

Global Update

On behalf of the GPEI Michel Zaffran, Director, Polio Eradication, World Health Organization DCVMN General Assembly, Buenos Aires, 27 October 2016







BILL& MELINDA GATES foundation





Progress in WPV eradication





1988

Lowest-ever polio levels

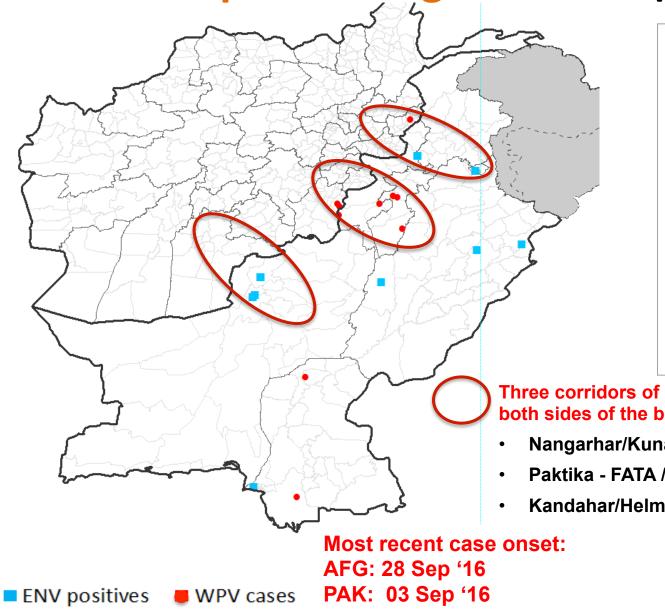
Public Health Emergency of International Concern

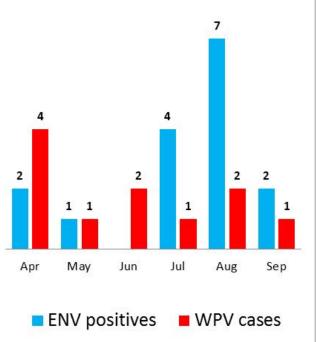


Pakistan – Afghanistan Lowest number of cases ever in the epidemiological block



AFG-PAK epidemiological block- past 6 months





Three corridors of active transmission link reservoirs on both sides of the border:

- Nangarhar/Kunar Khyber/Peshawar
- Paktika FATA / Bannu
- Kandahar/Helmand Balochistan (Quetta block)



Pakistan- Afghanistan Epidemiological Block



- Situation improved; decreased cases & +ve Environ. Samples
- Strong Emergency Operation Centers (EOCs)
- Strong coordination between the two national programs
- National Emergency Action Plans (2016-2017) operationalized and kicked off

Concerns:

- Deteriorating access in north-east Afghanistan (Kunduz)
- Outbreak in south KP / FATA southeast Afg. Block
- Weaknesses in surveillance at district level in Pakistan
- Remaining quality problems in Northern Sindh and Karachi



