



Public Health Emergency of International Concern (PHEIC) related to the international spread of wild poliovirus

Implications for the Americas, polio-free Region
4 August 2014

On 5 May 2014, the WHO Director General accepted the International Health Regulations (IHR) Emergency Committee's assessment and declared the international spread of wild poliovirus in 2014 a Public Health Emergency of International Concern ([PHEIC](#)).

On 31 July 2014, the IHR Emergency Committee met for the second time to assess the situation and advise the WHO Director General again. Based on the conclusions of this meeting, and considering the reports submitted by the concerned States Parties, the WHO Director General accepted the Committee's assessment and stated that the international spread of wild poliovirus in 2014 **continues to be a PHEIC**. The temporary recommendations issued on 5 May 2014 remain valid.

Since 5 May through 31 July 2014, there has been new international spread of wild poliovirus in Central Asia (Pakistan to Afghanistan) and in June of 2014, wild poliovirus originating in Central Africa (Equatorial Guinea)¹ was detected in the Americas. Because of this last event, Equatorial Guinea was confirmed as a state that is currently exporting wild poliovirus.

The current characterization is as follows: (i) States Currently Exporting Wild Poliovirus (Cameroon, Equatorial Guinea, Pakistan and Syrian Arab Republic) and (ii) States Infected with Wild Poliovirus but Not Currently Exporting (Afghanistan, Ethiopia, Iraq, Israel, Nigeria, and Somalia).

The temporary recommendations, effective 5 May 2014, were issued and are aimed to stop the spread of wild poliovirus and continue to valid. The situation will be reassessed in 3 months.^{2,3}

According to the [Temporary Recommendations](#) formulated by the WHO Director General in relation to the declaration of the PHEIC concerning the international spread of wild poliovirus, the primary responsibility of stopping the spread of wild poliovirus to wild poliovirus free areas

¹ Information is available at:

http://www.paho.org/hq/index.php?option=com_docman&task=doc_view&gid=25922+&Itemid=999999&lang=en

² The complete WHO statement on the declaration of the Public Health Emergency of International Concern regarding the international spread of wild poliovirus is available at: <http://www.who.int/mediacentre/news/statements/2014/polio-20140505/en/>

³ The complete WHO statement on the second meeting of the International Health Regulations Emergency Committee concerning the international spread of wild poliovirus is available at: <http://www.who.int/mediacentre/news/statements/2014/polio-20140803/en/>

falls on the States Parties with active outbreaks (in other words, the ten countries aforementioned).

For States Parties in the Americas, a polio-free Region, the vaccination coverage levels reported and the performance of the acute flaccid paralysis surveillance systems are considered as adequate measures, commensurate to the risk, to maintain the polio-free status of the Region.⁴

Considerations for the Americas Region

1. Any measure that polio-free States Parties may consider adopting in addition to those detailed in the Temporary Recommendations related to the PHEIC concerning the international spread of wild poliovirus, and that might have implications for travel and trade, should be analyzed in the light of Article 43 of the IHR and subsequent action taken accordingly.
2. **Countries in the Americas should not require certificate of vaccination against polio** from travelers or residents from States that currently export wild poliovirus (Cameroon, Equatorial Guinea, Pakistan and the Syrian Arab Republic) or from States currently infected with wild poliovirus (Afghanistan, Ethiopia, Iraq, Israel, Nigeria, and Somalia).
3. PAHO Member States **may recommend** to travelers from the Americas and heading to States that currently export wild poliovirus or States infected with poliovirus, to be immunized prior to travelling. The immunized travelers should have appropriate documents evidencing such vaccination, i.e. the international certificate of vaccination or prophylaxis in the format specified in Annex 6 of the International Health Regulations. To this end, Member States of the Americas should take steps to inform travelers heading to those countries of the places where such certificates may be obtained locally.

⁴ Please see [Report of the Technical Advisory Group On Vaccine-Preventable Diseases XXI Meeting](#): "Vaccination: A Shared Responsibility," Quito, Ecuador, 3-5 July 2013; Recommendations – Polio

- All countries must reinforce the activities aimed to achieve or maintain vaccination coverage >95% in every district or municipality. If countries do not achieve that coverage they must evaluate the accumulation of non-immunized and conduct vaccination campaigns.
- All countries must continue to maintain adequate AFP) surveillance in order to timely detect any importation or emergence of VDPVs, and must report to PAHO on a timely fashion to allow the proper monitoring of the Regional situation.