This Week

- World Polio Day activities garnered global attention. Partners, donors, and popular public figures around the world brought attention to the cause of polio and the efforts to eradicate polio. A quick overview of some of the World Polio Day highlights.
- Summary of new viruses this week: Afghanistan – Three new cases of wild poliovirus (WPV1) and four WPV1 positive environmental samples. Pakistan – No new case of wild poliovirus (WPV1) and seven WPV1 positive environmental samples. Papua New Guinea – three new cases of circulating vaccine-derived poliovirus type 1 (cVDPV1) and three cVDPV1 positive environmental samples. Democratic Republic of Congo – one new case of circulating vaccine-derived poliovirus type 2 (cVDPV2). Nigeria- two new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2). Somalia- four new cVDPV2 positive environmental samples. See country sections below for more details.
- The Every Last Child project series was launched by UNICEF, which covers over 30 wide-ranging profiles of governments, front-line workers, and the stakeholders involved in the collective polio eradication efforts across Nigeria, Afghanistan, and Pakistan.
- Featured on polioeradication.org: Coffee with Polio Experts – Dr Arlene King, Chair of the RCC for the Americas, and GCC Containment Working Group talks to WHO about the importance of safe and secure containment of polioviruses, in places where needed, and the accompanying risk and responsibility that come with retaining the pathogen.

NA: Onset of paralysis in most recent case is prior to 2017. Figures exclude non-AFP sources. In 2018, cVDPV includes all three serotypes 1, 2 and 3.

For Somalia: 1 cVDPV2 and cVDPV3 isolated from one AFP case.

cVDPV definition: see document “Reporting and classification of vaccine-derived polioviruses” at [pdf].

Weekly country updates as of 30 October 2018

Afghanistan

- Three new cases of wild poliovirus type 1 (WPV1) have been reported from Maywand district, Kandahar province, from Pornus district, Nuristan province, and from Nawzad district, Helmand province with onset of paralysis on 24, 26 September and 2 October respectively. This brings the total number of WPV1 cases in 2018 in the country to 19.
- Four WPV1-positive environmental samples were reported, one from Helmand province, collected on 25 September and three from Kandahar province, all collected on 3 October.
- Nominal variations (up or down) in the number of newly-reported cases at this point of the polio endgame – although tragic for the affected children and their families – are not operationally overwhelming, especially considering the population size in the 3 remaining endemic countries (upwards of 90 million children aged less than five
years). However, confirmation of even a single polio case anywhere points to remaining vaccination coverage gaps which must be filled, to achieve eradication.

- Over and beyond case numbers, the GPEI and its partners actively and continuously evaluate a wide range of epidemiological, virological, programmatic, operational, surveillance, financial and social data, the analysis of which drives strategic planning and enables targeted eradication efforts.
- The three remaining endemic countries continue to intensify their eradication efforts, through implementation of national polio emergency action plans. Underpinning these plans is the data analysis, to identify area-specific challenges and reasons why children are being missed (ie due to population movement, inaccessibility, lack of infrastructure, inadequate microplanning, resistance, etc), and putting in place area-specific solutions to overcome those reasons. By clearly identifying high risk areas, teams are able to allocate and prioritise technical assistance to those areas.
- Analysis in 2018 by both GPEI partners and independent technical advisory groups, reviewing all available evidence, concludes that the near-term feasibility of eradication is possible, if remaining vaccination coverage gaps are rapidly filled, and the GPEI and its partners continue to work towards this goal.
- The aim is to urgently interrupt the remaining strains of wild poliovirus transmission, not only to eradicate such strains in their own right and prevent their global re-emergence, but also to subsequently remove oral polio vaccines (OPV) from routine immunization programmes globally, to eliminate the long-term risks of vaccine-derived polioviruses (VDPVs).
- The ultimate aim of the GPEI is to secure and sustain a world where no child will ever again be paralysed by any poliovirus – be it wild or vaccine-derived.
- Read the latest polio update from Afghanistan to see information on cases, surveillance and vaccination campaigns.