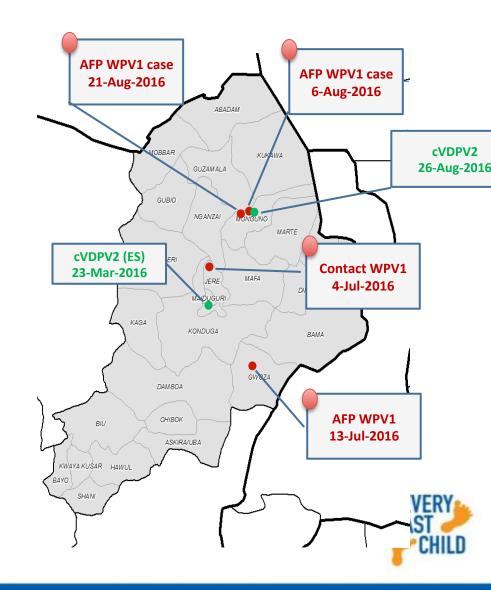
Nigeria + Lake Chad



WPV Outbreak in Borno State , Nigeria



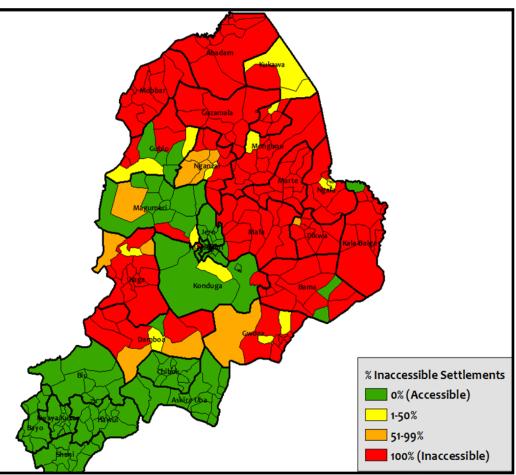
- WPV1 outbreak : 4 cases and 2 isolates in community contacts
- cVDPV2 outbreak : ES isolate in March and one isolate from healthy child in August
- Evidence of prolonged undetected circulation (Over 4 years)
- AFP surveillance in inaccessible areas
 limited to IDPs camps established within
 partially accessible or recently liberated
 LGAs
- Insecurity and large population movements across 5 countries in the Lake Chad Basin region
- Declaration of level 3 health sector emergency



Multi-country outbreak response

- Regional public health emergency
- Coordination established in N'djamena with 5 governments
- Multi-country response plan
 - 5 bOPV SIAs, 41 million under 5 targeted
 - Surveillance enhancement
- Strategies to reach children
 - Fire walling, Permanent Health Teams, Vaccination in International Border and Permanent Transit points, Hit and Run, Vaccination in IDP camps...
- Advocacy, communications and social mobilization strategies
- Strong linkages with Humanitarian response

Borno State accessibility status end-August 2016



Learning the lessons from Nigeria

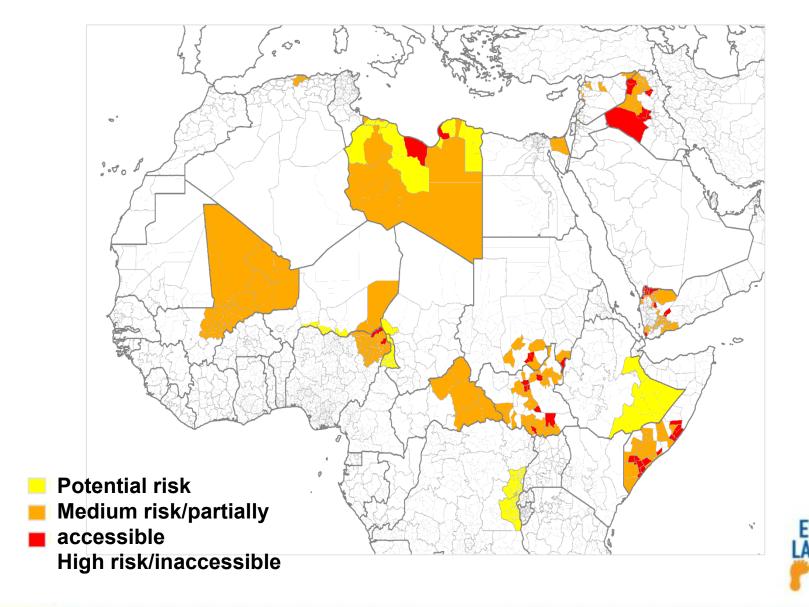
Ensuring there are no more undetected reservoirs



