



## Ministers of Health attend emergency meeting to outline their final push to end polio in 12 months



Photo: © WHO/P. Viret

Health ministers from the six remaining polio-endemic countries declare commitment to finishing polio in 2004 with the signing of the Geneva Declaration.

**GENEVA, 15 January 2004** – Recognizing that 2004 represents a one-time opportunity to eradicate polio, and with the further spread of polio into polio-free areas and countries, Ministers of Health from the six remaining polio-endemic countries attended an emergency meeting to address plans to immediately intensify efforts to stop poliovirus transmission globally by the end of 2004.

At the closed door meeting, Ministers of Health and their representatives from Nigeria, India, Pakistan, Niger, Afghanistan and Egypt unveiled bold new plans to immunize 250 million children multiple times during a series of massive polio immunization campaigns in 2004. They presented data which showed poliovirus beaten back to the lowest ever levels in the key countries of India, Pakistan and Egypt, providing these governments with a rare opportunity for halting spread of the virus. These data, and the introduction of aggressive new programmes, present an opportunity to eradicate a disease that once paralysed hundreds of thousands of

**"I hope your leaders will come to the United Nations General Assembly in September and share with us the good news that polio is being conquered for good."**

Mr Kofi Annan,  
Secretary-General  
of the United Nations



Photo: © WHO/P. Viret

United Nations Secretary-General Kofi Annan giving polio drops in the Shamshatoo refugee camp just outside Peshawar in North West Frontier Province, Pakistan. (March 2001)

children each year. Following the meeting, the Ministers of Health pledged unprecedented commitment to the end of 2004 deadline with the signing of the Geneva Declaration.

Health ministers in Geneva noted that the success or failure of the world's largest public health initiative now rests with the governments of the six remaining polio-endemic

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**NOW, MORE THAN EVER:**



Prof. E. Lambo, Minister of Health, Nigeria signs the Geneva Declaration.

Photo: © WHO/P. Viret

**STOP POLIO FOREVER!**

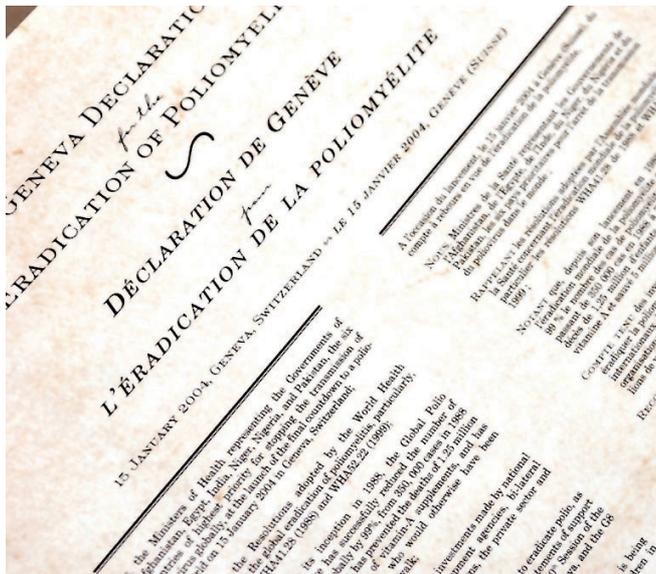


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A Newsletter for the Global Polio Eradication Initiative World Health Organization in association with Rotary International, United Nations Children's Fund and the Centers for Disease Control and Prevention



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countries. The first milestone in 2004 toward global polio eradication may well come from Egypt, according to epidemiologists, followed closely by India.

The Nigerian Minister of Health, Professor Eytayo Lambo, outlined the steps his country will take to “dramatically” improve polio campaigns in the first half of 2004, particularly in the northern states where the virus continues to circulate widely. He said: “We will work together as one – federal, state and local governments, religious and traditional leaders, Christians and Muslims – to reach every child with the polio vaccine. Nigeria is determined to break the chains of polio transmission for the sake of our children, our neighbours’ children and the children of the world.”

