

Dear Colleagues,

January 2017

In this, my last monthly update letter as chair of the Polio Oversight Board, I reflect on the progress, status, and meaning of polio eradication.

From 350,000 cases in 1988, to 37 cases documented in 2016 to date, the world is closer than ever to eradication. This is a tribute to the hard work of hundreds of thousands of health care workers, community leaders, and dedicated people from all over the world.

The last three known polio-affected areas are working hard to get over the finish line. Afghanistan is locating and vaccinating the last susceptible children, adding more regional Emergency Operations Centers, and improving environmental surveillance. The country is also, in collaboration with partners, planning to vaccinate the more than 1 million refugees and nomads entering and leaving the country, through strategic placement of vaccination teams along the routes to and from inaccessible areas. The remoteness of much of the country, while making transmission difficult for poliovirus, makes eradication work challenging as well. Of more concern, many areas of the country remain inaccessible for rigorous program supervision.



Polio workers in Pakistan are improving the quality and intensity of surveillance. In addition to immunization campaigns, community-based vaccination programs in Pakistan have fostered trust, empowered volunteers, and increased vaccination rates in hard-to-reach areas. Rapid-response units support immunization campaign planning and implementation in high-risk and low-performing areas. Although Pakistan has made substantial progress and is deeply committed to eradication, the virus continues to circulate in many areas of the country. With the low levels of polio even in the traditional high season, we hope Pakistan will finish the job and see its last case sometime in 2017.

The cases of polio in northeast Nigeria, where polio had been circulating, undetected, for five years, were a wake-up call and a searing reminder of the need to greatly improve surveillance in other at-risk places. Nigeria and the bordering countries of the Lake Chad region are working to reach unvaccinated children, but both lack of access because of insecurity and insufficiently rigorous program implementation in some areas remain concerning.

Borno is not the only remote area in the world where polio spread previously. Communities in the Democratic Republic of Congo, Cameroon, and elsewhere also need to close surveillance gaps to ensure they are not harboring polio. Each country needs to ensure that it has systems in place that would detect polio if it exists.

Eradication mobilizes enthusiasm, support, funding, and hard work. Dr. Donald Hopkins, who played a critically important role in smallpox eradication and who has led the work of Guinea worm eradication at the Carter Center, recently said, “Smallpox eradication immunized me against pessimism.”

Eradication can leave behind people, processes, progress, and optimism that promote better immunization, better child survival programs, and better surveillance systems. But there is something even more basic. Public health programs are most effective when they establish information systems that provide ongoing feedback for ongoing program improvement—when they use epidemiologic and program data to improve performance in real time. Dr. Bill Foege led critical work to eradicate smallpox, including a novel

surveillance-containment strategy in Nigeria known as ring vaccination. Despite a substantial vaccine and supply shortage in Nigeria at the time, Dr. Foege and his team used strong data and targeted ring vaccination to stop the smallpox outbreak in its tracks. When asked, after smallpox was eradicated, “What next?” Foege replied: the eradication of bad management. This, ultimately, should be the legacy of polio eradication—a world in which life-and-death decisions are increasingly based on data.

Thank you.

A handwritten signature in black ink that reads "Thomas R. Frieden". The signature is written in a cursive, flowing style.

Thomas R. Frieden, MD, MPH
Director, U.S. Centers for Disease Control and Prevention
Chairman, Polio Oversight Board