Conflict-related access limitations



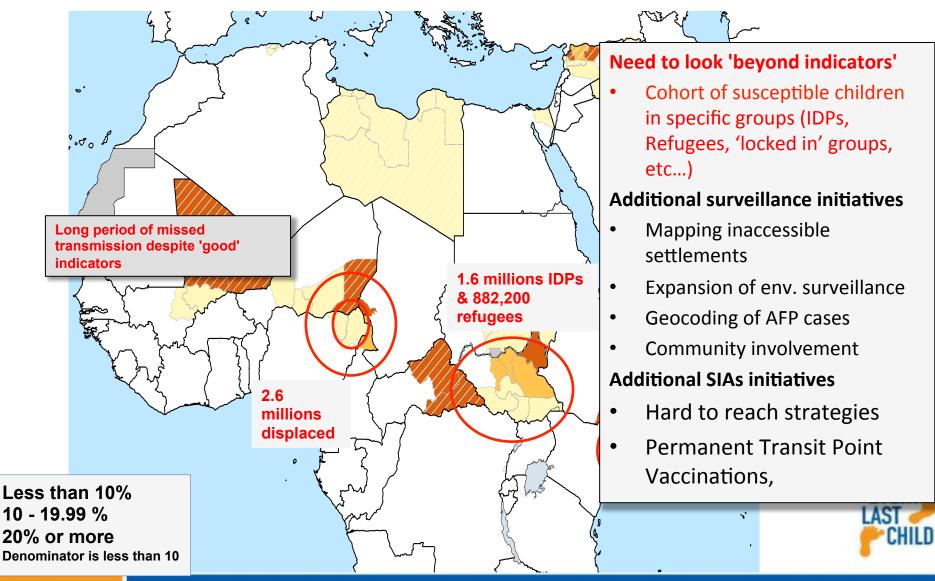
CHILD



Risk of outbreaks following PV importation

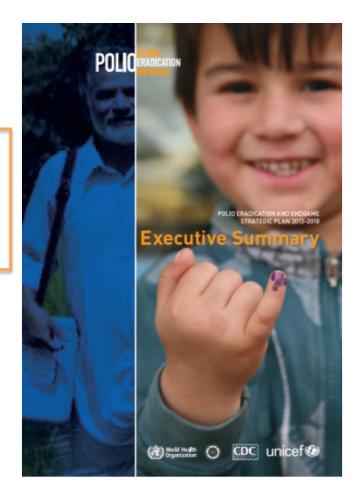


% of AFP cases aged 6 to 59 mo with 0-2 OPV doses, last 12 months (5 Oct '15 to 4 Oct '16



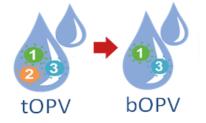
Polio Eradication and Endgame Strategy

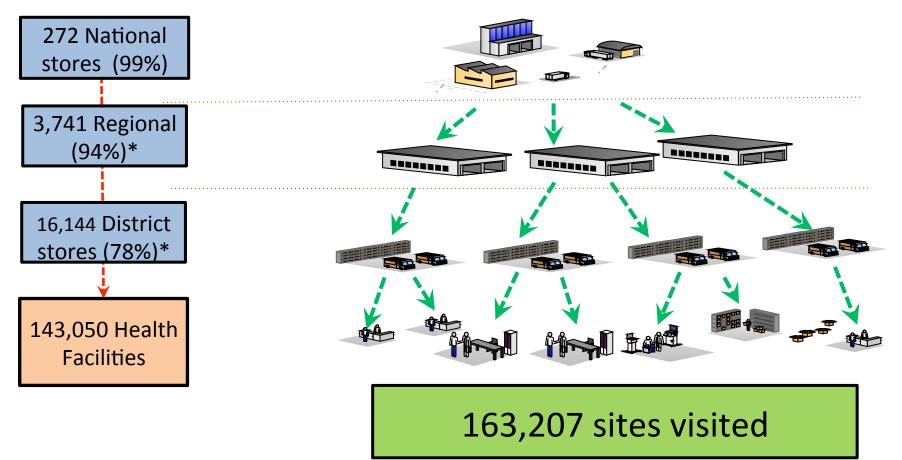
- 1. Poliovirus detection & interruption
- 2. OPV2 withdrawal, IPV introduction, immunization system strengthening
- 3. Containment & Global Certification
- 4. Legacy Planning





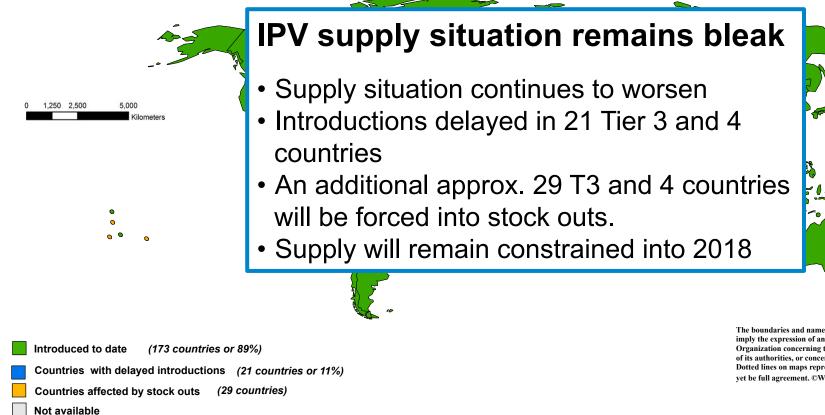
Switch from tOPV to bOPV





- Globally synchronized switch occurred 17 April to 1 May
- All 155 countries/territories using tOPV switched to bOPV in a synchronised manner

Countries using IPV vaccine POLIO



Not applicable

The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted lines on maps represent approximate border lines for which there may not yet be full agreement. ©WHO 2016. All rights reserved.



GLOBA

Data source: WHO/IVB Database, as of 13 October 2016 Map production Immunization Vaccines and Biologicals (IVB), World Health Organization

Type 2 Poliovirus : need to stay vigilant!