Pakistan

- No new case of wild poliovirus type 1 (WPV1) has been reported this week. The total number of WPV1 cases in 2018 in the country remains six.
- Seven positive WPV1 environmental samples have been reported across Pakistan: two in Rawalpindi district, Punjab province; two in Lahore district, Punjab province; one in Peshawar district, Khyber Pakhtunkhwa province; one in Gadap Town, Karachi district, Sindh province, and in Islamabad, Federal Capital Territory, collected from 10 to 11 October.
- It is important to note that cases are reported this year from only 4 districts across the country, and that no WPV cases (except one from Gadap, greater Karachi) have been reported from core reservoir areas in 2018. 20 years ago, the entire country was affected by polio, and every year, more than 35,000 children were paralysed for life by the disease.
- Read the latest polio update from Pakistan to see information on cases, surveillance and vaccination campaigns.

Nigeria

- Two new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) cases were
reported this week: one from Daura LGA, Katsina state with onset of paralysis on 18 September and one from Monguno LGA, Borno state, with onset of paralysis on 25 September. The total number of cVDPV2 cases reported in Nigeria in 2018 is 19.

- No new cases of wild poliovirus type 1 (WPV1) were reported. The most recently-detected WPV1 case, from Borno state, had onset of paralysis on 21 August 2016.
- The 36th Expert Review Committee for Polio Eradication and Routine Immunization (ERC), the independent technical advisory group in the country, met in Abuja on 29-30 October to review the evolving epidemiology and programmatic implications. The group concluded: Nigeria must maintain momentum by focusing on the remaining inaccessible areas through high quality (above 90% coverage) Supplementary Immunization Activities (SIAs) to prevent cVDPV2 outbreaks and reach the last remaining 70,000 children in Borno. A complete updated risk assessment of Kano state—it is likely to be infected—in the next mOPV2 rounds. Properly document the use of intradermal fractional dose of IPV (fIPV) in November since it is the first experience of fIPV use in AFRO.
- The country continues to be affected by two separate cVDPV2 outbreaks, the first centered in Jigawa state, and the second in Sokoto state.
- In response to cVDPV2 detection, the country continues to conduct acute flaccid paralysis surveillance strengthening activities including enhanced active surveillance visits and community sampling. The programme has also carried out an extensive search for type 2 containing vaccines (tOPV/mOPV2) in the areas surrounding where the virus is detected.
- At the same time, outbreak response to WPV1 continues, including efforts to address surveillance and immunity gaps in parts of Borno state.
- Read our Nigeria country page to see information on surveillance and vaccination campaigns.
- Nigeria has enlisted the help of religious leaders and clerics to support the polio eradication efforts and encourage the community’s men to allow accessibility of immunization and basic healthcare for their wives and children. More.

Lake Chad Basin

- No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) have been reported in the past week. There are six total number of cVDPV2 reported cases in 2018 in Niger, which are genetically linked to a cVDPV2 case in Jigawa and Katsina states, Nigeria. The virus was isolated from children with acute flaccid paralysis (AFP) from Zinder region, located in the south of Niger and on the border with Nigeria, with dates of onset of paralysis ranging from 18 July through 7 September 2018.
- Two mOPV2 response vaccination campaigns will reach 3.2 million children under five years of age in four provinces in Niger (Agadez, Diffa, Maradi and Zinder). The first round took place from 24 through 27 October 2018 and the second is scheduled for 7 through 11 November 2018.
- Acute flaccid paralysis surveillance and routine immunization across the country with focus on the infected provinces and the provinces at the international borders with Nigeria are being reinforced.
- WHO and its partners are continuing to support local public health authorities in
conducting field investigations and risk assessments to more clearly assess risk of the identified cVDPV2 and to conduct additional response measures as appropriate and necessary.

- Active case finding for additional AFP cases is continuing, and additional surveillance measures such as increasing the frequency and extent of environmental surveillance and community sampling of healthy individuals is being expanded.
- WHO is supporting the Ministry of Health to strengthen the risk communication and community engagement.
- WHO in collaboration with the Ministry of Health are working together to finalize the deployment of the human resources needed at national and provincial levels.

