GENEVA – The World Health Organization (WHO) warned today that progress towards the elimination of measles has stalled. The number of deaths from measles increased from an estimated 122 000 in 2012 to 145 700 in 2013, according to new data published in the WHO *Weekly Epidemiological Report* and the Centers for Disease Control and Prevention's (CDC) *Morbidity and Mortality Weekly Report*. The estimated number of measles deaths in 2013 represents a 75% decline in mortality since 2000, significantly below the target of a 95% reduction in deaths between 2000 and 2015.

"Poor progress in increasing measles vaccination coverage has resulted in large outbreaks of this highly contagious disease, throwing the 2015 elimination targets off-track," said Dr Peter Strebel from the WHO Department of Immunization, Vaccines, and Biologicals.
Member states of all six WHO Regions have set goals for measles elimination. "Countries urgently need to prioritize maintaining and improving immunization coverage. Failure to reverse this alarming trend could jeopardize the momentum generated by a decade of achievements in reducing measles mortality," said Dr Strebel.

Meeting these goals on time is one of the six goals of the Global Vaccine Action Plan, endorsed by all member states at the World Health Assembly in 2012.Despite being vaccine-preventable, measles is still an important cause of death and disability among children worldwide. Strong efforts are needed to maintain the current level of control and to continue reducing the number of cases and deaths. WHO and its partners in the Measles & Rubella Initiative have been warning for a number of years that the disease has the potential to rebound if vaccination and surveillance efforts are not maintained and strengthened.

While the increase in the disease in 2013 was in large part due to outbreaks in China, the Democratic Republic of the Congo, and Nigeria, sizeable outbreaks were also reported in other parts of the world. Progress is stalled in the WHO Eastern Mediterranean region, where weak health systems and conflict and population displacement have hampered vaccination efforts. Meanwhile, the European region has seen measles re-emerge with outbreaks in a number of countries including Georgia, Turkey and Ukraine, and renewed high-level political commitment is needed to reverse this trend.

Reduced funding puts impressive gains at risk

Impressive gains have been made towards measles elimination in recent years and an estimated 15.6 million deaths were prevented through vaccination during 2000-2013. The huge reductions in mortality, however, are tapering off. "The net effect of reduced global funding by governments and partners has caused postponed and suboptimal immunization campaigns, resulting in large outbreaks that threaten our hard earned gains," says Robert Kezaala, UNICEF's Senior Health Advisor, for Immunization.

Steve Cochi, Senior Advisor for the US Centers for Disease Control and Prevention's Global Immunization Division concurs that the resurgence of measles, especially in Africa, is in large part due to a marked decrease in financial support during the global recession. "This funding gap is only recently being closed and the world's children cannot afford yet another setback in progress," he says.

In developing countries it costs around US $1 to vaccinate a child against the disease, making the measles vaccine one of the best buys in public health. During 2013, 205 million children were immunized against measles through large-scale campaigns in 34 countries, including Cambodia, Cape Verde, Ghana, Jordan, Senegal, and Sudan.

However, while estimated coverage with the first dose of the measles vaccine increased globally to 83% by 2009, it has remained static since, still standing at 83-84% through 2013.

More than 60% of the estimated 21.5 million children who were not vaccinated against measles at 9 months of age last year came from six countries:

- India (6.4 million)
- Nigeria (2.7 million)
- Pakistan (1.7 million)
- Ethiopia (1.1 million)
- Indonesia (0.7 million)
- Democratic Republic of Congo (0.7 million)

Failure to vaccinate children against measles puts them at risk of severe health complications such as pneumonia, diarrhoea, encephalitis, and blindness. The vast majority of deaths from measles occur in developing countries, and in 2013 over 70% of estimated global measles deaths occurred in the six countries listed above.

Getting back on-track

Partners in the Measles & Rubella Initiative agree that to get back on track to reach the 2015 milestones, it will be important to raise awareness about measles elimination and around the risks associated with not vaccinating children. Barriers that are hampering immunization efforts will need to be addressed, including diminishing funding and the need to strengthen health systems. WHO strongly recommends that every child receives two doses of measles vaccine and that countries unable to reach high coverage through routine immunization services continue follow-up vaccination campaigns every two to four years to eliminate the risk of resurgence.

Seven countries are already planning to roll out mass vaccination campaigns in November 2014: Benin, Burkina Faso, Cote d'Ivoire, Lao PDR, Mali, Mauritania and Yemen. The Democratic Republic of the Congo started a one-year rolling campaign in 2013 that finished in August 2014.

Measles

Measles is a highly contagious viral disease, which affects mostly children. It is transmitted via droplets from the nose, mouth or throat of infected persons. Initial symptoms, which usually appear 10–12 days after infection, include high fever, runny nose, bloodshot eyes, and tiny white spots on the inside of the mouth. Several days later, a rash develops, starting on the face and upper neck and gradually spreading downwards.

There is no specific treatment for measles and most people recover within 2–3 weeks. However, particularly in malnourished children and people with reduced immunity, measles can cause serious complications, including blindness, encephalitis, severe diarrhoea, ear infection and pneumonia.