



Polio News

Issue 3 – March 1999



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A Newsletter for the Global Polio Eradication Initiative
Expanded Programme on Immunization
Department of Vaccines and other Biologicals
World Health Organization

Dr Brundtland Declares War on Polio

DR Gro Harlem Brundtland, Director-General of WHO, has declared war on polio and called for an acceleration of efforts to meet the year 2000 target. At the WHO Polio Management Team meeting in Geneva on 4 – 5 February, she spoke with regional representatives about strategies to intensify efforts. Later the same month, at the World Economic Summit in Davos, Switzerland she described the important role of the private sector in health and highlighted global polio eradication as an example of successful collaboration. She paid tribute to Rotary International – WHO's closest ally in the fight against polio – for its enormous financial contribution:

“The success in the fight against polio has been greatly helped by Rotary International who, by the end of this year, will have raised close to 500 million dollars for vaccination programmes,” she said. “That is a fantastic effort. We need an estimated 370 million



dollars more in order to carry out those last essential vaccination campaigns. A world free of polio would save 1.5 billion dollars annually in vaccination costs. Think about it. A one-time investment of 370 million dollars will give savings of 1.5 billion dollars every year for as long as you can imagine. I can think of few investments with a better return than this one.” ♦

UN Negotiates Ceasefire for Child Immunization



In January President Kabila launched sub-immunization campaign in DR Congo

PRESIDENT Kabila has indicated that ‘days of tranquillity’ will be brokered for immunization in the Democratic Republic of Congo.

Following efforts by the UN, WHO and UNICEF, rebels said they would observe a temporary ceasefire to allow children to be vaccinated against polio.

The UN Secretary-General's Special Re-presentative for

Children and Armed Conflict, Olara Otunnu, received assurances from Ernest Wamba dia Wamba, Chairman of the Congolese Rally for Democracy that fighting would stop in rebel-controlled areas. DR Congo is now the highest global priority for polio eradication.

As Polio News went to press, a letter signed by Dr Gro Harlem Brundtland, Director-General of WHO and Carol Bellamy, Chief Executive of UNICEF, was sent to the UN Secretary-General to request his assistance. A sum of US\$ 15 million will be needed to carry out three rounds in 1999. ♦



Polio Eradication Boosts Children's Vitamin A Status

GLOBAL momentum to eradicate polio is solving another serious child health problem – vitamin A deficiency (VAD). Routine distribution of vitamin A capsules during national immunization days (NIDs) is helping prevent child deaths and achieve the World Children's Summit goal to eliminate vitamin A deficiency by the year 2000.

In 1998, more than 40 countries distributed this vital micronutrient during NIDs; 26 of these were in Africa (see map) where the prevalence of VAD is the highest in the world. In 1999, many other countries are planning to follow suit. Globally, over 250 million children under five are at risk. Long known to be a principal cause of blindness, lack of vitamin A is now recognized as a major contributing factor in an estimated one to three million child deaths annually. In many countries, deficiency is so widespread that nationwide campaigns are needed.

There is increasing evidence that supplementing levels of vitamin A, which strengthens a child's immune system and builds resistance to disease, can reduce all causes of childhood deaths by between 23 and 34 percent.

It cuts measles mortality by as much as 50 percent, and deaths by diarrhoeal disease by up to one third. Vitamin A supplementation is one of the most cost-effective health interventions available: one capsule costs just two US cents. It also makes NIDs more cost-effective and dramatically increases the overall health impact of a campaign. The ultimate goal is to encourage routine inclusion of vitamin A in immunization and other appropriate healthcare contacts.

Many mothers think vitamins and tonics are beneficial for their children, so are more likely to participate. Other than infants under six months who should not receive vitamin A, target groups are the same.

