WHO News

WHO launches global patient safety campaign

In a major global drive to improve the safety of millions of patients who become ill, disabled or die due to the unintended adverse effects of health care such as medical errors, WHO has launched a high-profile campaign called the World Alliance for Patient Safety.

Director-General LEE Jong-wook and other senior WHO officials joined US Health Secretary Tommy Thompson and Sir Liam Donaldson, Chief Medical Officer of the United Kingdom of Great Britain and Northern Ireland, for the campaign's launch in Washington on 27 October.

Adverse effects of treatment due to factors like unsafe injections, blood transfusions or surgery, as well as inappropriate medication and medical error exact a high toll in human life in many countries and occur in spite of high quality health care.

WHO said a team of government representatives, patient safety activists and top scientists will help develop policy and practice solutions to help governments to improve patient safety. Donaldson told the *Bulletin* the core idea was for countries to share experience and learn from each others' mistakes.

"Health care has been much slower than other industries to understand that the cause of error lies in weak systems and that it is by learning from things that go wrong that health care can be made safer," Donaldson said: "Over the years throughout the world lives will be saved, risks to patients will be reduced and many lessons will be learned".

Some countries have already initiated patient safety plans. Details of their experiences and the solutions they have developed in the field will be published on the WHO patient safety website so that other governments can draw on and apply them.

WHO said studies in a number of countries show that 3.5–16.6% of hospital patients are affected: this means that as many as one in every 10 hospital patients suffer some form of preventable harm resulting in ill-health, disability or death around the world.

Some studies put the cost of the adverse effects of health care in the United States to be as much as US$ 29 billion a year, while in the United Kingdom these may be as much as US$ 6 billion a year. The situation in developing countries is even worse although there is less data, WHO said. http://www.who.int/patientsafety/en/ ■

WHO's where in October

- WHO and its partners launched the largest ever global polio immunization campaign in October to reach more than 300 million children in Asia and Africa and to quell an epidemic in Africa that threatens to paralyse millions of children. The campaign kicked off on **8 October** in Africa, where health workers aimed to vaccinate 80 million children in 25 countries in four days (see story).
- WHO linked up with the International Association on the Study of Pain (IASP) and the European Federation of IASP Chapters in a new campaign on **11 October** to draw global attention to the need for better pain relief for people with diseases like cancer and AIDS.
- WHO launched its new "five keys" strategy on **13 October**, which promotes five simple ways to reduce disease caused by unsafe food.
- With the release of a new study on **21 October** in the Western Pacific Region, WHO called on governments in developing countries to do more to improve prevention and treatment of epilepsy. WHO said 70–90% of people with epilepsy in developing countries do not receive appropriate treatment.
- Health experts from WHO, governments and civil society gathered on **21 and 22 October** to find ways to improve immunization coverage in the European Region, following a recent spate of measles outbreaks that prompted concern over whether enough is being done to get children vaccinated (see story).
- Following a resolution passed by the World Health Assembly in 2002, WHO Director-General LEE Jong-wook launched a campaign on **27 October** to improve the safety of millions of patients who become ill, disabled or die from adverse effects of health care such as errors or drug side-effects (see story).
- David Byrne, the outgoing European Commissioner for Health and Consumer Protection (see picture) took up his newly-created post as WHO Special Envoy on the revision of the International Health Regulations on **31 October**. Byrne, an Irish national, will be responsible for steering the revision of the 1969 Regulations, the main piece of international legislation governing the control of infectious diseases, when officials from WHO's 192 Member States meet from **1 November to 12 November**. The final draft will be presented to the World Health Assembly in May 2005.
- WHO's Stop TB and HIV/AIDS departments are setting up a new joint task force to streamline efforts to get treatment to patients who are co-infected with the two diseases, a double scourge that has a devastating effect particularly in Africa (see story).
- The MDG goals table published in the *Bulletin* (2004;82:806) have been updated with progress on tuberculosis control. This table is available from: http://www.who.int/bulletin/volumes/82/10/en/mdg_table.pdf

European Commission (2001)

David Byrne, outgoing European Commissioner for Health.

For more on these and other WHO news:
http://www.who.int/mediacentre/news/releases/2004/en/

Experts raise alarm over measles in Europe

Experts from WHO and its partner agencies met to find ways to improve immunization coverage in the European Region, following a recent spate of measles outbreaks that prompted concern over whether enough is being done to get children vaccinated.

At the meeting in Rogaska Slatina, Slovenia, on 21 and 22 October WHO Regional Director for Europe Marc Danzon called on international agencies, governments and nongovernmental groups to raise public awareness about the need for immunization to fight measles and other vaccine-preventable diseases like diphtheria, rubella and pertussis.

