

Jim Hayslett: Disease Detective Tracking Anthrax

By Kristi W. Lopez

After spending nearly four months providing assistance in the anthrax case in Washington, D.C., University of Kentucky alumnus Jim Hayslett, an Epidemic Intelligence Service (EIS) Officer for the Centers for Disease Control, is back home in Austin, Texas.

However, as a member of the CDC's elite corps of disease detectives, Hayslett is always ready to respond to the country's public health emergencies.

One of only three CDC disease detectives with a pharmacy background in the agency's history, Hayslett began working for the EIS in 2000. The agency was established after the start of the Korean War as an early-warning system against biological warfare and man-made epidemics and now has expanded into a surveillance and response unit for all types of epidemics, including chronic disease and injuries.

After letters containing deadly anthrax spores began showing up in the weeks after the Sept. 11 terrorist attacks, EIS officers were deployed to Florida, Washington, D.C., New York, New Jersey and Connecticut to assist with clinical evaluations of patients, distribution of antibiotics, data collection and environmental sampling.

Hayslett, an EIS officer assigned to the Texas Department of Health in Austin, was deployed to Washington, D.C. He spent 16 weeks assisting with the anthrax investigation counseling more than 5,000 postal workers who were exposed to anthrax or concerned about exposure after an anthrax-filled letter was opened in the office of Senate Majority Leader Tom Daschle on Oct. 15. Two Washington postal workers were among the five confirmed anthrax deaths.

"I arrived in Washington, D.C., on Oct. 17, two days after the letter was received in Sen. Daschle's office, and I was the last one to leave on Feb. 12," he said.

Hayslett, 44, received a bachelor's degree and a Pharm.D. from the UK College of Pharmacy in 1984 and 1985, respectively. His pharmacy background was paramount in dealing with the anthrax case. "I was the only CDC pharmacist at the site and had the most knowledge of anthrax, the prophylaxis — measures taken to prevent the disease — and adverse effects," he said.

He also was able to educate postal workers about anthrax, their exposure and their treatment options. "Everyday we were gaining new knowledge through our investigation," he said. "We would have to digest this knowledge quickly then be prepared to immediately make available what we had learned to the public."

Hayslett was the principal investigator on the vaccine study conducted during the case. "At one point we had as many as 10,000 people initially being treated with antibiotics until we were able to decrease the number by investigating the trail of the letter and the timeline for exposure," he said.

"We developed a patient education routine for the postal workers to educate them about the antibiotics and vaccine, the risks and the alternatives," he said. "Our goal was to provide them with enough information to make the best decision for their individual case."

Hayslett spent much of his time with the postal carriers and was even made an honorary letter carrier before he returned to Austin. "It was a difficult time for them," he said. "Along with the many uncertainties when the case began, about 3,000 postal workers were temporarily relocated to six locations around the metro Washington, D.C., area.

"Having someone for them to talk to and ask questions as well as provide direct information about the case at the community level was very important."

Since he was in the postal facility three days before it was closed, Hayslett also was exposed to the deadly anthrax spores and took a 60-day dose of antibiotics.

"I knew the risks coming into it," he said. "At first we found out we were being deployed to an undisclosed location, but then the news broke about the letter in Sen. Daschle's office and we

knew we were headed to (Washington) D.C.,” Hayslett said. “Many of my colleagues have families and children and this was a big unknown with an outcome that could have been much more catastrophic and I felt a responsibility to be on the frontline and to go and do what I could to help.”

In situations such as the anthrax case, the CDC’s role is to reinforce the public health structure that already exists, Hayslett said. “In this case, any city, anywhere, would have been overwhelmed by its magnitude.”

But despite this terrible incident, some good came from it, he said. “It caused everyone to really look at the significance of the public health infrastructure in this country,” Hayslett said. “From this case, many symptom-based surveillance systems are now in place all across the country.”

Hayslett, who also has a master’s degree in public health from the University of Oklahoma, thinks the anthrax case illuminated the role of public health officials and public health departments.

“They do their jobs — often thankless ? day in and day out from tuberculosis shots to flu vaccinations, but when something like the anthrax case happens, they really are on the frontlines in keeping people safe,” Hayslett said.

Hayslett, a native of Syracuse, N.Y., who has family in Louisville, also found himself near the site of another terrorism attack in 1995. While working on his master’s degree and then completing a post-doctoral fellowship at the University of Oklahoma Health Science Center, he was just 10 blocks from the Alfred P. Murrah Federal Building that was bombed on April 19 of that year.

He also worked for five years as an Indian Health Service pharmacist at the Navajo reservation in Arizona.

“Even when I was attending pharmacy school at UK, I never saw myself in a traditional pharmacy role working behind a counter,” Hayslett said. “But today the role of pharmacists has greatly expanded and you continue to find others like myself who are successfully incorporating their pharmacy education into many different careers in health care settings.”

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