Distribution is easy to administer: capsules are stable, do not need a cold-chain and the only equipment needed is a pair of scissors to open them. As with oral poliovirus (OPV) drops, volunteers can easily be trained to give vitamin A orally. WHO recommends

vitamin A capsules as part of a broader strategy including diversification of diet and food fortification. But a single vitamin A supplement alone can make a big difference to the status of children over a four to six-month period. ♦



child receives vitamin A drops during NID in Nepal

Photo ©WHO/PHI. Schiller

Vitamin A distribution during NIDs in WHO's African Region 1995-1998



NID Calendar: December 1998 to June 1999

National Immunization Days and other supplementary OPV immunization

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

Month of 1st round	Country	Type of Activity	Date 1st round	Date 2nd round	Target Population
DECEMBER	China	SNIDs	3 Dec-98	5 Jan-99	35 000 000
	Bhutan	SNIDs	7 Dec-98	18 Jan-99	37 107
	India	NIDs	7 Dec-98	18 Jan-99	124 630 000
	Maldives	NIDs	7 Dec-98	18 Jan-99	–
	Nepal	NIDs	7 Dec-98	18 Jan-99	4 000 000
	Myanmar	NIDs	12 Dec-98	17 Jan-99	6 592 000
	Bangladesh	NIDs	13 Dec-98	2 Feb-99	20 000 000
	Pakistan	NIDs	16 Dec-98	27 Jan-99	28 090 000
	Rwanda	NIDs	16 Dec-98	18 Jan-99	1 189 504
	Sierra Leone	NIDs	19 Dec-98	6 Feb-99	800 000
	Dem. Rep. of Congo	SNIDs	21 Dec-98	25 Jan-99	3 100 000
	Thailand	NIDs	22 Dec-98	13 Jan-99	5 000 000
JANUARY	Burundi	NIDs	12 Jan-99	1 Feb-99	1 163 881
	Laos	SNIDs	1 Jan-99	1 Feb-99	333 000
	Liberia	NIDs	18 Jan-99	22 Feb-99	468 025
	Iran (Islamic Rep.)	NIDs	27 Jan-99	4 March-99	11 000 000
FEBRUARY	Sudan	NIDs	10 Feb-99	16 March-99	5 500 000
	Cote d'Ivoire	NIDs	12 Feb-99	15 March-99	3 304 277
	Egypt	NIDs	27 Feb-99	18 April-99	8 341 570
MARCH	Azerbaijan	NIDs	1 March-99	1 April-99	600 000
	Iraq	NIDs	1 March-99	1 April-99	3 700 000
	Jordan	NIDs	1 March-99	1 April-99	1 000 000
	Kazakstan	SNIDs	1 March-99	1 April-99	417 000
	Mauritania	NIDs	1 March-99	1 April-99	453 849
	Russian Federation	SNIDs	1 March-99	1 April-99	6 000 000
	Tajikistan	NIDs	1 March-99	5 April-99	700 000
	Lebanon	NIDs	29 March-99	3 May-99	380 000
	Syrian Arab Republic	NIDs	29 March-99	3 May-99	3 000 000
APRIL	Armenia	NIDs	1 April-99	1 May-99	190 000
	Georgia	SNIDs	1 April-99	1 May-99	12 000
	Papua New Guinea	SNIDs	1 April-99	1 Oct-99	750 000
	Turkmenistan	NIDs	1 April-99	1 May-99	468 000
	Uzbekistan	NIDs	1 April-99	1 May-99	2 460 000
	Palestine, N.A.	NIDs	3 April-99	8 May-99	225 000
MAY	Turkey	NIDs	1 May-99	1 June-99	7 560 000
	Afghanistan	NIDs	9 May-99	13 June-99	4 646 742
JUNE	Gambia	NIDs	16 June-99	24 July-99	253 476

News and Announcements



New polio web site

THE Beginning of the End is now online. The new website is designed for general interest visitors as well as the media and provides technical material for public health staff, largely in 'portable document format' (PDF) files. Information on polio, vaccines, eradication strategies and status by WHO Region, as well as dates and achievements of NIDS and case count of AFP and polio by country and region, are also available. A feedback page allows users to comment and contact WHO staff. The website is part funded by USAID. The site can be found at URL <http://whqsabin.who.int:8082/>.

EPI meeting in WHO's African Region

THE annual meeting highlighted recent progress in polio eradication in Africa. The Regional Commission for the Certification of Polio Eradication reviewed the Plan of Action for

Certification of Polio Eradication in Africa. The Interagency Coordination Committee (ICC) brought together all parties and partners interested in supporting EPI and polio eradication in Africa.