19 VDPV2 events since the Switch (chronological order of lab notification)

(Guinea-ongoing since 2014)

1 Egypt

Nigeria - Borno (Environmental sample) + Lake Chad region - Niger, Chad, Cameroun

- 3. Kenya
- 4. Syria
- 5. DRC
- 🙈 India Telangana 1
- 7.) Nigeria Jigawa
- 8. India Kolkata
- 9. India Delhi

cVDPV2

mOPV2 released by WHO DG

10. India - Telangana 2 11. Pakistan – Balochistan Quetta 1

- 12 Pakistan Sindh
- 12. Pakistan Sindh
- 13. Ukraine Odessa
- 14. Yemen Aden
- 15. Palestine Bethlehem
- 16, Nigeria Borno (healthy child)
- 17. Afghanistan Paktika
- 18. Pakistan Balochistan Quetta 2
- 19. Moscow, Russian Federation

Polio Eradication and Endgame Strategy

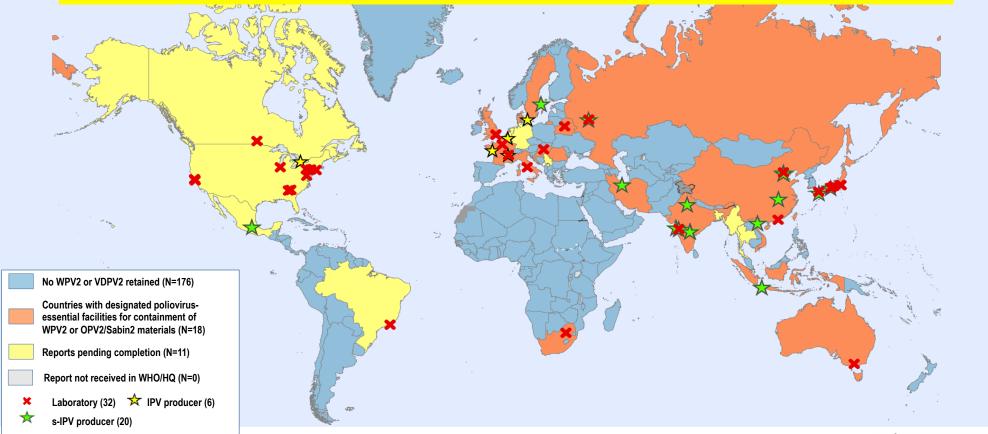
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GAPIII - Phase I (WPV2/VDPV2)

23 countries have reported hosting 58 designated Poliovirus-Essential Facilities (PEFs)



Some territories administrated by sovereign states may be at a different completion stage of containment he legal status of any country, territory, city or area or of its authorities, or concerning the deminiation or its nonters or boundaries. Dotted and dashed lines on maps represent approximate border lines

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Phase II. Progress/Status Update



Phase II: reduce risk in remaining facilities:	0 facilities certified against GAPIII
Containment Advisory Group (CAG): Address technical concerns, including guidance for completion of Phase I	TORs established Call for Nomination issued
GCC Containment Working Group (GCC CWG)	TORs established Call for Nomination issued in October
 GAPIII Containment Certification Scheme (CCS) Proposes interim solutions: Certificate of participation Interim certificate of containment Certificate of containment 	 CCS to supersede GAPIII, Annex 4: Verification of containment is a national responsibility Submission of GCC /CWG CCS submitted to SAGE Polio WG for endorsement
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Polio Eradication and Endgame Strategy

- 1. Poliovirus detection & interruption
- OPV2 withdrawal, IPV introduction, immunization system strengthening
- Containment & Global Certification
- 4. Transition Planning





1. Country-level Transition Planning



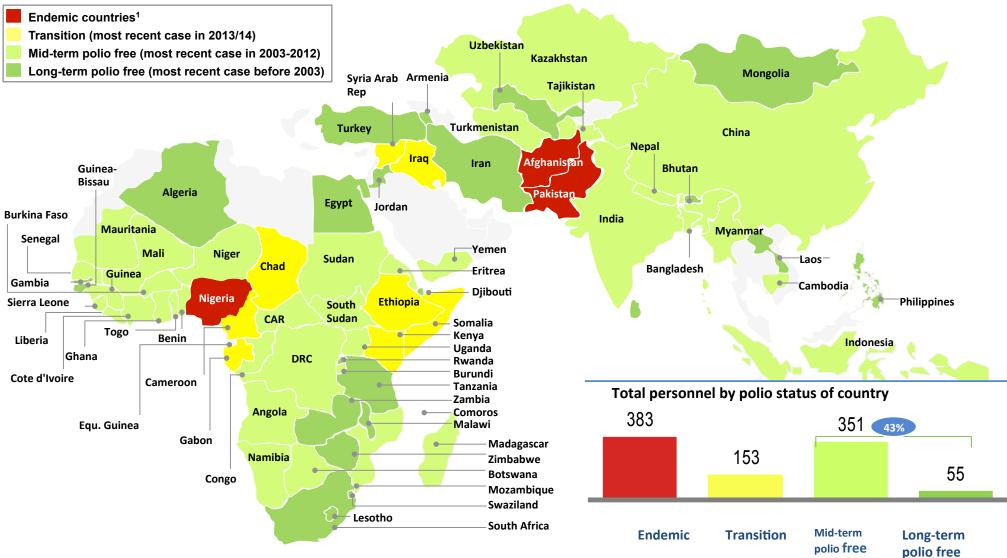
• 16 countries represent >90% of GPEI investment

