



Press Release

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Ike Puts Public Health to Test

Galveston County and Cities – Local health departments plan for various disasters throughout the year. The Galveston County Health District was able to put plans into action when preparing for and dealing with the effects of Hurricane Ike.

Hurricane Ike started as a well defined tropical wave which moved off the western African coast on August 28, 2008. The storm traveled across the open waters of the Atlantic, across Cuba and eventually made landfall in Galveston County on September 13th with an estimated storm surge of 15 to 20 feet.

The storm wreaked havoc on the local public health and medical infrastructure. Galveston's UTMB was hit hard and all operations ceased. Potable water service in many communities was compromised. Dangerous debris was everywhere prompting concerns of tetanus and other illnesses.

The Galveston County Health District played a number of critical roles, immediately and in the first several weeks following the hurricane. District actions included: providing continuous ambulance services; environmental inspections such as food, water, septic systems, and sanitation; public vaccinations; animal rescues; public information via health advisories; active surveillance of hurricane related injuries and diseases; primary care; and

providing health and medical support for a large Galveston Island shelter operated by the American Red Cross.

The City of Galveston remained closed to residents until September 24th, due to various critical infrastructure losses and known public health threats as a result of Ike. Furthermore, most private clinics were damaged and closed. Fortunately the District's Galveston 4C's Clinic, a federally qualified community health center, was not damaged and reopened quickly once municipal services were restored. Prior to that GCHD was seeing patients in a mobile clinic provided by a national relief organization.

In the aftermath of Ike the Galveston County Health District addressed many public health issues. There was one confirmed case of tetanus. Community assessments identified that traditional sources of public information were unavailable and/or limited. As a result the District established a phone bank that received thousands of calls and subsequently developed jurisdiction specific fliers that were distributed door-to-door and at POD sites. Island EMS ambulances were impacted by the lack of a local emergency department which resulted in long transports to the nearest trauma center in Houston. This remains a challenge in the community.

One of the biggest challenges existed on the Bolivar Peninsula which was flooded and impossible to reach by ferry or land. There were reports of snakes, wild animals, alligators, and looters. Survivors on the peninsula needed vaccinations and supplies. Public health teams accompanied by local law enforcement, reached the peninsula by boat to assess the environment, collect soil and water samples, and assess the needs of any survivors and first responders. A follow up visit by helicopter allowed the team to meet some of the survivors needs.

"At times one may underestimate the value of emergency drills," says Dr. Mark Guidry, the District's CEO, "but when faced with the real health consequences of Hurricane Ike, one realizes that you can't plan and prepare enough."