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Increasing measles outbreaks prove need to bolster investment and political commitment to reach global goals

**24 April 2012** | **ATLANTA** | **GENEVA** | **NEW YORK** | **WASHINGTON**, **D.C** \( \text{\texts}\) Today, the partners leading efforts to control measles announce a new global strategy aimed at reducing measles deaths and congenital rubella syndrome to zero.

The announcement comes with the publication of new data using a state-of-the-art methodology showing that accelerated efforts to reduce measles deaths have resulted in a 74% reduction in global measles mortality, from an estimated 535 300 deaths in 2000 to 139 300 in 2010.

Vaccination has been key to this progress. Through increased routine immunization coverage and large-scale immunization campaigns, sub-Saharan Africa made the most progress with an 85% drop in measles deaths between 2000 and 2010, according to a new study published in today's *Lancet*.

Since 2001, the Measles Initiative has supported developing countries to vaccinate over 1 billion children against measles. Now, in keeping with the new Global Measles and Rubella



Strategic Plan to control and eventually eliminate measles and rubella, the Initiative is called the Measles & Rubella Initiative. Measles and rubella elimination naturally go hand-in-hand, as measles and rubella vaccines are routinely combined in a single shot.

"A three-quarters drop in measles deaths worldwide shows just how effective well-run vaccination programmes can be," says Dr Margaret Chan, Director-General, World Health Organization . "Now we need to take the next logical step and vaccinate children against rubella, too."

The new data underscores that progress in reducing measles deaths was especially strong from 2001 to 2008. However, when investment and political commitment to measles control faltered in 2008 and 2009, many children were not immunized. Measles came roaring back and caused large outbreaks in Africa, Asia, Eastern Mediterranean and Europe. In 2010, an estimated 19 million infants  $\square$  mostly in sub-Saharan Africa and South-East Asia  $\square$  did not receive measles vaccine.

These outbreaks combined with a delayed start in intensifying measles control in India, meant that the goal of 90% reduction in measles mortality by end 2010 compared with 2000 levels was not met. India accounted for about 47% of global measles deaths in 2010. In addition, target dates for measles elimination goals in the WHO Eastern Mediterranean and European regions had to be revised.

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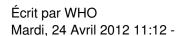
"Recent measles outbreaks have affected children in the world unevenly, with the poorest and youngest children the most at risk of death or disability," said UNICEF Executive Director Anthony Lake. "This new Strategic Plan stresses that measles and rubella vaccinations must be delivered to children deep in the poorest and hardest to reach communities."

The new Strategic plan presents a five-pronged strategy to cut global measles deaths by at least 95% by 2015 compared with 2000 levels and to achieve measles and rubella elimination in at least five WHO regions by 2020. The strategies include: high vaccination coverage; monitoring spread of disease using laboratory-backed surveillance; outbreak preparedness and response and measles case management; communication and community engagement; and research and development.

"Measles continues to kill children around the world and rubella is the leading infectious cause of congenital malformations in newborn infants; these are avoidable tragedies," says Thomas R. Frieden, M.D., M.P.H, CDC Director. "This new plan outlines strategies we know work. It's time to partner with key countries to implement the plan in order to save our children from these terrible diseases."

Under the new strategy, 62 countries currently not using rubella vaccine are encouraged to use their measles vaccination delivery system to introduce rubella vaccine into their national immunization schedule and protect families against both diseases with one combined shot. Many high-income countries already offer routine immunization for both measles and rubella through the use of combined measles-rubella or measles-mumps-rubella vaccine.

"The American Red Cross leverages the capacity of its partners in the Red Cross and Red Crescent network and their network of millions of volunteers to combat these two diseases," said David Meltzer, Senior Vice President, International Services of the American Red Cross. "By working closely with these volunteers—trusted neighbors and community members—to literally go door-to-door, explaining the importance of receiving routine immunizations and participating in campaigns, we can continue to fight these deadly diseases."



The newly-renamed Measles & Rubella Initiative has strong support from GAVI and is welcoming new partners including the American Academy of Pediatrics, International Pediatric Association, Lions Clubs International and Sabin Vaccine Institute.

From 2012, developing countries can apply to GAVI for financial support with the combined measles-rubella vaccine, a low-cost and effective vaccine, deliverable through existing immunization structures. GAVI will also continue to offer the measles second dose vaccine.

"We're delighted to strengthen our partnership with the renamed Measles & Rubella Initiative, which has done great work to reduce measles infections and reduce mortality," GAVI CEO, Dr Seth Berkley MD, said. "With GAVI's US\$ 605 million investment for both the combined MR and measles second dose vaccines in developing countries, this is an historic moment for the reduction and hopefully eventual elimination of both diseases," he said.

According to Kathy Calvin, CEO of the United Nations Foundation, an additional US\$ 112 million is needed to achieve the global measles and rubella goals for 2015. "We need significant commitments from governments and the private sector if we are going to stop measles and rubella, as well as the support of individuals worldwide because a small donation from the public can go a long way and help save many lives."

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The release of the new measles mortality data and the Strategic Plan coincides with WHO's World Immunization Week, with over 180 countries worldwide rolling out various activities to raise awareness and take action on the importance of immunization.

## About measles and rubella

Measles is one of the most infectious diseases known to humankind and an important cause of death and disability among children worldwide. Those unvaccinated against the disease are at risk of severe health complications such as pneumonia, diarrhoea, and encephalitis (a dangerous infection of the brain causing inflammation) and blindness. The disease can be fatal. The vast majority of measles deaths occur in developing countries.

Rubella, transmitted through airborne droplets, is generally a mild illness. But when a pregnant woman becomes infected, particularly during the first trimester of pregnancy, serious consequences can occur including miscarriages, still births, and infants born with birth defects known as Congenital Rubella Syndrome (CRS). The most common congenital defects include lifelong heart problems, deafness or blindness (cataracts). An estimated 112 000 cases of CRS occur each year and are preventable through vaccination.

## Measles & Rubella Initiative

The Measles & Rubella Initiative is a global partnership committed to ensuring no child dies from measles or is born with congenital rubella syndrome. Founded originally as the Measles Initiative in 2001, it's led by the American Red Cross, the United Nations Foundation, the U.S. Centers for Disease Control and Prevention, UNICEF and the World Health Organization. Since 2001, the Initiative has supported 80 countries to deliver more than 1 billion doses of measles vaccine, helped to raise measles vaccination coverage to 85% globally, and reduced measles deaths by 74%. These efforts have contributed significantly to reducing child mortality as per Millennium Development Goal 4.

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