

c Polio

On 05 May 2014, the World Health Organization (WHO) issued a statement regarding the threat of international spread of wild polio virus. The International Health Regulations Emergency Committee advised that this threat constitutes an 'extraordinary event' and a public health risk for which a coordinated international response is essential. During 2014 there has been international spread of wild poliovirus from three regions: central Asia (from Pakistan to Afghanistan), the Middle East (Syrian Arab Republic to Iraq), and Central Africa (Cameroon to Equatorial Guinea).

The Committee provided advice for polio-infected countries with active transmission, which includes recommendations for vaccination of travellers to avoid exportation of wild polio virus to other countries. Residents of polio-infected countries should receive a dose of oral (OPV) or inactivated (IPV) polio vaccine prior to international travel. Long-term visitors or travellers who spend ≥ 4 weeks in these countries should also receive a dose of OPV or IPV prior to departure from that country. These countries include Pakistan, Cameroon, the Syrian Arab Republic, Afghanistan, Equatorial Guinea, Ethiopia, Iraq, Israel, Somalia and Nigeria. The Committee recommended that travellers from countries that have previously exported polio (Cameroon, Pakistan, Syrian Arab Republic) should further have an International Certificate of Vaccination or Prophylaxis as specified in Annex 6 of the International Health Regulations (2005).

The NICD recommends that South African travellers should have a booster polio vaccination prior to visiting these countries, and should document such vaccination. Vaccination should ideally be

performed between 4 weeks and 12 months prior to travel, but can be performed even up until the day of departure. For children this can take the form of OPV or DTaP-IPV-Hib. For adults the available options are OPV or Tdap-IPV.

Polio is targeted for global eradication. In early 2013 there remained only three countries with endemic wild-type polio transmission – Nigeria, Pakistan, Afghanistan. Polio would be the second human disease, after smallpox, to be eradicated. Recent global successes, including certification of India as polio-free in January 2014, have shown that global polio eradication is within reach. Since late 2013 there have been wild-type polio cases reported from previously polio-free areas in the horn of Africa, the Middle East and Central Africa.

Update on the spread of poliovirus infections

As of 07 May 2014 the number of polio cases reported from January to April 2014 as compared to the year 2013 is shown in Table 2.

Table 2: Wild type poliovirus cases worldwide, January–April 2013 and 2014

Countries	Year-to-date 2014				Year-to-date 2013				Total in 2013	Date of most recent case
	WPV1	WPV3	W1W3	Total	WPV1	WPV3	W1W3	Total		
Pakistan	59			59	6			6	93	20-Apr-14
Nigeria	2			2	18			18	53	24-Mar-14
Afghanistan	4			4	2			2	14	06-Feb-14
Equatorial Guinea	3			3				0	0	19-Mar-14
Iraq	1			1				0	0	10-Feb-14
Cameroon	3			3				0	4	31-Jan-14
Syria	1			1				0	35	21-Jan-14
Ethiopia	1			1				0	9	05-Jan-14
Somalia				0				0	194	20-Dec-13
Kenya				0				0	14	14-Jul-13
Total	74	0	0	74	26	0	0	26	416	
Total in endemic countries	65	0	0	65	26	0	0	26	160	
Total outbreak	9	0	0	9	0	0	0	0	256	

At end-2013, 60% of polio cases were the result of international spread of wild poliovirus, and there was increasing evidence that adult travellers contributed to this spread.

The aim of WHO issuing an alert to declare poliovirus spread as a public health disease of international concern and issuing recommendations was to have measures put in place to prevent the spread of poliovirus. These recommendations should be put into place in conjunction with existing measures to prevent and monitor poliovirus, which include high routine poliovirus vaccination coverage and an increased alert

for acute flaccid paralysis (AFP) surveillance used for poliovirus surveillance.

References

<http://www.polioeradication.org/Dataandmonitoring/Poliothisweek.aspx>
http://www.who.int/ihr/ihr_ec_2014/en/
 Last accessed 2014/05/15.

Source: Centre for Vaccines and Immunology and Division for Public Health, Surveillance and Response, NICD-NHLS