Zika remains “significant public health challenge”

These women are raising awareness about how to prevent the spread of Zika virus in Barranquilla, Colombia. The World Health Organization (WHO) announced on 18 November 2016 that the recent global spread of Zika virus was no longer a public health emergency of international concern. The Emergency Committee under the International Health Regulations (2005) however advised that Zika virus and its associated consequences still remain a significant public health challenge.

Tobacco control boosts economies

Tobacco control policies are not harmful to the economy and have untapped potential for protecting and promoting growth and development, according to a report jointly released last month by the National Cancer Institute of the United States of America and WHO.

The report entitled The economics of tobacco and tobacco control was compiled in collaboration with hundreds of scientists across the world.

Since the WHO Framework Convention on Tobacco Control came into force in 2005, many countries have taken tobacco control measures and there is now a vast body of evidence, increasingly from low- and middle-income countries, on the economic effects of these measures.

Drawing on this evidence, the report found that key tobacco control measures, including tobacco tax increases, indoor smoking bans, tobacco advertising bans, health warnings and media campaigns are cost effective and present win–win policy options for governments because they achieve both strong health and strong economic gains.

For example, indoor smoking bans do not have negative economic consequences for restaurants and bars and, in some cases, may give business a boost. Other economic benefits of smoke-free policies for businesses include increased worker productivity, health-care savings and reduced insurance costs.

The report found that the net health and economic benefits outweighed the economic gains of the tobacco industry including tax revenues and jobs. Many governments could achieve the full potential of these economic and health gains, for example, by increasing tobacco taxes to levels at which people either do not start tobacco use in the first place or at which tobacco users quit.

Tobacco tax increases are the most cost-effective policy in reducing tobacco consumption and play a necessary role in comprehensive tobacco control strategy. They not only discourage tobacco use particularly among the young and the poor, but also generate much needed additional revenues which could be used to finance development and health.

“For years the tobacco industry has propagated the myth that tobacco-free policies are harmful to the economy, to business and to livelihoods,” said Dr Douglas Bettcher, Director of the Department of Prevention of Noncommunicable Diseases at WHO.

“This report shows beyond all reasonable doubt that these claims are not true. On the contrary, tobacco-free policies have the potential to protect and promote economic growth,” he said. http://www.who.int/tobacco

Renewed commitment to health promotion

Leaders from governments and United Nations and civil society organizations, city mayors and health experts from across the world have issued two landmark commitments to guide actions to achieve the United Nations 2030 Agenda for Sustainable Development.

The commitments were launched on 21 November during the 9th Global Conference on Health Promotion in Shanghai, co-organized by the World Health Organization and the National Health and Family Planning Commission of the People’s Republic of China. The conference was held under the slogan of “Health for all and all for health”.

The Shanghai Declaration on Health Promotion stresses the importance of using the key pillars of health promotion, namely good governance for health, healthy cities, social mobilization and health literacy, to take action on the 17 sustainable development goals.

In recognition of the fact that more than half of the world’s population lives in urban areas, another commitment, the Shanghai Healthy Cities Consensus, was released in the presence of more than 100 mayors from China and around the world. The Consensus commits to making cities more equitable and to establishing healthier environments in which healthy choices are accessible to everyone.

The Shanghai conference highlighted new technologies as important means to promote health in the era of the sustainable development goals.

“We are entering a new phase of health promotion,” Ilona Kickbusch, adjunct professor at the Graduate Institute of International and Development Studies in Geneva, told participants in the closing report to the conference.
“The message from this conference is clear: health is a political issue and therefore political choices and commitment are crucial,” she said.

The Shanghai event marked the 30th anniversary of the first global conference in Canada in 1986, which issued the Ottawa Charter for Health Promotion.

More than 1000 people attended the Shanghai event, including Li Keqiang, the Prime Minister of China, and more than 40 health ministers, the heads of five United Nations agencies and more than 100 city mayors as well as hundreds of international health experts.

http://www.who.int/healthpromotion/conferences/9gchp/shanghai-declaration/

Malaria vaccine pilot

Children in three sub-Saharan African countries will receive the world’s first malaria vaccine next year as part of a pilot programme, for which WHO recently secured funding.

