



DCD Bulletin

Division of Communicable Disease Control

DCD Bulletin

This quarterly bulletin presents important news, events and announcements from programmes of Division of Communicable Disease Control in the World Health Organization (WHO) Regional Office for the Eastern Mediterranean. For details, please contact dcd@emro.who.int inserting "DCD Bulletin" in the subject line.

Issue highlights

- Human African trypanosomiasis continues to pose a challenge in South Sudan
- Piloting of electronic assessment tools for infection prevention and control
- Consultation on evaluating policies and strategies of TB control in complex emergency



A child receives vaccine in *Haemophilus influenzae* type B and rotavirus vaccine campaign in Iraq

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Human African trypanosomiasis continues to be a challenge in South Sudan

Human African trypanosomiasis, also known as sleeping sickness, has been a major public health problem for the last century in South Sudan; the only endemic country in the Eastern Mediterranean Region. Nine countries in the Greater Equatoria Region are endemic for human African trypanosomiasis, with 1.8 million people at risk. Recurrent outbreaks with a repetitive pattern of responding and scaling down activities have been observed. Control measures for outbreak response have been reduced when the prevalence has decreased and/or sociopolitical crisis has erupted leading to a new increase in the number of cases.

By 2005, there were 12 health facilities in Equatoria carrying out human African trypanosomiasis control activities, 11 of them run by nongovernmental organizations and one in Juba run by the Ministry of Health.

Between 1998 and 2005, active and passive screening and treatment was implemented despite social and armed conflict, which resulted in more than 500 000 people being screened and more than 16 000 patients treated. This led to a significant decrease in the subsequent number of cases reported. This decrease in prevalence resulted in most nongovernmental organizations progressively stopping their activities after 2006, as it became difficult to advocate for internal and external resources for what no longer appeared to be a serious problem. By December 2010, only six health facilities were still carrying out

human African trypanosomiasis control activities and active screening had ceased completely.

Since 2006, control interventions and the number of treatment centres providing services for the disease have been dramatically reduced. Comparison of control activity statistics during the five years following the departure of most nongovernmental organizations (2006–2010), with the previous period with peak nongovernmental organizations' presence (2001–2005), shows a 47% decrease in the number of people screened (from 399 977 to 211 946) and a 71% reduction in the number of new cases that were reported (8664 to 2475). The percentage of screened people who underwent active screening was 70% in 2006 and fell to 8% in 2010. In 2006, 65% of new cases were in the second stage of the disease, while in 2010 that percentage increased to 76%. In 2011, only 0.4% of the population at risk was tested for the disease.

The current status of control activities for human African trypanosomiasis in South Sudan could lead to a new outbreak of the disease unless: 1) health personnel are trained to resume surveillance and treatment in the health centres where human African trypanosomiasis activities have stopped; and 2) control of human African trypanosomiasis is given the necessary attention even though the number of cases has been substantially reduced.

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Programme news

Control of tropical disease and zoonosis

11th meeting of the regional programme review group on lymphatic filariasis elimination

The control of tropical diseases and zoonosis organized the 11th meeting of the regional programme review group on lymphatic filariasis elimination in Cairo, Egypt, in March. The meeting aimed to review the progress of national lymphatic

filariasis elimination programmes in countries of the Region made during 2011; to discuss country plans of action for 2012; to approve drug requirements for mass drug administration in 2012, and to deliberate on opportunities to extend the operational capability of country-based programmes. Members of the Regional Programme Review Group from Egypt, Sudan, Saudi Arabia, South Sudan, Yemen and United States of America were invited to attend the meeting in addition to other participants.

Surveillance, Forecasting and Response

Piloting of electronic assessment tools for infection prevention and control in Sudan and South Sudan

In January, the surveillance, forecasting and response programme pilot-tested the electronic Infection Prevention and Control Assessment Tool (e-IPCAT) in Sudan and South Sudan. The tool has been developed to assist countries in assessing their infection prevention and control programme at national and health facility level. The aim is to provide technical support to countries to assess, implement and monitor their national infection control policies and programmes within a systematic approach in light of global evidence and best practices. After pilot-testing in Sudan and South Sudan, the e-IPCAT will be rolled out in other countries of the Region.

Development of integrated disease surveillance and response system in Afghanistan

Integrated disease surveillance and response is a strategy developed by WHO. The strategy aims to develop sufficient surveillance and response capacities at each level of national health systems so a flexible national disease surveillance system can be created. In January, the surveillance, forecasting and response programme extended technical support to the Ministry of Public Health in Afghanistan for an assessment of its existing diseases surveillance system for implementing the IDSRs. In spite of the challenges of conducting such an assessment in the security-compromised environment of Afghanistan, the team was successful in developing a concrete road map for implementation of the system in a phased manner.