Speaking from Delhi, Ms Sushma Swaraj, India’s Minister of Health and Family Welfare said: “Polio eradication is a tremendous challenge in a vast, densely populated country like India. The Minister referred to preliminary data from 2003 showing an 84% reduction in polio cases there compared with 2002. “We have a unique window of opportunity in which to end polio forever. We will seize this opportunity by reaching each and every child with vaccine, particularly in western Uttar Pradesh and any other corner of India where transmission has not been stopped. There is no room in India’s future for polio.” ♦

## Organization of the Islamic Conference resolves to eradicate polio

Photo: © WHO/EMRO



Dr Hussein A. Gezairy, Regional Director, WHO's Eastern Mediterranean Region

ON 20 October 2003, heads of state and representatives from the Organization of the Islamic Conference (OIC) adopted a landmark resolution\* to wipe out polio, noting the significant progress that has been made among Member States – 52 of the 57 Member States are polio-free. Five of the world’s six remaining polio-endemic countries globally are OIC members – Nigeria, Pakistan, Egypt, Afghanistan and Niger.

“This resolution by the OIC is extremely important at this stage in the eradication effort,” said Dr Hussein A. Gezairy, Regional Director of WHO’s Eastern Mediterranean Region. ♦

\* Resolution available on [www.polioeradication.org](http://www.polioeradication.org)

“ This commitment is vital to wiping out this terrible disease in the remaining OIC countries. We look forward to working with OIC Member States in operationalizing the resolution.”

Dr Hussein A. Gezairy

Photo: © Dr Wong, Protocol Division of the Ministry of Foreign Affairs, Malaysia



Heads of State from 57 countries adopted the new resolution, which was presented by the Government of Malaysia and other OIC Members, on the last day of the 10<sup>th</sup> Session of the Islamic Summit Conference in Putrajaya.

Photo: © Dr Wong, Protocol Division of the Ministry of Foreign Affairs, Malaysia



# Protecting polio-free areas; priorities for 2004–2008

THE ongoing spread of the polio outbreak from Nigeria into polio-free areas of west and central Africa including Benin, Burkina Faso, Cameroon, Central African Republic, Chad, Côte d'Ivoire, Ghana, and Togo demonstrates the fragility of progress toward polio eradication and the need for aggressive measures to protect polio-free areas.

Importations will remain a significant risk and should be treated as an urgent public health threat. *The Global Polio Eradication Initiative Strategic Plan 2004–2008\** outlines the actions needed to protect the polio-free status of countries and areas.

\*Available from WHO Marketing and Dissemination (tel +41 22 791 2476; fax +41 22 791 4857 or email [bookorders@who.int](mailto:bookorders@who.int))

## 1. Surveillance

- Identify and close the gaps in acute flaccid paralysis (AFP) performance at the subnational level in all countries.
- Increase the speed with which laboratory results from “hot cases” are communicated to those responsible for decisions on the timing of emergency response activities.

## 2. National importation detection and response plans

- Establish a plan for the detection and management of importations and/or circulating vaccine-derived poliovirus (cVDPVs) to ensure the capacity to implement a massive emergency response within four weeks of confirmation.

## 3. Containment

- Complete the laboratory survey and inventory activities in preparation for implementation of phase II laboratory containment activities in advance of global certification.

## 4. National immunization days (NIDs) / subnational immunization days (SNIDs)

- Conduct rounds of NIDs or SNIDs in high-risk polio-free countries and areas which are particularly at risk of re-establishing transmission of wild poliovirus. The highest priority will be given to countries which border the key poliovirus reservoirs, particularly Nigeria.
- Specific countries and areas requiring additional SIAs will be regularly reviewed and updated depending on routine immunization coverage, surveillance sensitivity, risk of importations and other factors.

