

Dear polio eradication supporter,

In June, it was officially confirmed that 155 countries and territories have successfully completed the globally synchronised switch from trivalent to bivalent oral polio vaccine, an essential milestone of the polio eradication strategy. In Nigeria, the Expert Review Committee emphasised the importance of guarding against complacency in light of the important work ahead needed to keep the country polio-free. And whilst furthering polio eradication efforts, the staff and infrastructure of the programme continued to support progress towards meeting other health goals and needs, such as routine immunization strengthening and disease surveillance.

### In this issue:

- **Global Oral Polio Vaccine Switch Completed**
- **Keeping Nigeria Polio-Free**
- **The Broader Benefits of Polio Eradication**
- **The Importance of Surveillance**

## GLOBAL ORAL POLIO VACCINE SWITCH COMPLETED

After many months of planning and coordination, it was officially confirmed in June that all of the 155 countries undergoing the global switch from the trivalent to bivalent oral polio vaccine (OPV) were successful. This means that the type 2 component of OPV has been removed from use. With this milestone complete, there are important risk mitigation measures that must be finalized, including outbreak preparedness and response plans for isolates of type 2 vaccine-derived polioviruses; a global stockpile of type 2 monovalent OPV; and containment measures for handling type 2 viruses in vaccine facilities or laboratories.



A child receives the oral polio vaccine in Kano, Nigeria.  
© Gates

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[\[Read more\]](#)

## KEEPING NIGERIA POLIO-FREE

The Expert Review Committee (ERC) on Polio Eradication and Routine Immunization met in Abuja on 21 – 22 June and emphasised that the strategy in Nigeria must shift from interrupting transmission to staying polio-free, sustaining the hard-won gains, strengthening routine immunization and responding to outbreaks of vaccine-derived polioviruses. Warning against complacency in the face of the progress made, the ERC emphasised the need to fill sub-national surveillance gaps, to make significant improvements to routine immunization and to address risks to the programme such as waning political commitment and accountability and the inaccessibility of some populations in the North-East.

[\[Read more\]](#)



Much remains to be done to secure a polio-free world for future generations in Nigeria. ©WHO/L.Dore

## Polio Partners Group Meeting

On 24 June, stakeholders of the Global Polio Eradication Initiative gathered in Geneva at the [meeting](#) of the Polio Partners Group (PPG).

## New GPEI Website Coming Soon

The GPEI will be launching a new and improved [website](#) next month, with updated information on the polio programme, new data visualisations and interactive graphics.

## POLIO IN NUMBERS

### Wild poliovirus in 2016

- Global Total: **18 (29)** ↓
- Global WPV1: **18 (29)** ↓
- Global WPV3: **0 (0)**

### Endemic: **18 (29)** ↓

- Afghanistan: **6 (4)** ↑
- Pakistan: **12 (25)** ↓

### Importation Countries: **0 (0)**

Data as of **29 June 2016**. Numbers in brackets represent data at this time in 2015.

[Current case map](#)

## POLIO IN THE NEWS

- *Foreign Policy*: [Pakistan's Quiet Revolution Against Polio](#)
- *The New York Times*: [Polio Strain Found in Hyderabad, India, Prompts Vaccination Drive](#)
- *Impatient Optimists*: [World Takes Major Step Towards Ending Polio](#)

## THE BROADER BENEFITS OF POLIO ERADICATION



Health workers from the International Committee of the Red Cross (ICRC), a UNICEF implementing partner, fill syringes with vaccine during a measles and polio immunization campaign in central African Republic. ©UNICEF

The knowledge, skills and infrastructure built to end polio are helping the world make progress on other health and development initiatives. For example, the extensive surveillance network built by the polio programme enables health workers to effectively track other diseases, while polio social mobilization networks encourage parents to protect their children with other routine vaccines. Millions of men and women have been trained to stop polio, and these seasoned health workers are already playing instrumental roles in protecting communities from cholera, measles, meningitis and other vaccine-preventable childhood diseases. By planning now, we can keep the world polio-free and ensure that the investments made in ending polio can continue to have a broad and lasting impact on children's health and development, long after polio is gone. [\[Read more\]](#)

## THE IMPORTANCE OF SURVEILLANCE

Surveillance is one of the most important jobs done to eradicate polio. As we draw closer to eradication, fewer countries actually have cases to be found through acute flaccid paralysis surveillance. Therefore new and innovative approaches are being used to find viruses even before they cause symptoms. Michel Zaffran, Director of Polio Eradication at WHO, speaks to Rotary about the skill and vigilance needed to finish the job. [\[Read more\]](#)

every last child

## FUNDING UPDATES

Rotary International [announced US\\$ 35 million](#) in grants to support polio eradication efforts globally at their convention in Seoul, Korea, bringing Rotary's total support in 2016 to US\$ 70 million.

As part of its partnership with the Bill & Melinda Gates Foundation, the **Government of Japan** [signed a loan agreement](#) with the Government of the Islamic Republic of Pakistan to provide a Japanese ODA loan of up to 6.29 billion yen for polio eradication activities. This is the second Loan Conversion to support activities in Pakistan.

The **Government of Pakistan** has signed an agreement with WHO to provide US\$ 48 million to support operations costs as part of a loan from the **Islamic Development Bank**.

The **US Center for Disease Control and Prevention** released its second 2016 contribution to UNICEF for a total of US\$ 17 912 815.

At the Polio Partners Group meeting on 24 June, **Switzerland** announced 1 million Swiss francs to support polio transition planning in Africa.

The **Japanese Ministry of Health, Labour and Welfare** has renewed its support for IPV research and provided a grant of US\$100 000 to WHO.

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