GIVS 2010
Measles Mortality Reduction Goal in Jeopardy

Global Immunization Meeting
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Overview

- Progress
  - Measles Mortality Reduction
  - Policy Developments

- Challenges

- Conclusions
Progress
Measles Mortality Reduction
47 UNICEF / WHO Priority Countries
1999

94 % of all measles deaths

No second opportunity for measles immunization (47)
Measles Mortality Reduction
47 UNICEF / WHO Priority Countries
December, 2008

Nationwide second measles opportunity introduced (46)
No second opportunity introduced (1)
1st Dose Measles Coverage in 47 Measles Priority Countries, 2000 - 2007

Countries Implementing Case-based Measles Surveillance, 2005 vs 2008

January 2005
- Yes (120 countries or 63%)
- No (72 countries or 37%)

December 2008
- Yes (173 countries or 90%)
- No (20 countries or 10%)

Source: WHO/IVB database, February 2009
Estimated Measles Deaths, 2000-2007

Deaths prevented: 3.6m
Cost per death averted: $184

High-low lines indicate uncertainty bounds
Source: WHO/IVB, November 2008
Reduction in Estimated Measles Deaths by WHO Region 2000 to 2007

- AMR: 100%
- EUR: 100%
- EMR: 90%
- AFR: 89%
- SEAR: 42%
- WPR: 73%
- GLOBAL: 74%

90% 2010 reduction goal

Source: WHO/IVB, November 2008
Children Reached in Integrated Campaigns, Africa

- Measles
- Vit A
- OPV
- Deworming
- ITNs

2008 data is provisional
Policy Updates

- Two doses of measles vaccine should be standard
  - SAGE recommendation
  - Deliver 2nd dose through routine and/or campaigns
  - Invest in systems to record and monitor each dose

- Expand use of measles vaccine in outbreak response
  - Updated Outbreak Response Guidelines (in clearance)
  - Vaccinate all children (6-59m) without a history of measles vaccination
  - Conduct campaign if local outbreak management team assesses risk of spread or mortality to be high
Policy Updates (2)

- Study the feasibility of global measles elimination
  - WHA request
  - Final report 2011
Challenges
2/3 of Unvaccinated Infants in 8 countries:

- India: 8.5 m
- Nigeria: 2.0 m
- China: 1.0 m
- Ethiopia: 1.0 m
- Indonesia: 0.9 m
- Pakistan: 0.8 m
- DRC: 0.6 m
- Bangladesh: 0.5 m

80-89% MCV1 Coverage Under 90% in 41 (84%) of 47 Priority Countries

204 Million Children Need Catch-up Vaccination in India

Estimated Measles Deaths, 2007

● = 1000 death (dots are randomly distributed in countries)

67%

Data source: WHO/IVB, November 2008
Gaps in Campaign Coverage and Weak Routine in Africa

Estimated Measles Deaths, African Region

Outbreaks in DRC, Nigeria, Uganda, and Tanzania

Data source: WHO/IVB, November 2008
Donor Funds are Decreasing

“Funding to sustain the gains is urgently needed in order to fill the funding gap reported by the MI. Should follow-up campaigns not be conducted as planned, large outbreaks would be likely within one to two years in many countries, especially large countries in Africa, with high case-fatality ratios. This would be unacceptable.”

-Measles Landscape Analysis Final Report
Conclusions
What Will it Take to Achieve the Goal?

*2008 – 2010 projections based on data reported to WHO by January 2009
Conclusions

- **Strategy works**
  - 74% reduction in global deaths

- **2010 goal in jeopardy**
  - Strengthen routine immunization in 47 priority countries
  - Implement comprehensive strategy in India
  - Monitor the accumulation of susceptibles in Africa to conduct timely follow-up campaigns
  - Find new partners and increase country ownership
Measles Initiative
Working Together to Save Lives

Japanese Government

Thank You

Protect us against MEASLES
Gates Foundation Landscape Analysis

- Convened a team to review progress and challenges to achieving regional measles control/elimination goals

- Recommendations
  - WHO-UNICEF measles strategy is appropriate and must have sustained support to achieve and sustain the goals
  - Routine vaccination needs to be revitalized
  - Monitoring of both routine and campaign activities needs urgent strengthening
  - Surveillance and outbreak investigation needs strengthening, going beyond support for laboratories to support for field epidemiological investigations
  - Mathematical modelling should be used more extensively to optimize strategies
Estimated Measles Deaths by Region, 2007

N = 197,000

Source: WHO/IVB, November 2008
Integrated Campaigns

Vitamin A  >186 million
Polio Vaccination  >95 million
Deworming Tablets  >81 million
Bednets  >37 million

In 2008, 88% of 33 campaigns were integrated with at least one other intervention
Integrated ITN Campaigns, 2002-2008

Note: Nigeria, Mozambique and CAR 2008 results are preliminary
Measles Campaigns Integrated with at Least One Other Intervention, Africa

![Bar chart showing the percentage of measles campaigns integrated with at least one other intervention from 2002 to 2008.](chart.png)

- 2002: N=6, Percent: 45%
- 2003: N=12, Percent: 100%
- 2004: N=9, Percent: 95%
- 2005: N=14, Percent: 50%
- 2006: N=20, Percent: 80%
- 2007: N=16, Percent: 90%
- 2008: N=12, Percent: 80%
Children Reached in Measles SIAs, AFRO 2001-2007

The bar chart shows the number of children reached in millions for measles SIAs in Africa from 2001 to 2007. The highest number of children reached was in 2006, while the lowest was in 2001.
Measles Trends, 2005-2008, Nigeria

- Measles catch up campaign in Northern states Dec 05
- Measles catch up campaign in Southern states Oct 06
- Measles follow up campaign in Northern and Southern states Nov and Dec 08
Global VPD Laboratory Network  N > 700 Labs

Data as of June 2006

WHO Labs/Institutes testing for:
- Polio only (23)
- Measles/rubella only (531)
- Polio and measles/rubella (109)
- Measles/rubella and yellow fever (14)
- Polio, Measles/rubella and yellow fever (13)

+ 134 Sub-National Labs

+ 331 (Prefecture Labs not shown)