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Six countries in WHO South-East Asia achieve rubella control

03 August 2018 | News

Bangladesh, Bhutan, Maldives, Nepal, Sri Lanka and Timor-Leste are the first six countries in the WHO South-East Asia Region to control rubella and congenital rubella syndrome.

In a significant win against childhood killer diseases, two countries of WHO South-East Asia Region, DPR Korea and Timor-Leste, were verified for eliminating measles, and six countries certified for controlling rubella and congenital rubella syndrome, two years ahead of the target year 2020.

“These achievements demonstrate the commitment and resolve of countries in the Region towards health of women and children, and for universal health coverage”, said Dr Poonam Khetrapal Singh, Regional Director WHO South-East Asia.

Last year Bhutan and Maldives became the first two countries in the Region to eliminate measles. With today’s announcements, four of the 11 member countries of WHO South-East Asia have now eliminated measles.

Bangladesh, Bhutan, Maldives, Nepal, Sri Lanka and Timor-Leste are the first six countries in the WHO South-East Asia Region to control rubella and congenital rubella syndrome.

Bhutan, Maldives and Timor-Leste, have become the first three countries in the Region to achieve both elimination of measles and control of rubella and congenital rubella syndrome.

The Regional Verification Commission, an independent body of experts, met in Delhi from 31 July to 2 August. Based on an in-depth review of the data and reports provided by national verification committees, the Commission verified that both DPR Korea and Timor-Leste have interrupted transmission of indigenous measles for more than three years.

In 2014, WHO South-East Asia announced elimination of measles and control of rubella and congenital rubella syndrome by 2020 as a flagship program. Since then, all countries in the Region have been strengthening efforts to eliminate measles, a major childhood killer disease, and control rubella and congenital rubella syndrome, which causes serious and irreversible birth defects.

Working towards the goal, efforts are being made to strengthen vaccination services for measles and rubella, enhance surveillance, build laboratory networks, and leverage reach and support of existing networks such as of the polio eradication programme.

All countries in the Region have introduced two doses of measles containing vaccines in their immunization schedule. Eight of the 11 countries have introduced rubella vaccines in their immunization programmes, and the remaining countries are in the process of doing so. Nearly 400 million children are planned to be vaccinated through mass campaigns with measles and rubella vaccine in 2018-19 in the Region.

The Commission acknowledged that tremendous progress has been made by all Member countries in the Region over the past four years. A huge momentum has been created in the Region and activities have been accelerated to move towards the achievement of these goals, it observed.

Commending the progress, Dr Khetrapal Singh said across the Region, immunization managers and health workers are now better trained while cold-chain structures are more reliable. Injection safety has been enhanced and vaccine management systems are more effective. We have laboratory networks with greater capacity and surveillance systems that are better equipped to meet the challenges we face.

“We are moving towards a brighter and healthier future for all – one that is free of vaccine preventable diseases and the unnecessary death and suffering they cause,” she said.

However, we need to further intensify our efforts, Dr Khetrapal Singh said, adding, “measles moves fast, we need to move faster to protect our children against its severe consequences”.