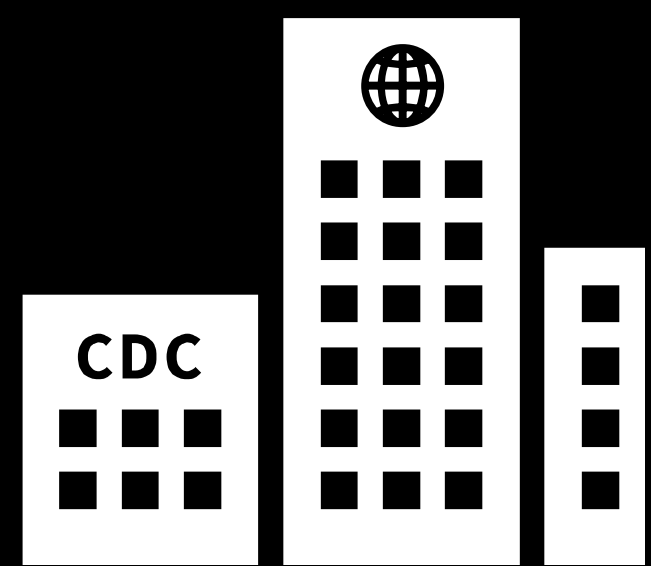
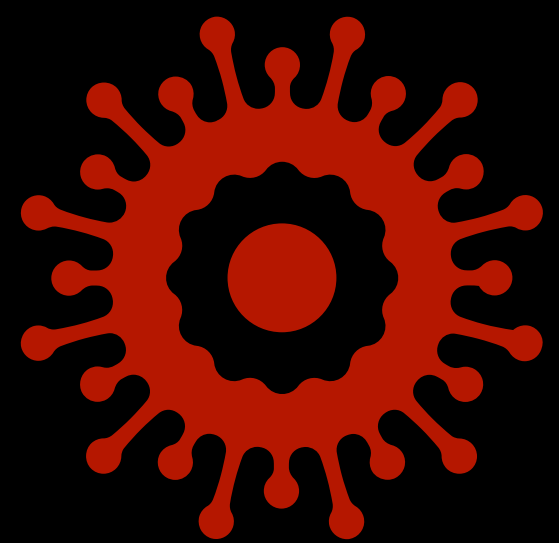
**INTELLIGENCE  
GATHERING**