## 5. Routine Immunization

- Improve routine immunization coverage in polio-free areas through microplanning, logistics, social mobilization and monitoring, to limit the spread of imported poliovirus.

polio  
eradication

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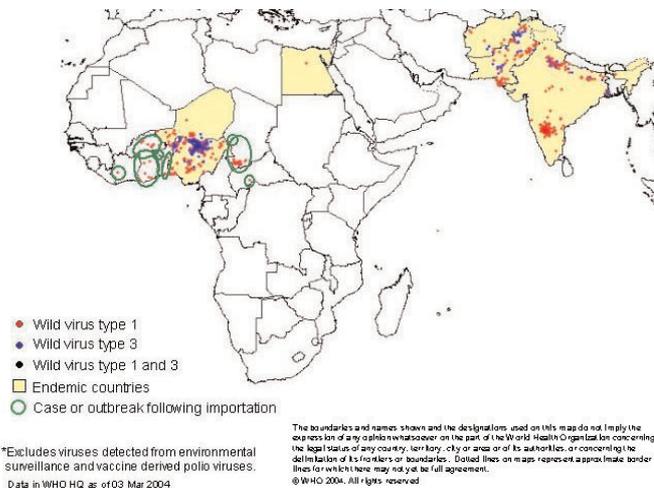
## AFP and polio reporting, year-to-date comparison: 2002 vs. 2003

Source: Data at WHO Geneva as of 2 March 2004

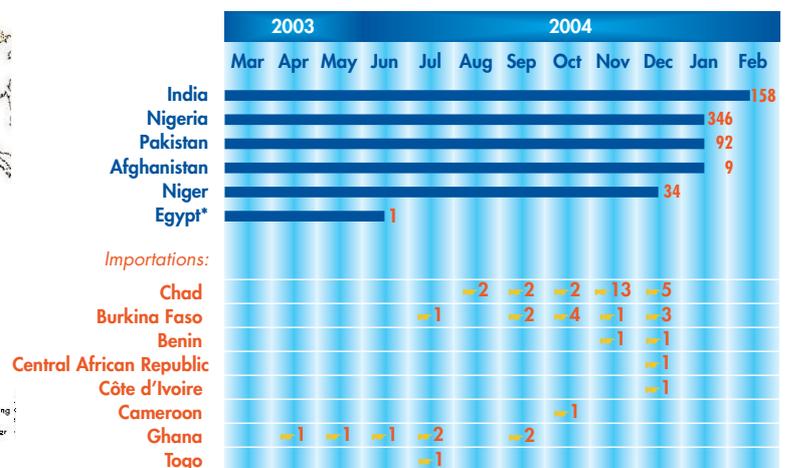
Region	2002 (as of 3 March 2003)					2003 (as of 2 March 2004)				
	Non-polio AFP rate	Adequate specimen rate	Confirmed polio cases	Wild polio virus cases	Cases pending classification	Non-polio AFP rate	Adequate specimen rate	Confirmed polio cases	Wild polio virus cases	Cases pending classification
African	3.00	82%	219	206	942	2.60	89%	437	437	477
Americas	1.24	93%	0	0	300	1.24	81%	0	0	360
Eastern Mediterranean	2.26	88%	119	119	48	2.40	90%	111	111	53
European	1.20	82%	0	0	235	1.22	82%	0	0	321
South-East Asia	1.93	83%	1599	1599	550	1.97	83%	225	225	430
Western Pacific	1.34	88%	0	0	364	1.36	88%	0	0	364
Global total	1.91	85%	1937	1924	2439	1.90	86%	773	773	2005

### Wild poliovirus map

03 March 2003 – 02 March 2004



**Timeline:** Total wild poliovirus and date of most recent wild poliovirus by country from 03 March 2003 to 02 March 2004



