

## Global Polio Eradication Initiative

### Monthly Situation Report – April 2009

All data as of 28 April. For latest news and polio case data by country, updated every week: [www.polioeradication.org](http://www.polioeradication.org)

## HEADLINES

**Countries across Africa Continue Forceful Response to Outbreaks:** Thirteen African countries – from Cote d'Ivoire to Kenya – have reported 97 cases of polio due to importations in 2009 (10 countries report 82 cases of type 1 polio and three countries report 15 cases of type 3 polio), nearly all linked to Nigeria. The response to these outbreaks has been aggressive and is ongoing. In west Africa, seven re-infected countries, together with polio-endemic Nigeria, have conducted synchronized supplementary immunization activities (SIAs) in February and March, with plans for a further campaign in late May. Southern and northern Sudan, Kenya, and Uganda are conducting SIAs in late April, while Angola, the Democratic Republic of Congo (DR Congo), and the Central African Republic (CAR) are each conducting multiple SIAs from April-June. Preventive campaigns are being planned for neighbouring polio-free countries, including Guinea, Liberia, Sierra Leone, Somalia, and Yemen, to prevent further geographic spread. International partners – WHO, CDC, and UNICEF – have deployed additional staff to support outbreak response activities in affected countries; UNICEF has arranged for the availability and timely shipment of OPV for SIAs in the re-infected areas; and the International Federation of the Red Cross and Red Crescent (IFRC) has launched an emergency appeal to mobilize resources, particularly volunteers, for polio work at the country level in these countries. These outbreaks will continue to be

closely monitored and updates provided on developments. (See details in "Re-infected Countries" below.)

**President Announces Emergency Measures to Stop Polio in Southern Sudan:** The President of the Government of Southern Sudan, His Excellency General Salva Kiir Mayardit, has launched a "Presidential Action Plan for Polio Eradication," creating an inter-ministerial coordination committee to urgently address the polio outbreak in southern Sudan. The new committee is placing full responsibility and accountability for improving the quality of outbreak response on state and county (district) governments. The President called on all government and health workers to do their part to ensure the success of immunization activities. Since June 2008, 46 polio cases have been reported in southern Sudan, and the outbreak has expanded to Kenya, Uganda, and northern Sudan. [More](#)

**Afghanistan polio effort concentrates on securing "Days of Tranquillity":** With polio eradication activities in the southern part of the country restricted by ongoing conflict, the Afghanistan team is focused on getting all parties in the conflict to agree to "Days of Tranquillity". Such negotiated pauses in active conflict – previously achieved in Afghanistan and elsewhere – are necessary so that vaccinators can safely go house-to-house to vaccinate all children and monitors can ensure good coverage.

## ENDEMIC COUNTRIES

### Nigeria

- The total number of cases for 2009 is 234 – 60 type 1 wild polio virus cases, 173 type 3, and one type 1-type 3 mixture.
- In 2009, 80% of type 1 cases are in the middle- and southern-belt states. In northern states, traditionally the epicentre for type 1 transmission in the country, only one state has reported more than one type 1 case (Sokoto state). While operational improvements have been noted in 2009 in several previously high-risk states in the north over recent months, notably in Kano state, problems in SIA quality are evident in several areas in the south.
- Preparations are on for the next nationwide Immunization Plus Days (IPDs), to be launched on 30 May. Trivalent OPV will be used, to further restrict the type 3 outbreak while maintaining pressure on current low levels of type 1 transmission in the north of the country. Focus for this upcoming activity is to build on operational improvements achieved in key areas in the north, while rapidly improving operations in the south.
- A further round, with the seven re-infected countries in west Africa, is also being planned for end-May.

### India

- India continues its positive start to the year, with 36 cases for the year to date – 14 type 1 and 22 type 3 cases — compared with 203 cases at the same time last year. These figures are a

credit to the army of Rotary volunteers who dedicate their time each month to assist in immunizing millions of children.

- Bihar reported a new type 1 case with onset of paralysis on 12 April. Sequencing is underway to determine if this represents a new importation or ongoing circulation.
- In the core, highest-risk districts of western Uttar Pradesh (UP), only one type 1 case has so far been reported this year, in January from JP Nagar. In mid-2008, an outbreak of type 1 cases occurred in western UP, the result of re-infection from Bihar. Due to an ongoing, aggressive outbreak response in western UP, the type 1 outbreak appears to have been successfully curbed. Residual type 1 transmission in the country is now primarily sustained by population/migrant movements.
- A sub-national immunization day (SNID) was held in UP, Bihar, and high-risk polio-free areas 5-10 April, targeting 30 million children with mOPV1.
- The next large-scale SNID will be conducted in UP, Bihar, and key high-risk and re-infected areas on 24 May, targeting 69.1 million children with mOPV1.

### Pakistan

- The total number of cases for 2009 is 10 – 5 type 1 cases and 5 type 3 cases.
- The outbreak in Punjab (re-infected in mid-2008) appears to have been successfully curbed, as no cases have been reported since January. In Sindh, too, significant operational

improvements have been noted in some areas. However Karachi, despite being fully accessible, still requires improvements in coverage.