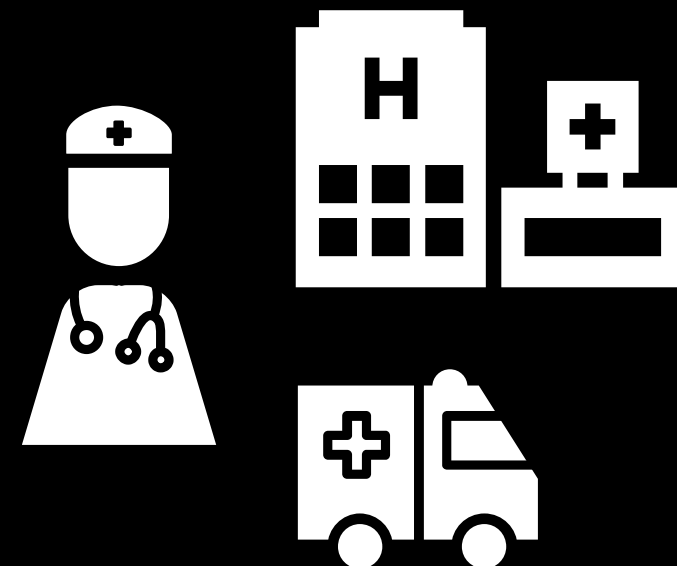
**DATA  
ANALYTICS**



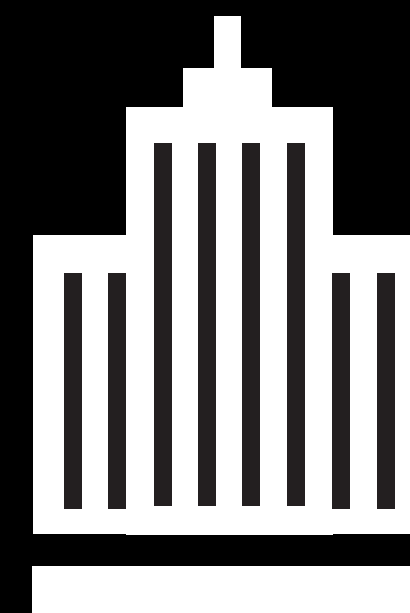
**INSIGHT  
TO ACTION**



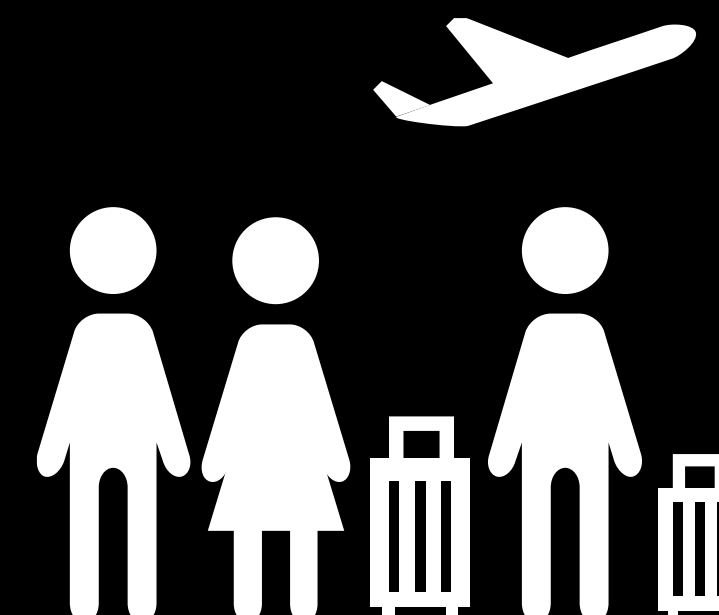
**PUBLIC HEALTH**



**HEALTH CARE**



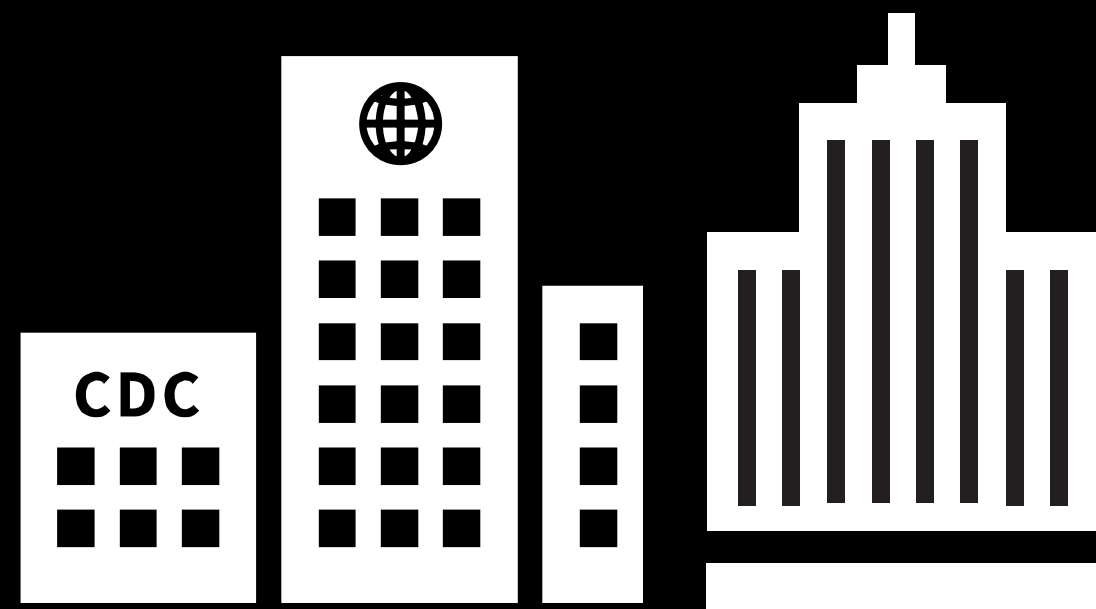
**INDUSTRY**



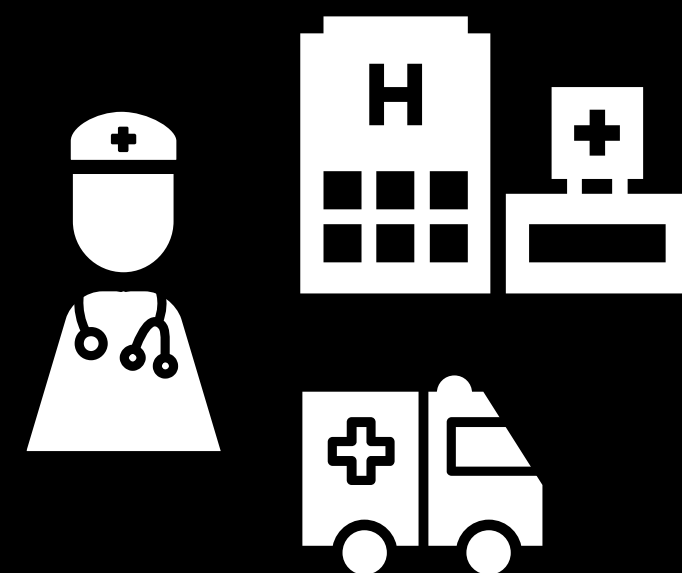
**PUBLIC**



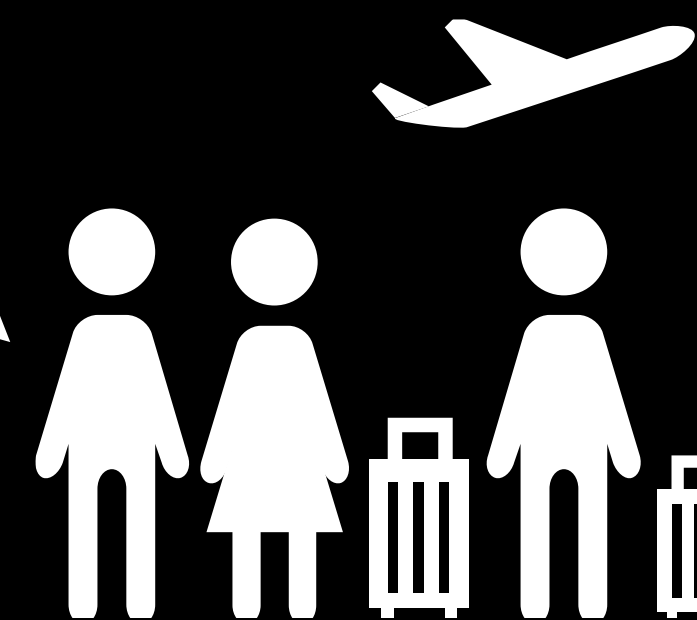
**TIME TO AWARENESS**



**POPULATION HEALTH  
CUSTODIANS**



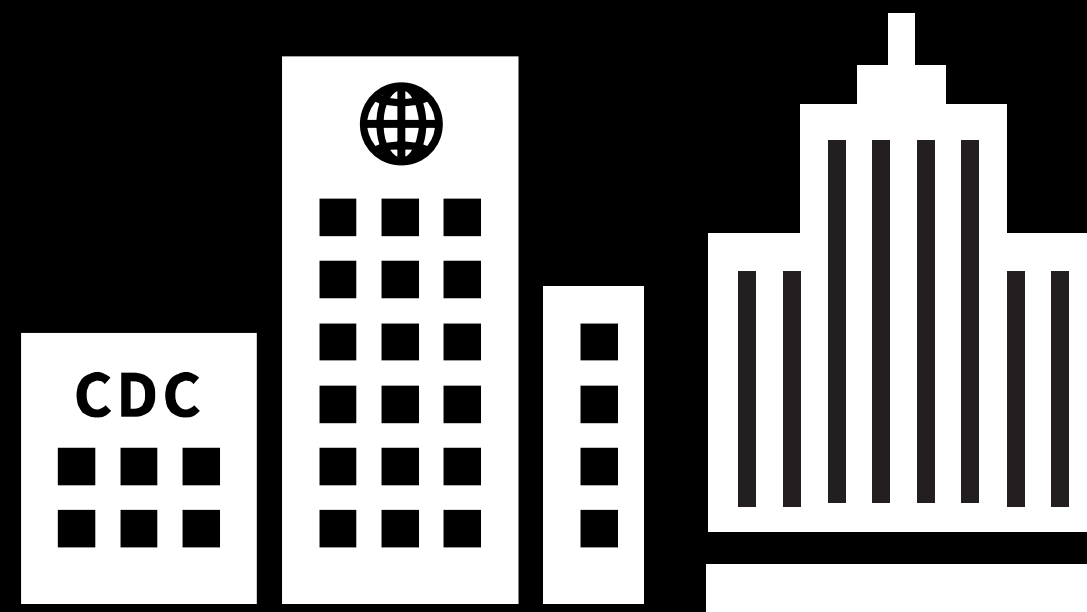
**HEALTHCARE  
PROVIDERS**



**HEALTHCARE  
CONSUMERS**

## **PUBLIC SECTOR**

- Protect lives and livelihoods
- Maintain armed forces readiness
- Prevent bioterrorism attacks
- Prevent outbreaks in livestock



## **POPULATION HEALTH CUSTODIANS**

## **PRIVATE SECTOR**

- Protect business continuity
- Preserve critical supply chains
- Protect employee health & safety
- Protect customer health & safety