## Supplementary immunization activities calendar for selected countries

Category	Country	March 2004 Type of activity Intervention	April 2004 Type of activity Intervention	May 2004 Type of activity Intervention
<b>Endemic</b>	Afghanistan	9 March / NIDs / OPV Round 1	19 April / NIDs / OPV Round 2	
	Egypt	27 March / NIDs / OPV Round 1	27 April / NIDs / OPV Round 2	
	India		4 April / NIDs / OPV Round 3	9 May / SNIDs / OPV Round 1
	Niger	26 March / NIDs / OPV Round 2		
	Nigeria	22 March / NIDs / OPV Round 2	19 April / SNIDs / OPV Round 1	17 May / SNIDs / OPV Round 2
	Pakistan	9 March / NIDs / OPV Round 2	20 April / NIDs / OPV Round 3	
<b>Importations and high-risk countries</b>	Benin	26 March / NIDs / OPV Round 2		
	Burkina Faso	26 March / NIDs / OPV Round 2		
	Cameroon	30 March / SNIDs / OPV Round 2		
	Central African Rep.	31 March / Mop-up / OPV Round 2		
	Chad	30 March / NIDs / OPV Round 1		4 May / NIDs / OPV Round 2
	Côte d'Ivoire	26 March / NIDs / OPV Round 2		
	DR Congo	30 March / Mop-up / OPV Round 1		4 May / SNIDs / OPV Round 1
	Ghana	26 March / NIDs / OPV Round 2		
	Somalia	29 March / NIDs / OPV Round 2		
	Togo	26 March / NIDs / OPV Round 2		

This calendar reflects information known to WHO/HQ at the time of print. Some dates are preliminary and may change. Please contact WHO/HQ for up-to-date information.

## Prince of Wales backs India's fight against polio

Photo: © Kiran Pasricha



Dr Jay Wenger, WHO, explains the benefits of using OPV to the Prince of Wales during a National Immunization campaign in Kutail Gamri.

ON 31 October, HRH The Prince of Wales visited a north Indian village to meet children being immunized against polio as part of a targeted national campaign to eradicate the disease in India by the end of 2004. The Prince's visit to Kutail Gamri in Haryana

state raised awareness ahead of an immunization campaign, when more than 100 million children were vaccinated against polio in just six days across northern India.

The Prince took the opportunity of his visit to commend the UK Department for International Development (DFID) commitment to the global effort to rid the world of polio.

The Prince of Wales' presence raised awareness of this incredible international effort in which all countries have a shared interest, ahead of this important immunization campaign. He reminded everyone – children, parents, and immunizers – of the importance of reaching all children during this campaign if India is to succeed in eradicating polio from India once and for all. ♦

## India's biggest film star Amitabh Bachchan named UNICEF Goodwill Ambassador



TV-spots featuring Indian movie star Amitabh Bachchan helped raise awareness of polio campaigns in India

AMITABH BACHCHAN, India's biggest film star, recently became one of UNICEF's Goodwill Ambassadors, promoting the rights of children in India and around the world. Mr Bachchan will periodically speak out on issues critical to the lives of children, including the importance of eradicating polio in India.

"India is closer than ever to eradicating polio," Mr Bachchan said. "Let's finish the job and rid our country of this terrible disease forever."

"Mr Bachchan's tremendous appeal to young people makes him an ideal Goodwill Ambassador. When he speaks, people from all walks of life, from the youngest to the oldest, listen carefully," said Maria Calivis, UNICEF Representative in India. "Our hope is to leverage Mr Bachchan's powerful connection with the people of India to make an even bigger difference in children's lives, as he has already done for polio."

In 2003, Mr Bachchan played a key role in the Government of India's Pulse Polio Immunization programme, appearing in a series of award-winning television and radio commercials to encourage parents to immunize their children. ♦

## Ghanaian polio heroes recognized

Four individuals were recognized by the CDC Foundation for their extraordinary contributions and sacrifice to the polio eradication initiative in Ghana.

Ramatu Braimah was severely injured in a car accident, in which Felix Mensah, Bismark Karimu and Musah Amadu were killed following a vehicle accident during a mop-up immunization campaign in Ghana.

