



WORLD HEALTH
ORGANIZATION

Regional Office
for the Eastern Mediterranean

مَنْظَمَةُ الصِّحَّةِ الْعَالَمِيَّةِ

المكتب الإقليمي
لشرق البحر المتوسط

ORGANISATION MONDIALE
DE LA SANTE

Bureau régional
de la Méditerranée orientale

MESSAGE OF DR HUSSEIN A. GEZAIRY

DIRECTOR

WHO EASTERN MEDITERRANEAN REGION

To the

Regional Scientific Working Group Meeting

on Diarrhoeal Diseases Research

Alexandria, 15 to 16 July 1984

Dear Colleagues,

It gives me great pleasure to welcome you today to the Fifth Meeting of the Regional Scientific Working Group on Diarrhoeal Diseases Research. Some of you were with us at the last meeting in April 1983 and today we have been joined by some distinguished colleagues active in diarrhoeal diseases control in the Region. To all of you I wish to express my gratitude for the time and effort you have spent on preparing for this meeting.

I need not stress the importance of acute diarrhoeal diseases as a cause of morbidity and mortality in this Region. You are all well aware that, by all counts, acute diarrhoeal diseases head the list of killers among infants and young children and are the biggest contributor to acute infections in children under five. From the available information there is reason to believe that, among the 50 million children under five in the Region, a minimum of 150 million episodes of diarrhoea occur every year and result in more than half a million deaths. This makes an average of one death every minute from acute diarrhoea.

In addition to the heavy toll of mortality and morbidity that diarrhoeal diseases exert, they are closely associated with malnutrition, which may be an important contributing factor in the retardation of physical and mental growth in the later years of life.

Diarrhoeal diseases control activities have always been an important field of collaboration between WHO and Member States of the Region. For the time being collaboration is mostly concerned with the development of national plans for diarrhoeal diseases control and of the national manpower needed to implement the plans and ensure the availability of the necessary supplies, particularly ORS. Another important field of collaboration is in stimulating and supporting applied research geared to the operation needs of the national programmes.

As far as applied research is concerned, I would like to say that, since the establishment of the RSWG on Diarrhoeal Diseases Research and the setting of research priorities, and availability of voluntary contributions to the Global CDD programme, we have observed a significant increase in diarrhoeal diseases research activities.

When you met last time the number of research projects supported by WHO amounted to seventeen. You recommended that five more should be financed; These were approved and their implementation has already started.

Since your last meeting, the Steering Committee of the Regional Scientific Working Group met in December 1983 and recommended financial support to three research proposals bringing the total of researches fully or partially supported by EMRO during 1983 to eight proposals from four countries. The total amount of funds committed in this respect is US\$ 152 000.

We have been in touch with the principal investigators on the proposals that needed amendments, and you will see the revised version of these proposals in addition to some new proposals, each of which was reviewed by two external reviewers. Some of the reviewers were from this Region.

For the second time, I must say however, that we are still finding difficulty in attracting research proposals that are closely linked with national CDD programmes. I sincerely hope that you would examine the possible reasons for this and give this matter due consideration during your deliberations.

You will have a chance during your meeting to be briefed about the most recent developments and results of the basic (biomedical) research supported by WHO in the field of development of simple technologies for diagnosis of E.coli, rota virus and campylobacter and on, on-going field trials of new vaccines against Typhoid, Cholera and Rota virus and on the results of the

clinical trials for improved oral rehydration solutions.

An important item on the Agenda of the present meeting is on potential control interventions in addition to Oral Rehydration Therapy which the programme might emphasize in future for the reduction of diarrhoea morbidity and mortality. The importance of morbidity reduction as the ultimate aim had been recognized not only by the Technical Advisory Group, but also by the Executive Board and the World Health Assembly.

Today and tomorrow you have the task of reviewing a number of research proposals submitted to the Regional Office and of making recommendations for their financial support based on their relevance and scientific quality, also taking into consideration the funds requested.

During your last meeting you have recommended that we have an in-depth review of one of the subjects, which is felt to be important for boosting Regional CDD activities. You have chosen the subject of "Self-Help in Diarrhoeal Diseases Control" as the subject of discussion in your present meeting. A background paper has been prepared for your consideration and I am looking forward to your recommendations in this respect.

I sincerely hope that you will maintain all the time our objective for research projects which is to prevent as far as possible the occurrence of diarrhoeal diseases and to reduce infant mortality from such diseases when they occur.

In conclusion I thank you again and wish you a successful meeting.