Last 60 days: Jul 6, 2020 - Today

- My Locations
- Sort by Alphabetical
- Add a location
- Location-agnostic view
- Canada
- Montreal
- New Brunswick/Nouveau-Brunswick
- Toronto
- United States
- Vancouver
- Winnipeg



**From:** BlueDot Insights <[Insights@bluedot.global](mailto:Insights@bluedot.global)>

**Date:** December 31, 2019 at 9:59:53 AM EST

**To:**

**Subject: Undiagnosed respiratory syndrome in China**

## Near real-time disease alerts based on what's relevant to you.

**New Event —**

### **Undiagnosed respiratory syndrome in China**

With sources from: [NEWS MEDIA](#)

You are receiving this notification because you've set Unknown to "Always Notify".

To edit your disease preferences, visit your [custom settings](#).

LOCAL TRANSMISSIBILITY UNKNOWN: Insufficient data about Unknown's potential for local transmission.

#### **Brief**

Cases of unidentified severe pneumonia have been reported in Wuhan, Hubei. On late, December 30, 2019, the Wuhan Health and Medical Commission issued an emergency alert highlighting that there have been more than 20 cases of a severe respiratory syndrome in individuals associated with the Wuhan South China Seafood Market. The cause is not yet identified. The National Health Commission sent a group of specialists on December 31, 2019, for further inspections to the Market. The Provincial Center for Disease Control and Prevention continues to analyze specimens from affected cases to identify the cause of the disease. While investigations are ongoing, all cases remain under isolation and contact tracing has started. Local health officials remind the public to remain vigilant and that official information will be provided as soon as it is available.