The Polio Eradication Heroes Fund (PEHF) was established in June 2000 by the CDC Foundation, to recognize health workers and volunteers who have lost their lives or incurred serious injury as a direct consequence of their participation in polio eradication activities.

## Denise Johnson recognized with 2003 Service to America medal

DENISE JOHNSON, Deputy Chief of the Polio Eradication Branch for the US Centers for Disease Control and Prevention (CDC) received the 2003 Service to America national medal for her dedication to eradicating polio. Johnson, who has worked at CDC for 25 years, "is the glue that holds the polio operations together," said Bob Keegan, Acting Director of CDC's Global Immunization Division. Johnson was nominated for the award by her co-workers at CDC. Dr Walter Orenstein, Director, National Immunization Program, CDC said, "I think everyone feels they can call on Denise any time of day or night, and have her devote 100% of her effort on their problem." When told about her Service to America medal, Johnson said, "I am sitting here in my air-conditioned office. In India right now, there are people on the ground tromping through villages, going house-to-house, looking for kids to give them the vaccine. Those are the real heroes. This is an award for all of the polio eradicators around the world."



Photo: © Sam Kliney/Kittner.com

Denise Johnson, Deputy Chief of the Polio Eradication Branch for the US Centers for Disease Control and Prevention recognized with 2003 Service to America medal

The Service to America medals were created in 2002 by the Partnership for the Public Service (a non-partisan, non-profit organization committed to recruiting and retaining excellence in the federal workforce) and the Atlantic Media Company. ♦

COUNTRY-FOCUS  
**INDIA**

Continuing our series of country-focus features, this month Polio News examines polio eradication in India.

# Best ever opportunity – India announces largest ever campaign to end polio in 2004

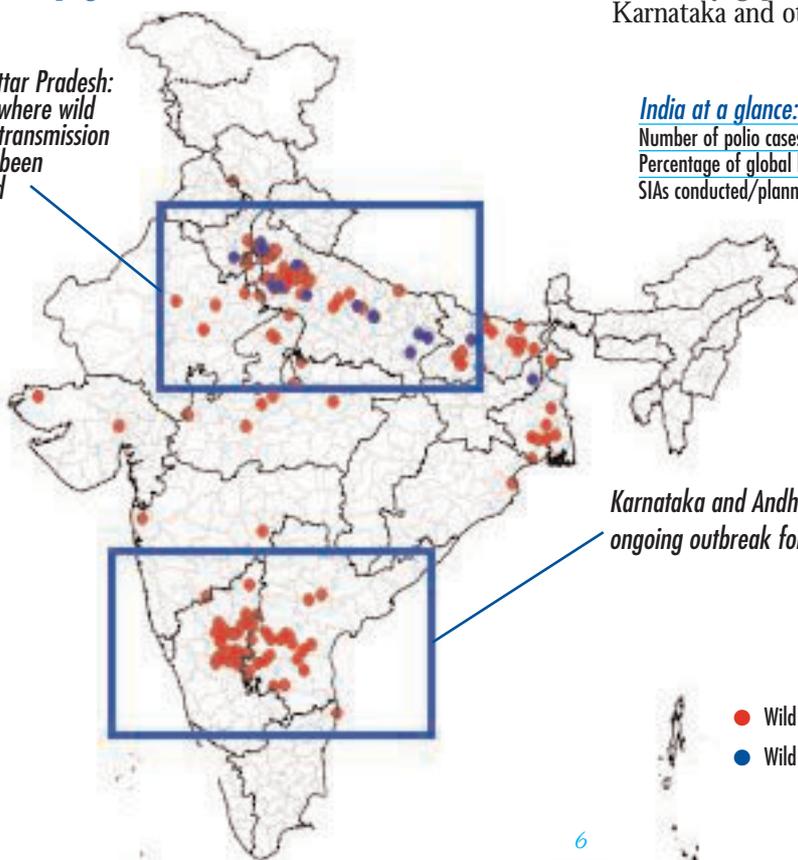
There has never been a better opportunity to interrupt wild poliovirus transmission in India, according to the November 2003 India Expert Advisory Group (IEAG) on Polio Eradication.