Central Africa

- One new case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week in the Democratic Republic of the Congo (DRC) from Yamaluka district, Mongala province, with onset of paralysis on 09 August. The total number of cases detected in the country in 2018 is 16.
- DRC is affected by three separate strains of cVDPV2, in the provinces of Mongola, Maniema and Haut Lomami/Tanganika/Haut Katanga/Ituri.
- Provincial governors on 26 July convened an urgent meeting and signed the ‘Kinshasa Declaration for Polio Eradication’. The high-level meeting was convened by HE the Minister of Health, as well as the WHO Director-General and the Regional Director for Africa. Provincial governors committed to providing the necessary oversight, accountability and resources needed to urgently improve the quality of the outbreak response being implemented across the country. Outbreak response since cVDPV was first confirmed in 2017 has been marred by operational challenges, as too many children continue to remain un- or under-vaccinated. This level of oversight can help ensure that operational deficits are rapidly identified and addressed.
- The polio outbreak response is being conducted simultaneously to an ongoing Ebola outbreak affecting North Kivu province, in the east of the country (close to provinces affected by cVDPV2). As in the past, the polio teams are coordinating closely with the broader humanitarian emergency network, to ensure both outbreaks are addressed in a coordinated manner (as was the case during the recent Ebola outbreak in Equateur province, which was successfully stopped).
- Partners of the Global Polio Eradication Initiative will continue to support authorities across the country, to ensure that this new level of commitment rapidly translates into operational improvements on the ground.
- Read our Democratic Republic of the Congo country page to see information on surveillance and vaccination campaigns.
- Learn more about vaccine-derived polioviruses through this short animation or this ‘Coffee with Polio Experts’ video.

Horn of Africa

- The Horn of Africa is currently affected by separate outbreaks of circulating vaccine-derived poliovirus type 2 (cVDPV2) and type 3 (cVDPV3), reporting both cases and environmental positives.
- Four new positive cVDPV2 environmental samples were reported this week from
Somalia- all in Banadir region- collected from 30 August to 20 September 2018.
- Somalia has reported a total of 12 cVDPV cases (five type 2, six type 3 and one, coinfecion of both type 2 and type 3) in 2018.
- cVDPV2 has also been detected during 2018 in one environmental sample in Kenya.
- Outbreak response to both virus types is currently being implemented in line with internationally-agreed guidelines. Large-scale supplementary immunization activities (SIAs) have been implemented in Banadir, Lower Shabelle and Middle Shabelle regions, Somalia, with additional SIAs planned or carried out in the affected zones of the Horn of Africa. Special surveillance activities are being undertaken to determine the origin of the viral circulation.
- WHO and partners continue to support local public health authorities across the Horn of Africa in conducting field investigations and risk assessments.
- Read our Somalia country page and Kenya country page to see information on surveillance and vaccination campaigns.
- Learn more about vaccine-derived polioviruses through this short animation or this ‘Coffee with Polio Experts’ video.

Papua New Guinea

- Three cases of circulating vaccine-derived poliovirus type 1 (cVDPV1) were reported this week from Jiwaka province, Gulf province and Southern Highlands province, with dates of onset of paralysis on 20 August, 29 August and 8 September, respectively.
- The total number of cases in the country in 2018 is now 21.
- Three new cVDPV1 positive environmental samples were reported from the Capital city, Port Moresby, all collected on 1 October.
- Emergency Operation Centres are established and operational in all affected provinces; environmental surveillance is functional in five sites in two major cities.
- Three Supplementary Immunization Activities (SIAs) of expanding scope have taken place since late July, from three provinces to nine, to nation-wide. The most recent was aimed at children under the age of 15, due to large numbers of poorly-immunized older children.
- Detection and reporting of new viruses or cases at this point in the outbreak response is not unusual or unexpected, as surveillance is being strengthened and most reported and confirmed cases had onset of paralysis prior to the start of comprehensive outbreak response.
- Read our Papua New Guinea country page to see information on surveillance and vaccination campaigns.

The Middle East

- No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported in the past week in Syria. The total number of officially reported cVDPV2 cases in Syria in 2017 remains 74. There are no cases reported in 2018. The most recent case (by date of onset of paralysis) was reported in Boukamal district, with onset on 21 September 2017.
- Recent Outbreak Response Assessment (OBRA) mission to Syria has recommended
to close the Syrian outbreak.
- Read the latest polio update from Syria to see information on cases, surveillance and vaccination campaigns