

Polio Eradication Initiative, Afghanistan

Report: Confirmed case of Poliomyelitis from Kabul City, 2013

Introduction

Kabul city reported one case of Poliomyelitis after being free of Polio for more than a decade. This recent case is a female child of age 48 months, resident of sub-district 15 in Qasaba camp which is a slum dwelling constructed by settled nomads and located at the outskirts of Kabul city. The child has history of high grade fever which was followed by paralysis of both legs on November 24, 2013. Parents of this child contacted both public and private, health facilities in Kabul but ultimately went to Pakistan to seek the treatment from where it was notified as case with signs and symptoms of paralysis. Based on the clinical examination and isolation of poliovirus from specimens of one of a close contacts, confirmed the diagnosis of Poliomyelitis. The child had history of receiving more than 5 doses of Oral Polio Vaccine prior to paralysis.

Kabul city is densely populated with continuous population movements to and from all over the country and also from Pakistan. There is no direct history of travel by any family member in the last one month preceding the paralysis except routine visits of neighbors and close relatives living in the same camp. The child's father has a taxi and is frequently traveling to Jalalabad, Torkham and inside Kabul city. The hamlet in which parents of the child is living has IDPs as well. The genetic studies of this Poliovirus detected in Kabul shows that it is closely linked to the polio cases in Khyber and Bannu indicating a new importation from neighboring areas of Pakistan.

According to the field investigation carried out by a national team, the vaccination coverage in the index case hamlet and surroundings screening 34 children showed coverage of 92% coverage in the last and 84% prior to the last vaccination campaign while the routine immunization coverage for fully immunized children in this hamlet was low and was around 30%.

During the investigation, the team also assessed the sensitivity of the surveillance system to detect and report children with symptoms Acute Flaccid Paralysis (AFP). Analysis of AFP surveillance for Kabul city shows that most of the indicators meet the required standards. However, genetic studies and also the case was missed for reporting by one Public and two Private clinics in Kabul which shows the gap and need to further strengthen AFP surveillance system. It is important to mention that during the field investigation efforts were made to search for additional AFP cases in the record of Health facilities, in the neighborhood during household coverage survey and during interviews with the community people. No additional case was found during the investigation.

Case Response Activities:

Considering the population density, movement, urban slum areas in or around Kabul city with lower vaccination coverage posed the risk of occurrence of secondary cases in Kabul. **Ministry of Public Health along with WHO, UNICEF and NGOs took immediate, well focused and aggressive public health measures to minimize the risk of any further spread of this virus in Kabul or in the neighboring areas. Following steps of this case response strategy were implemented**

- **Case Response Vaccination:** There are series of three rounds of vaccination scheduled and implemented in Kabul.
 - First round of case response is completed within week of receiving the report of confirmed case. This round was implemented from 9-11 February, to vaccinate almost 70% of the Kabul city and two of its neighboring districts. Total of 7,500,000 children of age less than 5 years were targeted to administer Oral Polio Vaccine by house to house vaccination teams.
 - Second Round of case response was scheduled in the last week of February (Feb 23-25) and included all Kabul city and four of its nearby districts. The total target for this round in Kabul is over 1,000,000 children.
 - Third round of Case response was part of National Immunization Days and was all over the country targeting almost 8.8 million children. This round was scheduled from March 23-25, 2014.
 - For Kabul, special transit vaccination teams are placed at a strategic location (Pul-e-Charghi Post) from where most of the population travelling from Pakistan or Eastern Region enters Kabul. These vaccination teams will continue for at least three months.

- **Coordination and Advocacy:** National and Provincial teams had meetings with H.E Provincial Governor of Kabul, City Mayor of Kabul, Ministry of Religious Affairs (Haj and Auqaf) and Education departments. Governors called inter-departmental meetings so that all line ministries, particularly Education, Religious Affairs, Information and Women Affairs to assist the ongoing campaign and to actively participate in the next rounds of case response.

- **Community and Social Mobilization:** List of community elders in Qasaba area and in the elders in the camp was prepared followed by meeting with these community influencers to seek their support ensuring that all children receive vaccine in their areas. With the assistance of Haj and Auqaf, the Imams of all the mosques in the area of vaccination were contacted and orientation seminar was held for their awareness and asking them to relay the message of importance of vaccination during the campaign days. Mass media like TV, Radio and newspaper were also engaged to encourage parents to vaccinate all eligible children.

- **Strengthening Surveillance system:** Provincial teams of MoPH, WHO and UNICEF had immediate meetings with medical and para-medical staff at various hospitals in Kabul and important private hospitals are contacted. These healthcare providers are sensitized to be extra vigilant to report any suspected child with symptoms of paralysis or weakness

As result of these measures, No secondary case of Poliomyelitis is reported from Kabul city or its neighboring districts since the first case reported in last week of November, 2013.