



In light of recent events, many people have concerns about their mail, or about suspicious substances that they may encounter in the home, the workplace or elsewhere.

Recognizing Suspicious Mail

Based on experience, postal inspectors have identified the following as warning signs:

- Excessive postage.
- No return address; unusual return address; mismatch between return address and city/state listed in postmark.
- Markings indicating that item was mailed from a foreign country.
- Handwritten or poorly typed addresses and misspellings of common words; incorrect title and/or no name for addressee.
- Markings like 'personal', 'confidential' or 'do not X-ray' which serve to restrict screening of mail.
- Threatening or otherwise unusual language on envelope/parcel or in contents.
- Unusual appearance, possibly including excessive use of string, tape or other materials to secure envelope or parcel; lopsided or uneven envelope; protruding wires or foil; oily stains, discoloration or unusual odors.
- Other unusual characteristics, including powdery substance on outside of envelope/parcel; powdery substance that can be felt when envelope/parcel is handled; excessive weight; ticking sounds.
- Unexpected mail from someone you do not know.
- Mail whose source cannot be verified.

Handling of Suspicious Mail

- If possible, leave suspicious item unopened. Do not attempt to show it to anyone else. Do not shake it or sniff it.
- Do not handle it more than necessary.
- Place item in plastic bag and seal, using a zip lock bag or tape. If possible, place first bag into a second bag and seal. (Exception: If item was opened and suspicious substance is found inside, and some of this material is spilled, do not attempt to clean it up. Simply leave it in place and follow rest of directions below.)
- Once item is secured, leave it in place and leave area.
- As a precaution, wash your hands with soap and water.
- Call U.S. Postal Inspection Service at 1-800-275-8777. They will assist in determining whether your situation involves a credible threat, and provide you with further instructions. If at work, notify appropriate staff, following procedures set up by your employer.



What is bioterrorism?

Bioterrorism is the use or threatened use of bacteria, viruses, or toxins as weapons.

How likely is a bioterrorism attack?

Several small successful and unsuccessful attacks have occurred in the U.S. and elsewhere over the last 20 years. Although governments have increased their surveillance and monitoring of suspected terrorists, bioterrorism events are very difficult to predict. Many experts believe that the risk for bioterrorism is low, but that if it does occur, it will have serious consequences. Because the consequences of an attack could be devastating, and because attacks are unpredictable, the best plan is to be prepared for such an event.

What diseases can be used as biological weapons?

Although there are a number of diseases that could be used as weapons, those of most concern include anthrax, smallpox, botulism, and plague. Each has different symptoms, different treatments and different outcomes. More information about these potential bioterror agents can be found on the Centers for Disease Control website at www.bt.cdc.gov.

How is the Town of Acton preparing for bioterrorism?

State and local agencies have been working together for years to develop a strong system for responding to a wide range of potential disasters, including bioterrorism. State and local response to regular events such as flooding, winter storms, and disease outbreaks are examples of our readiness to respond effectively to public health threats. If a health threat shows up on our public health “radar screen,” we begin investigating the threat and conducting lab tests to determine its origin. Once enough information is known, the Massachusetts Department of Public Health issues a health alert to local public health agencies, who then notify health care providers, hospitals, clinics and others in the communities. Public health response may include:

- Issuing guidelines to health care professionals so they know how to treat patients showing specific symptoms.
- Recommending ways to prevent the further spread of a disease.
- Communicating directly with the public about things they can personally do to prevent problems from occurring.

- Working with health care providers to make antibiotics available to people who need them.
- Mobilizing local health officials to immunize large groups of people.

If a health threat appears to be serious and widespread, the Massachusetts Department of Public Health will also work closely with the national Centers for Disease Control and Prevention, the Massachusetts Emergency Management Agency, Emergency Medical Service providers, and clinics and hospitals across the state to help implement a comprehensive response.

What can I do for myself?