International conference on dengue control in Pakistan

In 2011, Pakistan faced one of the worst outbreaks of dengue fever in its history. To document the experience and lessons learned during this outbreak, the Government of Punjab, the largest province of the country, in close collaboration with WHO, convened an international conference on control of dengue in Lahore, Pakistan, in February 2012. The conference was technically supported by WHO through its participation and technical support provided to the Government to come up with concrete recommendations for control of dengue in the country.

Use of oral cholera vaccine in Somalia

In 2011, cholera claimed more than 1000 lives in Somalia, the majority of whom were children under 5 years of age. Given this serious situation, considerations for the use of oral cholera vaccines through a mass immunization campaign were discussed in a meeting held in March in Nairobi with participation from the surveillance, forecasting and response programme, WHO headquarters and partner organizations. In the past, the use of oral cholera vaccines in a humanitarian context has provided mixed reactions on the efficacy and feasibility of its use. The experience in these situations is limited to small outbreaks in relatively stable populations. The meeting discussed the operational feasibility, acceptability and impact of cholera vaccination in the current situation in Somalia. The meeting recommended the launch of a comprehensive and integrated cholera control programme in the country and limits to the use of oral cholera vaccines in small-scale interventions to assess its operational feasibility and efficacy.

Vaccine Preventable Diseases and Immunization

Survey on seasonal influenza vaccine

A regional survey on the policy and use of seasonal influenza vaccine is currently being conducted in all countries of the Region. The survey aims at collecting data to help estimate the uptake and demand for seasonal influenza vaccine in countries; and to provide advice to national authorities on expanding the use of influenza vaccine. The activity is being carried out in line with the Global Action Plan that has been developed to reduce the global shortage of influenza vaccines for seasonal epidemics and pandemic influenza through three main objectives. These include an increase in the use of seasonal influenza vaccine; an increase in the production capacity for pandemic influenza vaccines; and enhanced research to develop potent and effective vaccines.

Public health research agenda for influenza

A review on influenza research and mapping out existing and potential centres of excellence for influenza research in the Region is being carried



Participants of the international conference on control of dengue in Pakistan

Vaccine Preventable Diseases and Immunization (cont.)

out. The outcome of this exercise will be used to identify priority areas for research on influenza necessitating better response to epidemic and pandemics of influenza.

2012 Vaccination Week in the Eastern Mediterranean

The Third Vaccination Week in the Eastern Mediterranean will be celebrated during the week of 24–30 April. The event will coincide with the first World Immunization Week. The regional event will be celebrated under the theme of “reaching every community”, reflecting the Region’s vision and strategy in addressing immunization priorities. All countries in the Region are participating in the week’s activities. Heads of state, presidents and prime ministers, first ladies, health ministers and ambassadors are lending their support to events in countries. The variety of activities include outreach immunization services, vaccination campaigns, workshops, training sessions, social mobilization, round tables, exhibitions and media events addressing a wide range of vaccine-related issues.

Measles in Yemen

Yemen has been facing a major measles outbreak since October 2011. During the last quarter of 2011, about 1745 cases were registered, compared with 280 cases in the last quarter of 2010. To address this outbreak, the Ministry of Public Health and Population, in collaboration with partners, including WHO, UNICEF, United States Agency for International Development and the International Crescent of the Red Cross, is implementing a national campaign in which more than 7.9 million children will be targeted. Measles was the fourth leading cause of death among children in Yemen before 2006. In 2006, a national follow-up campaign was implemented and the cases dramatically decreased in the following three years. Another national follow-up campaign was implemented in December 2009 for children 9 months to 5 years old, but unfortunately the campaign was not implemented in the north because of conflict. The cases started to increase in this area and spread to displaced people in neighboring districts and governorates.

Introduction of *Haemophilus influenzae* type B and rotavirus vaccines in the Expanded Programme on Immunization in Iraq

The Ministry of Health of Iraq has introduced *Haemophilus influenzae* type B and rotavirus vaccine in the national immunization schedule from January 2011. These vaccines along with others are now available

free of charge at all health care centres, basic health units and state-run hospitals. The availability and provision of such vaccines aims at protecting thousands of infants in Iraq against the most dangerous childhood infections.

Malaria Control and Elimination

Sudan malaria programme visited

A mission to observe Sudan’s malaria activities planned for 2012 from the Global Fund round 7 and 10 grants was undertaken by the malaria control and elimination programme in January. In light of review findings, several recommendations were made to the Government and WHO country office, which included expediting the process of recruiting required human resources; provision of WHO technical support to the Government in a full programme review in 2012; and the conducting of a malaria indicator survey and human resource capacity-building among national authorities. The mission also recommended to national authorities to strengthen the monitoring and evaluation strategy for home-based malaria management and to conduct operational research.