Poliovirus transmission is at its lowest ever in the high season (September to December 2003), there is very low transmission in the key states of Uttar Pradesh and Bihar, and there is an incredible motivation in India to finish the job once and for all. The end of 2004 deadline for stopping transmission in India is feasible.

Moving into the low transmission season in the early part of 2004 provides an ideal six month window of opportunity to stop poliovirus transmission. The IEAG identified four key factors that would be key for stopping poliovirus transmission in 2004:

**1. Stop polio transmission in western Uttar Pradesh (see box next page)...**

*Western Uttar Pradesh: only area where wild poliovirus transmission has never been interrupted*



National immunization days in India, 2003

Photo: © Seprh

**2. Increase in the number and quality of large-scale campaigns...**

During 2004, it will be critical to protect all children while focusing on the areas which have yet to stop poliovirus transmission, particularly western Uttar Pradesh. Five national immunization campaigns with a subnational immunization campaign covering 75% of the country are planned for 2004. These campaigns will be supported by large-scale mop-up campaigns in any areas of the country where wild poliovirus is detected from mid-2004 onwards. However, success hinges on improving the quality of the campaigns in the chronically low performing districts, including Aligarh and Baudan of Uttar Pradesh, which together account for 50% of cases in that state. The nationwide campaigns will also address the substantial immunity gaps within the states of Andhra Pradesh and Karnataka and other high risk states.

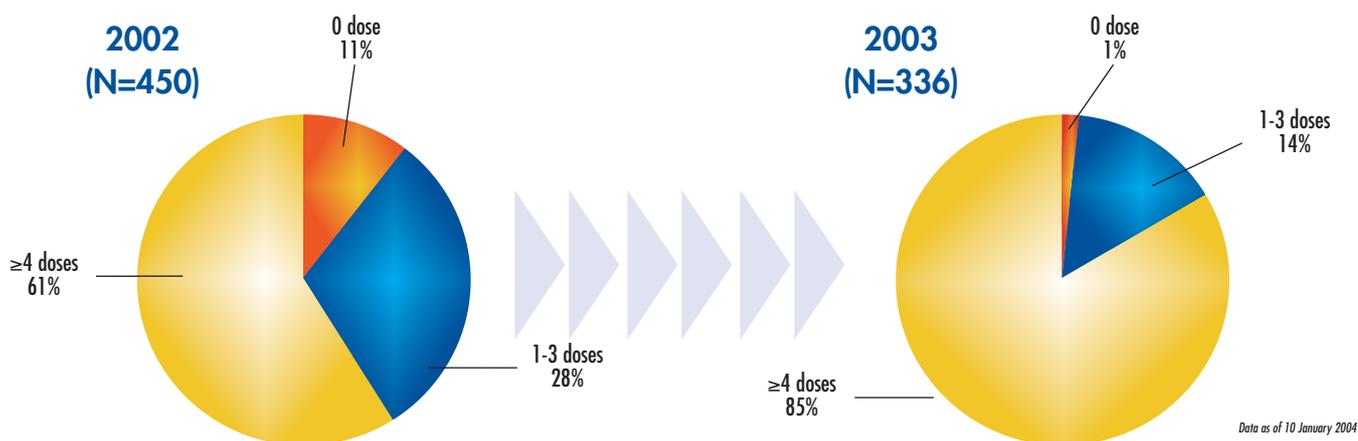
**India at a glance:**

	2002	(as of 2 March) 2003	2004
Number of polio cases	1600	225	N/A
Percentage of global burden	83%	29%	N/A
SIA's conducted/planned:	1 NID (Jan)	2 NIDs (Jan & Feb)	5 NIDs
	2 SNIDs (Sept & Nov)	4 SNIDs (Apr, June, Sept & Nov)	1 SNID