Three global health funding agencies committed resources to cover the costs of the first phase of the pilot. Last year Gavi, the Global Fund to Fight AIDS, Tuberculosis and Malaria, and UNITAID approved up to US$ 27.5 million, US$ 15 million, and US$ 9.6 million, respectively, for the first four years of the six-year programme.

The pilot programme will be a collaborative effort between WHO, health ministries in the participating countries, the Programme for Appropriate Technologies in Health, (PATH), and other partners. The countries where the pilot will take place will be announced in early 2017.

The vaccine, known as RTS,S, acts against Plasmodium falciparum, the most prevalent malaria parasite in Africa and the most lethal malaria parasite worldwide, responsible for an estimated 426 000 malaria deaths every year.

The vaccine will be assessed as a complement to the existing package of WHO-recommended malaria preventive, diagnostic and treatment measures.

The pilot programme will evaluate three things: the feasibility of delivering the required four doses of RTS,S through the routine immunization programme; the impact of RTS,S on the number of lives saved; and the safety of the vaccine when it is used routinely.

The resulting evidence will provide the basis for a possible WHO recommendation on wider-scale use for children in sub-Saharan Africa.

RTS,S is the first malaria vaccine to complete phase III clinical testing successfully. The phase III trial, which enrolled more than 15 000 infants and young children in seven countries in sub-Saharan Africa, showed that RTS,S provides partial protection against malaria in young children.

“Making sure that children receive all four RTS,S vaccine doses, some of which will need new visits to health facilities, will require careful planning and good communication at all levels,” said Dr Jean-Marie Okwo-Bele, Director of the WHO Department of Immunization, Vaccines and Biologicals.

“The pilot will provide key insights as to the challenges and opportunities of such an expanded vaccination schedule.”


Tracking blood pressure

The number of people with high blood pressure (hypertension) nearly doubled to an estimated 1.13 billion in 2015 from 594 million in 1975, according to a report by the Noncommunicable Disease Risk Factor Collaboration (NCD-RisC).

The collaboration of hundreds of scientists across the world, including WHO experts, pooled a total of 1479 studies involving 19.1 million adults living in 200 countries and their blood pressure measurements.

The findings of this vast study were released in a report that was published in the Lancet in November.

The authors found that high blood pressure in affluent countries was no longer as prevalent as it was 30 years ago, but that the countries where high blood pressure was most prevalent were now in central and eastern Europe, sub-Saharan Africa and south Asia.

The study highlights the increasing global burden of noncommunicable diseases and their risk factors.

Raised blood pressure is a leading risk factor for cardiovascular diseases such as heart attacks and stroke, and it is treatable. A 25% reduction in the prevalence of raised blood pressure by 2025 is one of nine global noncommunicable disease targets and the Lancet paper shows that this reduction is achievable if measures to treat hypertension are scaled up.

http://who.int/cardiovascular_diseases/publications/high-blood-pressure

Participatory leadership

A more participatory style of leadership in health is needed in countries if they are to make progress in achieving the sustainable development goals in 2030, according to a new report.

The report, Open mindsets: participatory leadership for health, was launched at the Fourth Global Symposium on Health Systems Research last November in Vancouver, Canada.

According to the report, participatory leadership includes and empowers diverse groups, allowing them to contribute freely to the effective functioning of a system.

Executive Director for the Alliance for Health Policy and Systems Research, Dr Abdul Ghaffar said, “As we advance into the sustainable development goals era, it becomes increasingly clear that traditional individualistic and hierarchical leadership approaches are out of date and ineffectual.”

http://www.who.int/alliance-hpsr

Looking ahead

23 January–1 February – 140th WHO Executive Board meeting
4 February 2017 – World Cancer Day
7 April – World Health Day: this year’s theme is “depression: let’s talk”