Participants of the consultation on evaluating policies and strategies on TB control in complex emergency

The malaria control and elimination programme participates in, and facilitates, an international malaria training course in Ghana

As part of a capacity-building project for malaria control in Africa; a training course was organized in February in Accra, Ghana. The course aimed to create a pool of quality facilitators and tutors for future regional and national training courses in four areas of malaria control including: planning and management, malaria epidemiology and surveillance, malaria case management and entomology and vector control. There were six participants from countries of the Region. The malaria control and elimination programme facilitated the group on planning and management.

Stop Tuberculosis

Consultation on evaluating policies and strategies of tuberculosis (TB) control in complex emergency

The Stop TB programme organized a consultation on evaluating policies and strategies of TB control in complex emergency in Sharm El Sheikh in March. The meeting aimed to review and discuss the most relevant experiences of TB control in complex emergency and humanitarian crisis events.

The meeting also focused on identifying key action measures for TB control in complex emergencies and to define key indicators to monitor and evaluate TB care and control in such circumstances. National TB programme managers from Afghanistan, Egypt, Iraq, Pakistan, Somalia and Sudan, WHO staff from Sri Lanka, Myanmar and representatives of the United Nations Office of the High Commissioner for Refugees, International Federation of Red Cross and Red Crescent Societies and the International Organization for Migration, attended this meeting.

World Tuberculosis (TB) Day commemorated on 24 March across the Region

World TB Day was commemorated on 24 March 2012 across the Eastern Mediterranean Region. Elaborate activities were planned by ministries of health, civil society, TB patients, celebrities and the media across 23 countries of the Region, from Afghanistan to Morocco. In his message, Dr Ala Alwan, WHO Regional Director for the Eastern Mediterranean, expressed his appreciation of the hard work in the fight against the disease and urged further commitment and accelerating efforts. In his statement on the occasion of World TB Day, Ban Ki-moon, UN Secretary General, highlighted TB as a neglected disease. The Secretary General also wrote, on this occasion, letters to all Heads of State of the 22 high-burden countries in the world, including Afghanistan and Pakistan calling for renewed attention to TB control.

Minister of Sudan reiterates his commitment to Eastern Mediterranean constituency representation in the Global Fund Board

The Federal Minister of Health of Sudan visited the WHO Regional Office to hold discussions and briefings on his new role as the representative of the Region in the Board of the Global Fund to Fight AIDS, Tuberculosis and Malaria. During his visit the Minister also led a conference call along with the WHO Regional Director with 15 eligible countries to receive Global Fund financing for HIV/AIDS, TB and malaria care in the Region. On this occasion, he reiterated his commitment to effectively represent the Region in the Board of this critical financing institution, which has invested more than US\$ 2.1 billion in the Region. The Minister also collected inputs from representatives of countries on their experiences with the Global Fund and will present them in the Global Fund Board retreat held at the end of March in Geneva.

Applications under the bridge funding mechanism being processed by the Global Fund for HIV, Tuberculosis and Malaria

The Global Fund Secretariat is currently processing applications for funding under the bridge funding mechanism. The bridge funding mechanism is intended to fill any gaps in funding created by the fact that disbursements for proposals approved under the transitional funding mechanism will not be released until early 2013. For details please see the Operational Policy Note contained in the Global Fund's Operations Policy Manual dated 22 December 2011. The manual is available at: <http://www.theglobalfund.org/en/library/guidelinestools>

Operation research in tropical and other diseases

Systematic reviews for communicable disease control

In the first quarter of 2012, three systematic reviews were either conducted or initiated. The first was a systematic review and meta-analysis of the treatment outcome of ambulatory versus hospital-based management of multidrug resistant TB (MDR-TB). Five hundred and forty studies were reviewed in this exercise. The second review was a narrative review of TB control in complex emergencies. Nine hundred and ninety journal articles, abstracts, national TB programme reports and guidelines were found, of which 45 met selection criteria and were accessible for review. The outcome paper, as a result of this exercise, has brought together different experiences of TB programmes in emergency settings. The findings of the exercise were presented and used as resource material in a WHO meeting on TB in complex emergencies and will assist in policy updates in this area in the future.

The third narrative review was initiated with the objective of conducting a review of influenza research in the Region. This review will provide resource material to develop a public health research agenda for influenza in the Region. This agenda will be coordinated by the task force on influenza research in the Region.



2012 World TB Day was commemorated with the theme of "Stop TB in my lifetime"