"Each year tens of thousands of people in the countries of the region still suffer from vaccine-preventable, life-threatening and debilitating illnesses," Danzon said, adding: "We can save lives by scaling up immunization".

After intensive immunization campaigns over the last few decades, the region was declared polio free in 2002.

WHO's European office said in a statement that due to such campaigns the occurrence of vaccine-preventable disease is comparatively low in the region but that, ironically, the public has become less aware of the risks of non-vaccination.

Although measles cases fell sharply between 1990 and 2002 in the 52 countries comprising WHO's European Region with 27 158 cases in 2002 compared with more than 300 000 cases from 1990 to 1993, measles is still a cause for concern.

Five major measles outbreaks in the last three years and recent scares over the safety of the combined measles, mumps and rubella vaccine in the United Kingdom and Ireland have raised questions about whether coverage is adequate in some countries and whether more needs to be done in other countries to educate the public.

Turkey had the largest recent measles outbreak with 44 000 cases. Measles outbreaks have also occurred in Italy, Ukraine, France and Germany. ■

WHO steps up TB–AIDS collaboration

WHO's Stop TB and HIV/AIDS departments are setting up a new joint task force to streamline efforts to get treatment to patients who are co-infected with the two diseases, a double scourge that has devastating consequences particularly in Africa.

The task force will include six officers from the Stop TB department and three from the HIV/AIDS department and will be charged with finding ways to improve coordination of tuberculosis and AIDS control and treatment at country level.

Of an estimated 25 million Africans currently infected with HIV, about eight million also harbour the bacillus that causes tuberculosis. About 37% of deaths, caused by tuberculosis in people of all ages in Africa, are related to HIV infection.

WHO sees tackling tuberculosis as one of the most effective ways of ensuring the survival of people infected with HIV. At the same time improved strategies to control HIV will play a major part in controlling tuberculosis.

Dr Mario Raviglione, Director of Stop TB at WHO in Geneva said the new approach is based on the premise that merely treating one disease and not the other, if both are present in a patient, cannot be effective.

"Particularly in Africa, but also in other regions, the TB epidemic is driven by the HIV epidemic. By strengthening cooperation we will be able to respond and save more lives," Raviglione told the *Bulletin*.

Raviglione said he hoped the task force could serve as a model for similar collaboration for public health experts and others working in regions and countries to reduce the toll of tuberculosis and HIV.

Dr Jim Kim of WHO's HIV/AIDS department said: "We must never forget that although we are dealing with two diseases we are very often treating one individual person." ■

Largest ever polio vaccination campaign

WHO and its partners launched the largest ever global polio immunization campaign in October to reach more than 300 million children to quell an epidemic in Africa that threatens to paralyse millions of children.

The ultimate goal is to stamp out the last traces of the disease worldwide. The immunization campaign kicked off on 8 October in West and central Africa, where health workers aimed to vaccinate 80 million children in 25 countries in four days.

If successful, it will be a major boost to the 16-year global polio eradication campaign led by WHO, the United Nations Children's Fund (UNICEF), Rotary International and the United States Centers for Disease Control and Prevention (CDC).

Dr David Heymann, WHO Representative for Polio Eradication, said it may finally be possible to halt transmission of the virus in Asia by the end of this year, while halting transmission of the polio virus in Africa could take until the end of 2005.

Four million health workers and volunteers went from house to house to administer the oral polio vaccine to children less than five years old across Africa and Asia.

By the end of October, WHO said several West African countries, including Benin, Burkina Faso, the Gambia, Mali, Senegal and Togo, had already reported that 90% of the target population had been vaccinated.

In Asia it was too early to say how much of the target population had been reached.

"Strong progress has been achieved in India, Pakistan and Afghanistan where only 102 polio cases have been reported this year compared to 223 for the same period last year. By continuing to improve on immunization activities, Asia could interrupt polio transmission by the end of 2004," Heymann said.

"Sub-Saharan Africa, however, continues to be affected by an ongoing epidemic," Heymann said, adding that west and central Africa account for nearly 90% of all new polio cases worldwide.

Heymann said that further polio campaigns will need to be conducted in November and throughout 2005, if a polio-free Africa is to be achieved by the end of 2005.

The only disease to have been eradicated globally to date is smallpox in the 1970s. ■

Contributions are welcome for the Letters section, in response to articles that have appeared in the *Bulletin* or on matters of major public health importance. Letters are usually between 400 and 850 words, with a maximum of six references; they will be edited and may be shortened.

Manuscripts should be submitted to the *Bulletin* via our submissions web site accessed at http://submit.bwho.org or via a link from www.who.int/bulletin where there are "Help" and "FAQ" (frequently asked questions) buttons to assist authors.