- An SNID was held 13-15 April using mOPV1. In Islamabad, the Islamabad Traffic Police set up “polio check-points”, immunizing children at key entry/exit points to the city. This activity was a pilot project, and may be rolled-out to other cities across the country, such as Karachi, Lahore, Peshawar, and Quetta, during upcoming SIAs.
- While overall good quality was achieved nationwide, in key areas vaccination coverage gaps remain. Operational problems were again noted in Karachi (Sindh), and insecurity hampered access to populations in key areas of Balochistan and NWFP. In NWFP, upwards of 15% of the target population was again inaccessible during this most recent SNID.
- The next NID is planned for 18-20 May, using trivalent OPV, and a further SNID is planned for 21-23 June, using mOPV3.

## Afghanistan

- The total number of cases in Afghanistan for 2009 is 6 – all type 1 wild poliovirus. All but one are located in the Kandahar and Hilmand provinces in the south-east.
- A type 1 case has been reported in the eastern province of Nooristan, closely related to virus circulating across the border in Pakistan's North West Frontier Province.
- An SNID was held on 12-14 April across the Southern, South-Eastern and Eastern Regions, using mOPV1. While access to populations in several previously inaccessible high-risk districts of the Southern Region was increased, insecurity in other areas again hampered the immunization effort.
- Preparations are ongoing for the next NID, planned for 17-19 May, using trivalent OPV. Focus is again on coordinating activities with neighbouring Pakistan in cross-border areas, and increasing access to populations in security-compromised areas of the Southern Region. A further SNID is planned for southern Afghanistan in June, using mOPV3.

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## RE - INFECTED COUNTRIES

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### West Africa

- To date, West Africa has reported 48 cases in 2009 (type 1: 15 in Benin, eight in Burkina Faso, five in Togo, one in Mali, one in Ghana, and five in Cote d'Ivoire; type 3: 13 cases in Niger).
- While new cases continue to be reported from the region, the majority of the cases had onset of paralysis prior to the start of the large-scale, multi-country synchronized outbreak response campaigns held in late February and late March. Only Côte d'Ivoire has a still-expanding outbreak.
- The major risks associated with this outbreak are ongoing transmission in Benin, Burkina Faso and Togo and the expanding outbreak in Côte d'Ivoire, which heightens the threat to Guinea, Liberia and Sierra Leone. An SIA using trivalent OPV is being planned for these countries.
- To minimize these risks, further synchronized activities across the seven re-infected countries in west Africa are planned for end-May, at the same time as preventive campaigns in Guinea, Liberia, and Sierra Leone. Additional rounds may be necessary in June/July in Benin, Burkina Faso, Cote d'Ivoire, and Togo.
- Subsequent to these rounds, any transmission in West Africa will be responded to by large-scale mop-ups with monovalent OPV.

### Horn of Africa

- There are 43 polio cases across the Horn of Africa in 2009 – all type 1 – with 28 cases reported in Sudan, eight in Kenya and seven in Uganda.
- Although new cases continue to be reported from the Horn of Africa, all had onset of paralysis prior to the coordinated multi-country outbreak response campaigns from end-March.
- The major risks associated with this outbreak are ongoing transmission and further geographic spread within the affected countries into the high transmission season, spread from Southern Sudan or northern Uganda farther westward into north-eastern DRC or CAR, and farther spread eastward, particularly into Somalia and Yemen.
- To minimize these risks, outbreak response is continuing across the Horn of Africa. The next SIAs in both northern and southern Sudan were held on 27-29 April, with further activities planned for end-May. In Uganda, activities were

conducted 25-28 April, and in Kenya from 25-29 April. Both Uganda and Kenya also have plans for the addition of OPV to nationwide measles activities during the course of 2009.

- Somalia has conducted Child Health Days to which OPV was added in the first quarter of 2009, and two NIDs are planned there for May and June. Yemen is also currently preparing plans for a preventive campaign – an NID – before the middle of 2009.

### Central Africa (Angola, DR Congo and CAR)

- To date, the three central Africa countries of Angola, DR Congo, and CAR have reported six cases in 2009 (type 1: four cases in Angola; type 3: one case each in CAR and DR Congo). None of these cases have yet been covered with a vaccination campaign.
- Although no type 3 has been reported in Angola this year, the detection of two type 3s in southern DR Congo, closely related to the Angolan outbreak, suggests that transmission of this serotype is ongoing.
- Angola conducted a mop-up in parts of Benguela and Namibe from 24-26 April. NIDs are planned for June, July, and August with trivalent OPV.
- DR Congo is conducting a series of SNIDs between April and July, using a mix of mOPV1, mOPV3, and trivalent OPV, depending on the risk and circumstances.
- In CAR, a type 3 case with onset of paralysis on 2 April was reported. It is the first case reported in the country in 2009, and is close to the border with Chad. Nationwide immunization activities using trivalent OPV are planned for May, June (in conjunction with a measles campaign) and July.

### Chad

- No new cases have been reported in Chad since 26 December (type 3 from Logone Oriental), although sub-national surveillance is sub-optimal and recent detection of a type 3 in border areas of CAR indicates that ongoing outbreak response in Chad has not yet stopped transmission of the persistent outbreak.
- Staggered, nationwide campaigns, using trivalent OPV and mOPV1, were conducted 24-26 April (in the south of the country), and are planned for 15-17 May (in the north, east, and west of the country).