		UNICEF Region	GPEI PLANNING MILESTONES						
Country	WHO Region		Communication to government leadership (with budget projections)	Governing body and management team appointed	Mapping of polio-funded assets available	Mapping of country priorities available	Transition strategies identified and agreed with stakeholders	Draft transition plan available	Final transition strategy available
Afghanistan	EMRO	ROSA							
Angola	AFRO	ESARO	Complete	In process	Complete	In process	Not yet started	Not yet started	Not yet started
Bangladesh	SEARO	ROSA	Complete	In process	In process	In process	Not yet started	Not yet started	Not yet started
Cameroon	AFRO	WCARO	Complete	Complete	Complete	In process	Not yet started	Not yet started	Not yet started
Chad	AFRO	WCARO	Complete	Unknown	Complete	In process	Not yet started	Not yet started	Not yet started
DRCongo	AFRO	WCARO	Complete	Unknown	Complete	In process	Not yet started	Not yet started	Not yet started
Ethiopia	AFRO	ESARO	Complete	Complete	Complete	In process	Not yet started	Not yet started	Not yet started
India - UNICEF	SEARO	ROSA	Complete	Complete	Complete	Complete	Complete	Complete	In process
India - WHO	SEARO	ROSA	Complete	Complete	Complete	Complete	Complete	Complete	In process
Indonesia	SEARO	EAPRO	Complete	In process	In process	In process	Not yet started	Not yet started	Not yet started
Myanmar	SEARO	EAPRO	Complete	Not yet started	Not yet started	Not yet started	Not yet started	Not yet started	Not yet started
Nepal	SEARO	ROSA	Complete	Not yet started	In process	In process	Not yet started	Not yet started	Not yet started
Nigeria	AFRO	WCARO	Complete	Complete	Complete	In process	In process	Not yet started	Not yet started
Pakistan	EMRO	ROSA							
Somalia	EMRO	ESARO	Complete	Unknown	Not yet started	Not yet started	Not yet started	Not yet started	Not yet started
South Sudan	EMRO	ESARO	Complete	Unknown	Complete	In process	Not yet started	Not yet started	Not yet started
Sudan	AFRO	MENA	Complete	Complete	In process	In process	Not yet started	Not yet started	Not yet started

2. Agencies transition



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Footprint of WHO Polio-funded Staff in Countries

3. Post Eradication Strategy



Purpose: Define how a polio-free world will be sustained

Four goals (provisional):

- 1. Contain polio sources
- 2. Detect and respond to any poliovirus
- 3. Protect populations through immunisation
- 4. Manage effectively and monitor, to ensure delivery of the above goals is embedded in existing mechanisms or develop new mechanisms

Development process:

• GPEI-led but highly inclusive; approximately one year

Relationship to transition planning:

• More tightly define the parameters towards which transition planning is needed

Programme Priorities Next 6 months



Priorities



1. Interrupt transmission in **3** endemic countries

- Response to Nigeria outbreak in all 5 Lake Chad basin countries
- Continued support to Pakistan and Afghanistan to implement all NEAP activities
- 2. Risk assessment in all security compromised and IPV deprived countries:
 - Surveillance gaps
 - Careful management of IPV supply to highest risks countries

3. Intensify progress with containment

- Scientific guidance (CAG)
- Launch of Certification process (CCS)

4. Maintain momentum on transition planning

- Internal Agencies processes
- Ramp down of country budgets, taking into account necessary pause for Lake Chad

5. Political advocacy and resource mobilization

Sustain efforts in non endemic countries



We have never been this close!

- Thanks to an extraordinary coalition of public and private sector actors
- Thanks to the contribution of many DCVMN companies

Polio will be eradicated !