*Karnataka and Andhra Pradesh: ongoing outbreak following importations from Uttar Pradesh*

- Wild virus type 1
- Wild virus type 2

## Non-polio AFP cases (Muslim children age $\geq 6$ months $\leq 5$ years) by OPV status, Uttar Pradesh



### 3. Enhanced social mobilization and communication...

During 2003, a strong focus of the six SIAs has been on reaching all children under the age of five years, regardless of their socioeconomic background, with particular focus on the remaining under- or unimmunized groups of children in the state of Uttar Pradesh. In close collaboration with the Government of India, UNICEF India deployed 4000 individuals to assist national health workers with community mobilization activities to reach Muslim children – the group, which represented a disproportionate 59% of new polio cases in India in 2003. Partners worked closely with Muslim community leaders and institutions, developed targeted communications materials, and ensured members of the Muslim community were closely involved in planning, implementing, monitoring and evaluating activities.

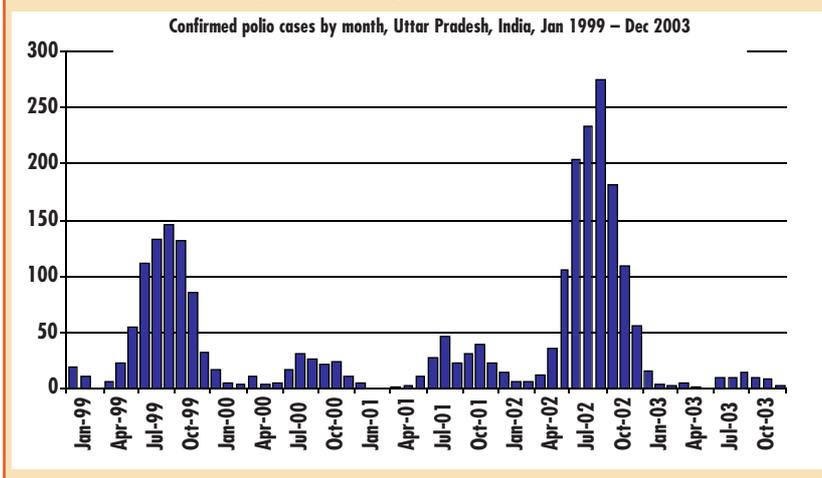
Thanks to these strong social mobilization efforts, the proportion of Muslim children receiving at least four doses of oral polio vaccine (OPV) in India increased from 61% in 2002 to 85% in 2003. In 2004, it will be critical to apply the lessons of Uttar Pradesh to reach out to *all* children in Bihar, West Bengal and everywhere the virus still circulates. Strong emphasis must be placed on the full engagement of minority communities in these areas.

### 4. Strong political commitment and oversight...

Direct, high level political oversight at the national and state levels will be essential to ensure every child is reached during the six immunization campaigns in 2004. This includes the increased emphasis at the national level, potentially led by the Prime Minister's office and replicated down through to the district level. 💧

### 1. Stop poliovirus transmission in western Uttar Pradesh

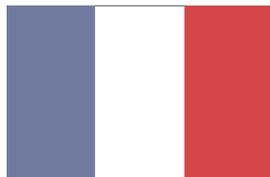
Given poliovirus transmission has yet to be interrupted in western Uttar Pradesh, it will be critical to address the remaining immunity gaps through high-quality large-scale campaigns throughout 2004. Last year, India dramatically increased the quantity and quality of its large-scale immunization campaigns. As a result, India now has the lowest-ever levels of poliovirus transmission in the key polio hotspots including Uttar Pradesh, as the country enters the critical low transmission season, for poliovirus in early 2004.