The most important things you can do are:

1. Remain calm.
2. Contact law enforcement officials if you see any suspicious activity.
3. Contact your physician if you have questions about your health.
4. Take care of yourself and maintain a healthy immune system.
5. Seek the services of a mental health professional if you are feeling extremely stressed or depressed.
6. Do not take unnecessary precautions—such as seeking antibiotics and vaccines—that may do more harm than good.

Can I get immunized against anthrax?

There is a vaccine for anthrax, but availability is currently limited to the military and to those who might come into contact with naturally occurring anthrax in their work. The anthrax vaccine regimen is complicated and is given as a series of six shots over 18 months with yearly boosters and may result in adverse reactions. Some people who are concerned about the threat of an anthrax attack have asked their physicians for anthrax vaccine. Although this is understandable, physicians do not have this anthrax vaccine in their offices and cannot obtain it. Given the unknown specific threat to the general population, we are not recommending any specific vaccinations for bioterrorism, including a vaccine for anthrax. If an anthrax attack does occur, however, vaccine may be used to control the illness. Anthrax is not transmitted from person-to-person.



I have heard that some people are getting *antibiotics* from their doctors to take in case of an anthrax attack. Does the Massachusetts Department of Health recommend this?

No, this is a bad idea for a number of reasons. Anthrax in its early stages has symptoms similar to influenza which means people may confuse influenza or other symptoms as those of anthrax, and go ahead and take antibiotics. Indiscriminant use of antibiotics could be harmful, particularly for pregnant women and children. Self-administered use of antibiotics by persons fearing an anthrax release may actually cause more harm than good. Furthermore, the inappropriate use of antibiotics may lead to antibiotic resistance of other bacteria, or of different anthrax strains. Although there are recommendations for specific antibiotics to use in case of an anthrax attack, these antibiotics are only to be used until tests have been done to determine which drugs are most effective against the strain of the disease in circulation. In the event anthrax were released, the Massachusetts Department of Public Health will determine who is at risk and who needs antibiotics, and will have systems in place to provide them.

Can I get immunized against *smallpox*?

The last naturally occurring case of smallpox in the world occurred in 1977. The U.S. stopped routine smallpox immunization in 1972 when smallpox was no longer a threat in the United States and consequently, drug companies discontinued production of the vaccine. There are approximately 7 million doses of vaccine remaining in the U.S. today. Because we do not know whether terrorists currently have access to the virus, or are able to develop the virus in a laboratory, or who they would target if they had the virus, we cannot determine who should receive this limited stock of vaccine. In the event of a smallpox outbreak, the vaccine stockpile will be used to control the spread of the disease. In efforts to be better prepared if smallpox is reintroduced into the United States, the federal government is working to create a smallpox vaccine stockpile.

I was vaccinated for smallpox before 1972 when I was a child. Can I still get smallpox?

It is unclear whether persons who were vaccinated for smallpox as children are still protected. Because we have not seen any cases of smallpox in the world for so many

years, people do not have any natural immunity to the disease and it is likely that most vaccinated persons are now susceptible to smallpox.

Is there anything we can do to protect ourselves from a bioterrorism attack?

Although there is little an individual can do, there is a great deal we can do as a country. The best protection against a bioterrorism attack is a strong and prepared public health system, health care providers who can recognize an illness caused by a bioterrorism agent, and planning between public health, emergency management and law enforcement. The Massachusetts Department of Public Health and the local public health agencies have been working for several years to prepare for a bioterrorism attack. We are working in Acton to design a plan to vaccinate or provide medication to the entire population within 48 hours of an emergency situation. We are working with public health officials, physicians and nurses, police and fire, the school district, community groups and volunteers to implement this plan if it becomes needed. Training of health care providers and volunteers has begun and will continue in the following months.

We encourage you to check the Massachusetts Department of Public Health website at <http://www.health.state.ma.us> for updates to this information about bioterrorism. If you are interested in volunteering for the Acton Health Department Emergency Plan, please call us at 978-264-9634 or send an email to health@town-ma.gov