#### **Mode of Transmission**

-

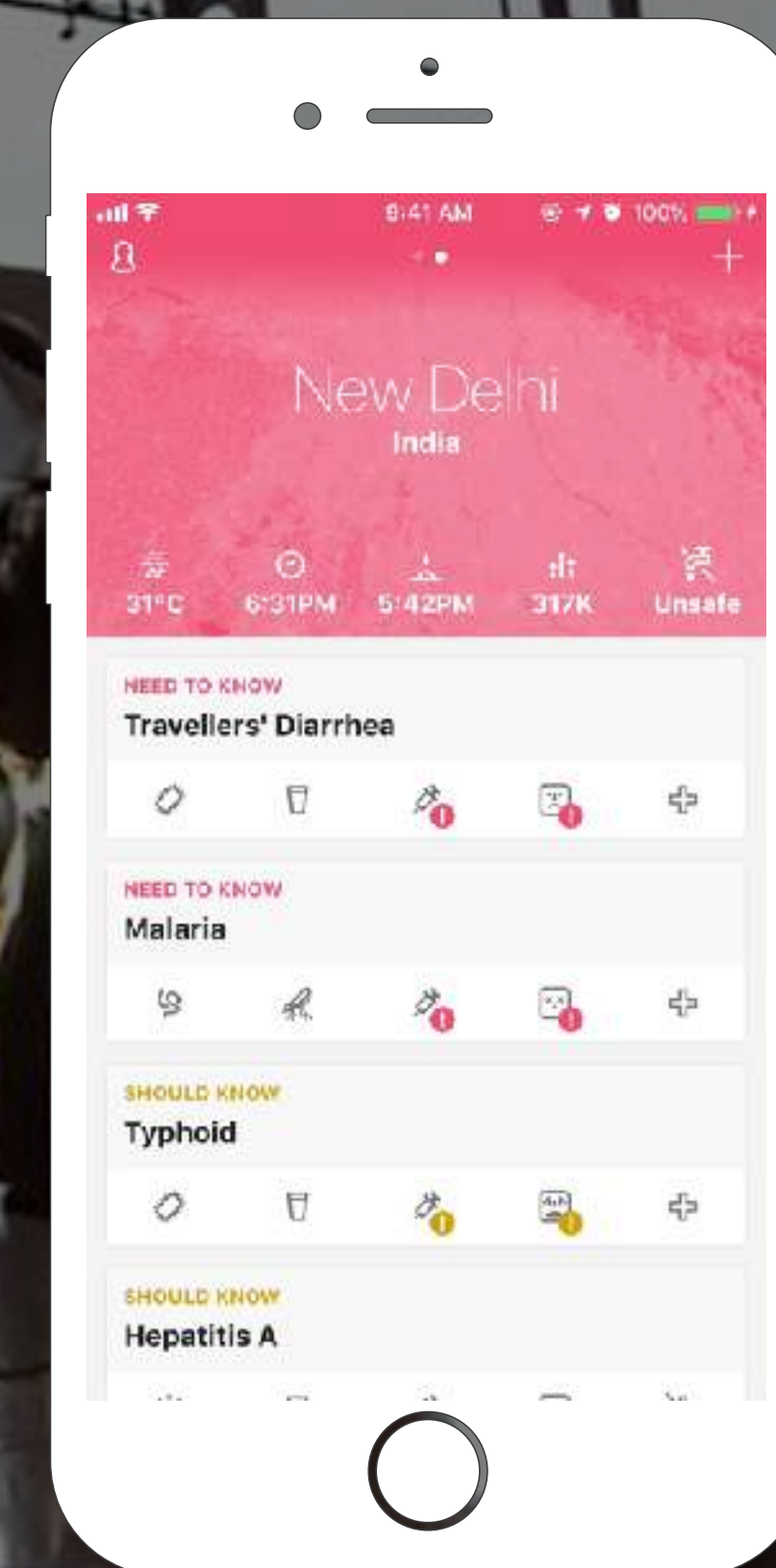
#### **Incubation Period**

-

BlueDot protects people around the world from infectious diseases with data-driven technologies.

[Update notification settings](#)

# Localization and personalization of infectious disease risks worldwide





# A Global Awakening

- Infectious disease threats are appearing with greater frequency, are increasing in scale, & causing greater health, economic, social disruption
- Advanced data analytics coupled with digital innovations can help the world move faster and smarter to mitigate emerging epidemic risks
- Cross sectoral nature of this challenge means government, industry, healthcare, and public sectors each need to do their respective part

**“An ounce of prevention is worth a pound of cure...”**

**– Benjamin Franklin (1736) –**

The image features a stylized world map where the continents are defined by a complex, interconnected network of thin lines. The lines are primarily blue and purple, creating a digital or network-like appearance. The map is centered on the Atlantic Ocean. Overlaid on the map is the text "Thank You" in a large, bold, white sans-serif font, positioned in the center of the image.

**Thank You**