After being immunized with OPV during a national immunization day campaign, a young child gets finger-marked to ensure that every child under five has been vaccinated.

## France commits €30 million to fight polio in Africa – Funding gap for 2004–2005 reduced to US\$ 130 million

IN the last two years G8 leaders have pledged to provide the necessary funding to eradicate polio once and for all. To fulfil its part of the G8 commitment, France has pledged US\$ 35.5 million over three years for polio eradication in Africa. This commitment has helped reduce the funding gap to US\$ 130 million for 2004–2005. France now joins Canada, Japan, the Russian Federation, the United Kingdom, and the United States as the G8 countries that have fulfilled their commitments made at the G8 Summit in Kananaskis and in Evian, France. ♦



## Global Initiative faces acute cash flow crunch

THE most pressing priority for the Global Polio Eradication Initiative will be to interrupt transmission of wild poliovirus worldwide in 2004. The Initiative is, however, experiencing an acute cash flow crunch that may result in curtailing priority activities in 2004. Donors are therefore urged to consider fast-tracking their pledges in order to help cover critical surveillance activities and other immediate needs. Timely availability of funds will ensure that countries can implement planned activities and that the Initiative is prepared to quickly respond to any emergencies. ♦

### Russian Federation – provides funding for polio eradication

With a global funding gap of US\$ 130 million for polio activities up to 2005 threatening the chance of a polio-free world, the spearheading partners of the Global Polio Eradication Initiative – the World Health Organization (WHO), Rotary International, CDC and UNICEF – welcomed the Russian Federation's announcement to provide funding for the global effort to eradicate polio. Dr Nikolay Fetisov, Conseiller of the Russian Federation presents Dr David Heymann, Representative of the Director-General for Polio Eradication, WHO, with the first US\$ 1 million instalment of its G8 pledge to polio.



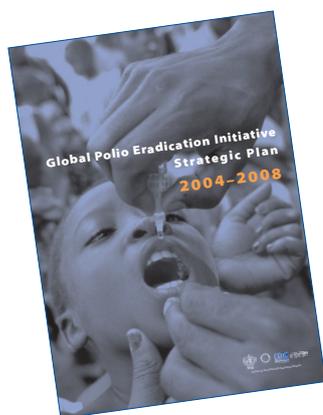
Photo: © LIV Com Sait/Irene K. Langui

Recent donations:*	
<b>Italy</b>	US\$ 374 530 in global funds
<b>Germany</b>	US\$ 3.8 million for 2003–2007 in global funds
<b>France</b>	US\$ 35.5 million for 2004–2006
<b>United Kingdom</b>	US\$ 27.8 million in global funds and for the India programme
<b>Australia</b>	US\$ 1.5 million in global funds
<b>Rotary International</b>	US\$ 15.3 million for Afghanistan, African Region (AFR), Eastern Mediterranean Region (EMR), Egypt, India, Pakistan, Niger and Nigeria.
<b>USAID</b>	US\$ 27.5 million for surveillance, laboratory, and operations costs; communications and social mobilization.

*The global Polio Eradication Initiative expresses its gratitude to all donors. \*Donations announced since Polio News 20 (October 2003).*

## Now published:

Global Polio Eradication Initiative Strategic Plan 2004–2008



Estimated External Financial Resource Requirements 2004–2008

### Materials available

- **Global Polio Eradication Strategic Plan 2004–2008**
- **The End of Polio: A Global Effort to End a Disease – an inspiring and poignant chronicle of the global initiative to eradicate polio from the world-renowned photographer Sebastião Salgado (now available in bookstores)**
- **Jan 2004 edition of Bulletin of the World Health Organization – with a special focus on polio eradication**

Please email: [polioepi@who.int](mailto:polioepi@who.int) for copies.

### Upcoming events 2004

- India Expert Advisory Group, 26–27 March 2004
- WPRO TAG meeting, 29–31 March 2004
- Fifty-seventh World Health Assembly, 17–27 May 2004

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