'The Beginning of the End' in Russian

WITH support from WHO's European Regional office, the polio eradication status report has been published in Russian. 'The Beginning of the End' can be ordered from WHO headquarters and is available as a PDF file on the polio website at [http://www.who.int/gpv-documents/Docs PDF/ www9841.pdf](http://www.who.int/gpv-documents/Docs%20PDF/www9841.pdf). Other polio or EPI-related documents are available at the website of the new WHO Division for Vaccines and other Biologicals (V&B) at www.who.ch/gpv-documents. ♦

Polio eradication partners

Champions of Polio Eradication

In January, Rotary International President James L. Lacy presented Rotary's Polio Eradication Champion Award to Ugandan President H.E. Yoweri Kaguta Museveni, and H.E. Mrs. Suzanne Mubarak, First Lady of Egypt. The Rotary Foundation and Rotary International established the award in 1995 to honour heads of state, health agency leaders and others who have made a significant contribution to global eradication efforts. In February, Danish Minister for Development Cooperation Mr Poul Nielson received the award from President Lacy in Copenhagen and former Rotary International President Bill Huntley awarded Canadian Prime Minister Jean Chretien with the prize in Ottawa.

Rotarians Making a Difference

Thousands of Rotarians are making a personal contribution in polio-endemic countries in Africa. In *Uganda*, Rotary volunteers are helping authorities plan and implement national immunization days by providing extra cold storage facilities, transporting vaccine to every immunization post and finding children who may have been missed during NIDs. Respected leaders in their communities, Rotarians also play a key advocacy role to win people's confidence in the polio programme.

In *Zimbabwe*, Rotarians travelled to the

remote northern corner of the country to find a population of children beyond the reach of local health authorities. They camped out in the bush for four weeks to facilitate both rounds and provide children with the polio vaccine.

In *Ivory Coast*, Rotarians worked with the Ministry of Health to plan and organize NIDs. Volunteers worked at the main vaccine storage centre, helped with transport and supplied lunches to health workers.

Polio Eradication Wins the Lottery

The Polio Eradication Initiative has agreed to be one of the primary beneficiaries of the International Foundation for the Millennium Fund – set up to improve the living conditions of all people in the third millennium by reducing death and alleviating suffering. The international effort not only meets the Foundation's criteria for support but is itself a gift to the children of the new millennium - giving them a world without polio.

The Fund is generating income from Millions2000 – a global lottery draw to be held on the first day of the new millennium. The lottery will create up to 2000 new millennium millionaires. Polio eradication will receive a minimum of US\$ 115 million if all lottery tickets are sold by the last day of 1999. Tickets are available through the inter-

net: www.millions2000.com or telephone +800 2424 2000.

USAID

In the last quarter of 1998, the United States Agency for International Development gave US\$ 25 million to polio eradication in Africa, South Asia and Europe. In February, the USAID Bureau in Africa signed a grant of US\$ 11 079 000 with WHO's regional office in Africa. USAID also launched a new initiative to increase participation of private voluntary organizations.

Worldnet TV will join the USAID/Voice of America partnership to continue year-round broadcasting on polio and immunization. In 1998, VOA aired over 500 broadcasts in 19 languages on polio. Scripts are available free of charge from the VOA website at [www.voa.gov/child survival](http://www.voa.gov/child%20survival).

For more information on USAID polio activities please contact Eilyn Ogden, USAID polio coordination focal point at eogden@usaid.gov, phone 202/712-5891 or fax 202/216-5891.

UN Foundation

The United Nations Foundation has donated US\$ 2.25 million to WHO and UNICEF for sustainable outreach services. The money will support three-year pilot studies in Chad, Mali, Mozambique and Uganda. ♦

Countries in conflict

First Round in Sierra Leone

THE country's first round of national immunization days was safely conducted from 19 to 20 December 1998 before renewed fighting broke out.

However, the campaign was restricted to seven of the country's 13 administrative districts



because of security concerns: 345 000 of the country's estimated 800 000 children under five were immunized. 56 percent of all under-fives were targeted.

