



PAN AMERICAN HEALTH ORGANIZATION
WORLD HEALTH ORGANIZATION



35th DIRECTING COUNCIL

42nd SESSION OF THE REGIONAL COMMITTEE

Washington D.C., 23-28 September 1991

RESOLUTION

CD35.R9

PLAN OF ACTION FOR THE ERADICATION OF THE INDIGENOUS TRANSMISSION OF WILD POLIOVIRUS FROM THE AMERICAS

THE 35th DIRECTING COUNCIL,

Having considered and examined the progress report presented by the Director (Document CD35/15 and Add. I and II) on the implementation of the Expanded Program on Immunization and the Plan of Action for the Eradication of Indigenous Transmission of Wild Poliovirus from the Americas;

Noting with satisfaction that: a) immunization coverage levels for children under one year of age have achieved at least 75% for each of the vaccines included in the program (DPT, polio, measles, and BCG), the highest level ever achieved in the Americas; b) transmission of wild poliovirus has been virtually interrupted in the Hemisphere, with only 17 cases reported in 1990 and only two during the first six months of 1991; and c) considerable progress has been made in regard to strategies to control or eliminate neonatal tetanus and measles;

Recognizing that considerable efforts will be needed to: a) achieve final eradication of indigenous transmission of wild poliovirus in the few remaining foci; b) maintain and increase the overall immunization coverage levels; c) control or eliminate neonatal tetanus and measles; and d) include new vaccines in the national immunization programs; and

Concerned that the global shortage of EPI vaccines, particularly measles and polio, could jeopardize the efforts of countries in maintaining the immunization coverage already achieved and the control of the EPI diseases.

RESOLVES

1. To congratulate all Member Governments and their health workers on the progress achieved so far, which demonstrates their high level of commitment to the health of the children of this Hemisphere.

2. To express appreciation and request continued support from the various agencies (United States Agency for International Development, UNICEF, Inter-American Development Bank, Rotary International, and the Canadian Public Health Association) which, together with PAHO, have given strong support to the national immunization programs and efforts to eradicate poliomyelitis.

3. To commend the Organization for its enthusiastic, outstanding support of the Member Governments' efforts to implement their national immunization programs and to eradicate poliomyelitis.

4. To urge Member Governments to adopt the "Priorities for Action" described in Chapter II of the progress report (Document CD35/15), to ensure that:

a) Immunization coverage is monitored by districts and that missed opportunities for vaccination are eliminated;

b) All vaccines used in the program conform to the minimum requirements of PAHO/WHO;

c) Weekly negative reports are transmitted in a timely manner from all health facilities included in the surveillance system, and that the PAHO reward of US\$100.00 for any person reporting the first confirmed polio case of an outbreak is widely publicized by all countries;

d) "Mop-up" operations are properly implemented, with two cycles of house-to-house vaccination, one month apart, in which all children under five years of age living in an extensive area, usually encompassing several districts, receive one OPV dose in each cycle, regardless of their previous vaccination status;

e) The surveillance system records separately neonatal and post-neonatal tetanus cases, and that vaccination programs are implemented in those districts already identified as at risk;

f) Human and financial resources are assigned to the program in the national health budgets and in the 1991–1996 national EPI Work Plans.

5. To request the Director to:

a) Apply all the needed measures to ensure the final interruption of transmission of wild poliovirus in the Western Hemisphere;

- b) Evaluate the strategies for measles control/elimination being used in Cuba and the English-speaking Caribbean and the feasibility of their implementation in the rest of the Western Hemisphere;
- c) Monitor the activities for neonatal tetanus control in those areas identified as at risk and support the expansion of surveillance to verify the degree of impact;
- d) Continue aggressive efforts to mobilize the needed additional resources to face the challenges described in the progress report;
- e) Take the necessary actions to address the issue of vaccine shortage, with the aim of achieving regional self-sufficiency in all matters of vaccine production and quality control;
- f) Report on the progress of the program to the XXXVI Meeting of the Directing Council in 1992.

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