On 05 May 2014, the Director-General of World Health Organization, upon accepting the assessment of International Health Regulations Emergency Committee concerning Polio, decreed that the international spread of wild poliovirus in 2014 constitutes a Public Health Emergency of International Concern (PHEIC).

**Editorial note**

In view of the rapid international spread of polio to date, the Director General of WHO convened a meeting of the emergency committee concerning the international spread of wild poliovirus on 05 and 06 May, 2014 under the International Health Regulations (2005). The committee advised that the international spread of polio, to date, constitutes an international public health risk to other States for which a coordinated international response is essential. The committee noted that two years ago, the international spread of polio virus had nearly ceased. At end-2013, 60% of polio cases resulted from international spread, with strong evidence that adult travellers were playing a role. The trend has continued this year, during the low-transmission season for polio, a situation described by the emergency committee as “extraordinary”. Accordingly, it was the unanimous view of the committee that the condition for a PHEIC under the IHR (2005) have been met.

Beginning last year till date in the Eastern Mediterranean Region (EMR) of WHO, 5 countries (please see the table) have now reported wild polio virus. During the current year, there has been international spread of wild poliovirus from 2 of these 5 states which are currently infected (From Pakistan to Afghanistan and from Syrian Arab Republic to Iraq). The consequences of further international spread remain particularly acute as large number of countries in the EMR which are polio free are currently in conflict and complex emergency situations which have severely compromised the routine immunization services in these countries and are therefore high risk of re-infection. These countries may experience extreme difficulties in mounting an effective response should the wild polio-virus be re-introduced.

The over-riding priority for all polio-infected States is to interrupt wild poliovirus transmission within their borders as rapidly as possible through the immediate and full application in all geographic areas of the polio eradication strategies. In order to reduce the international spread of wild poliovirus, based on a risk stratification of countries with active transmission, the Emergency Committee advised the WHO Director-General a number of temporary recommendations on mandatory vaccination for travellers from the countries “currently exporting wild poliovirus (Pakistan and Syrian Arab Republic from the EMR fall in this group) and countries infected with wild poliovirus. (Afghanistan, Iraq, and Somalia of EMR fall in this group). These recommendations are temporary and will be assessed after three months. Within this period, it is hoped that global public health will be protected following implementation of these public health measures as recommended by WHO.