All future polio eradication activities depend on improved security. These include the second round, now scheduled for late March, and acute flaccid paralysis (AFP) surveillance. ◆

Hope for the children of Sierra Leone

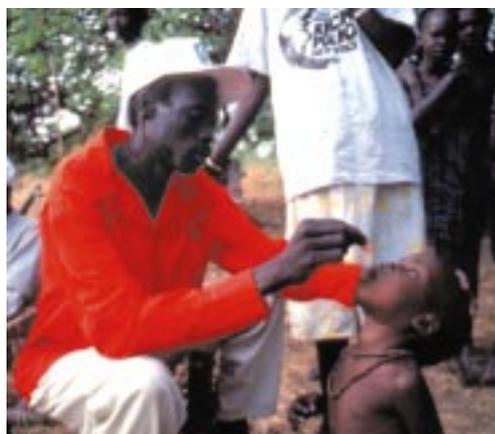
Photo ©WHO/PH. Schiller

Liberia's President Launches NID

THE first round of NIDS in Liberia was launched by President Charles Taylor on 18 January 1999. Nearly 580 000 children throughout the entire country were immunized with OPV during round one – ten percent more than the estimated target population.

A national holiday was declared to allow parents to bring their children to be immunized by Liberian health workers at 1500 posts from 18 to 20 January.

Liberia's Minister of Health Peter Coleman told reporters that he had received reports of thousands of parents and caretakers queuing at posts with their children to receive vaccine. The health minister thanked WHO, UNICEF, USAID and the European Union, as well as other international aid agencies for their support. ◆



Child receives polio vaccine in Adet Bahr el Ghazal region

Photo ©WHO/Marian tonietta

Breakthrough in South Sudan

POLIO eradication efforts conducted in rebel-controlled areas of South Sudan have reached a major milestone.

Following AFP surveillance training of local and NGO health staff by WHO and Operation Lifeline Sudan, the first case of wild poliovirus was found in Marial, Tonj County.

The case is a two and a half year-old girl. The virus was isolated at the Kenya national poliovirus laboratory and sent to South Africa for testing. ◆

Additional immunization rounds in 1999

THE Polio eradication activities must be rapidly intensified during 1999 for the year 2000 goal to be met. With the target date just two years away, virus transmission is still widespread in 'reservoir' countries and countries affected by conflict.

NIDS have achieved enormous success in endemic countries on all continents. China interrupted virus transmission in the entire country in 1994-95 and India reached more than 130 million children under five in just a few days.

But recent international reviews of EPI and polio eradication in India and Pakistan recommend intensified activities including door-to-door immunization and additional rounds.

In fact, most key countries, including Angola, Bangladesh, DR Congo, Ethiopia, India, Nigeria, and Pakistan will need to extend NID coverage to include additional nationwide rounds or targeted mopping-up activities.

These not only need a significant financial boost but also the participation of health workers at all stages.



Nationwide round in Bangladesh

Photo ©WHO/PH.Schiller

In all remaining countries classified as 'difficult', routine immunization coverage is low. The only way to increase immunity and stop transmission is to conduct additional house-to-house rounds between regularly scheduled NIDs.

For example, in many parts of Afghanistan and in some large Indian states, routine EPI coverage is under 20 percent; NID coverage over 90 percent may not interrupt transmission without more rounds. ♦

AFP and polio reporting, 1997 and 1998, by WHO Region, as of 22 February 1998

	1997			1998			
	Non-polio AFP rate	Confirmed polio cases	Wild poliovirus	Projected non-polio AFP rate	AFP cases with adequate specimens (%)	Confirmed polio cases	Wild poliovirus
African Region	0.16	1087	31	0.6	37%	51	51
Region of the Americas	1.04	0	0	0.8	71%	0	0
Eastern Mediterranean Region	0.85	1255	264	0.87	67%	357	161
European Region	1.12	7	6	1.15	79%	26	26
South-East Asia Region	0.32	2827	531	1.05	61%	3572	1020
Western Pacific Region	1.35	9	9	1.42	86%	0	0
Global Total	0.72	5185	841	1.17	62%	4006	1258

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