



THIRTY-THIRD WORLD HEALTH ASSEMBLY

Provisional agenda item 21

INDEXED

SMALLPOX ERADICATION PROGRAMME

Report by the Director-General

The world has now been free from endemic smallpox for 30 months. The Global Commission for the Certification of Smallpox Eradication, in its final report entitled "The achievement of global eradication of smallpox",¹ concluded that "Smallpox eradication has been achieved" and "There is no evidence that smallpox will return as an endemic disease". The Commission also made 19 recommendations to Member States and to WHO for the establishment of a policy for the post-eradication era.

At its sixty-fifth session (January 1980), in resolution EB65.R17, the Executive Board endorsed these conclusions and recommendations and recommended that the Thirty-third World Health Assembly adopt two resolutions: one concerns the declaration of smallpox eradication and the other refers to measures for the post-eradication era.²

1. Freedom from smallpox

The last case of endemic smallpox occurred in Somalia in October 1977. Continuing surveillance in the Horn of Africa and elsewhere in the world has confirmed that the world has now been free from endemic smallpox for 30 months.

2. Certification of smallpox eradication

The Global Commission for the Certification of Smallpox Eradication, after over two years of work, concluded in December 1979 that (1) smallpox eradication has been achieved throughout the world, and (2) there is no evidence that smallpox will return as an endemic disease (page 12 of the final report of the Global Commission).¹

3. Recommendations regarding policy for the post-eradication era

The Global Commission, as well as reaching these conclusions, made 19 recommendations regarding the policy for the post-eradication era (pages 12-15 of the final report of the Global Commission). The recommendations stress that smallpox vaccination and international certificates of vaccination against smallpox are no longer required. They underline the importance of measures to maintain permanent freedom from the disease. These measures include: epidemiological surveillance of suspected cases of smallpox; research on orthopoxvirus infections, including human monkeypox, both in the field and in the laboratory; adequate security and control in laboratories retaining stocks of variola virus; establishment of vaccine reserves; and extensive documentation and thorough treatment of archival material related to the smallpox eradication programme.

¹ Document A33/3, Annex.

² See document EB65/1980/REC/1, pp. 18-21.

4. Final report of the Global Commission for the Certification of Smallpox Eradication

The Global Commission submitted its final report entitled "The achievement of global eradication of smallpox" to the Director-General and it has already been made available to all Member States as a Health Assembly document.¹ It presents the basis on which their conclusions and recommendations were made, and contains an historical description of the development of smallpox control and of the eradication programme, including a discussion of the establishment of the smallpox eradication strategy and its implementation. It specifically describes in detail the Global Commission's meticulous examination of the surveillance data presented by the 79 countries judged to be of epidemiological importance for the certification, and thereby requiring special procedures. These were countries where smallpox had been endemic in the last 10 years, adjacent countries where there was a risk of importation leading to the establishment of endemic foci, and countries where surveillance data were insufficient for certification. Lastly, the report considers carefully the possible existence of a source for the return of smallpox.

5. Resolution of the sixty-fifth session of the Executive Board on global smallpox eradication

At its sixty-fifth session, in January 1980, the Executive Board discussed a report by the Director-General on the smallpox eradication programme,² to which were attached excerpts from the final report of the Global Commission. In its resolution EB65.R17, the Board endorsed the conclusions and the 19 recommendations of the Global Commission and recommended two resolutions for adoption by the Thirty-third World Health Assembly.³ The first (resolution I) deals with the declaration of smallpox eradication and the second (resolution II) concerns the Global Commission's recommendations on technical measures to be taken in the post-smallpox eradication era. Delegations may wish to consider initially the adoption of the first resolution proposed by the Board, on the declaration of smallpox eradication, which is expected to be taken up in plenary session (provisional agenda item 12). The second resolution, on technical measures, might then be considered after the smallpox eradication programme has been discussed in Committee A (provisional agenda item 21).

6. Current programme status

6.1 Vaccination policy in individual countries

As of 10 April 1980, smallpox vaccination is no longer obligatory in 64 countries. An international certificate of vaccination against smallpox is still required by 14 countries (12 in the African Region and 2 in the Western Pacific Region).

6.2 Investigation of suspected smallpox cases

Since January 1979, 69 rumours have been investigated either by WHO, by nationals, or by joint WHO/national teams (18 in the African Region, 8 in the Region of the Americas, 24 in the South-East Asia Region, 5 in the European Region, 10 in the Eastern Mediterranean Region, and 4 in the Western Pacific Region). The results of the investigations, which have shown that none of the reports were due to smallpox, reinforce the credibility of global smallpox eradication.

6.3 Research on orthopoxvirus infections

During June and July 1979, a WHO team of epidemiologists, virologists and zoologists worked with a national team in Northern Zaire to collect further information on the natural reservoir of monkeypox virus. Serum and tissue specimens were collected from more than 90 animal species. Testing of some sera from monkeys suggested previous monkeypox infection but the investigations have so far failed to recover monkeypox virus. Laboratory studies on the genetic structure of orthopoxviruses are continuing.

¹ Document A33/3, Annex.

² Document EB65/23.

³ See document EB65/1980/REC/1, pp. 18-21.

6.4 Laboratories retaining variola virus

At the end of April 1980 there were six laboratories retaining stocks of variola virus: one each in China, Netherlands, South Africa, United Kingdom, United States of America and USSR. All have been inspected by WHO inspection teams during the last 18 months and safe measures for storing or working with the virus have been ensured. Detailed information on control of variola virus in laboratories is presented in section 13.1 (Laboratory stocks of variola virus) and Annex 9 (WHO recommended safety standards in laboratories retaining variola virus) of the final report of the Global Commission.

6.5 WHO reserve stocks of vaccine

A total of 47 million doses of vaccine has now been stored in WHO repositories in Geneva and New Delhi, and donations exceeding 50 million doses have been pledged by India and the USSR. At a storage temperature of -20°C the potency of the vaccine can be maintained for at least 15 years. There are also at least 90 million doses in national vaccine reserves in 26 individual countries.

6.6 Documentation of the smallpox eradication programme

A book entitled "The eradication of smallpox from India" has been published through the joint efforts of WHO and the Indian Government.¹ A similar publication on the eradication programme in Bangladesh is in preparation. It is proposed to publish the final report of the Global Commission after its review by the Thirty-third World Health Assembly. A book on the eradication programme, tentatively entitled "Smallpox and its eradication", is expected to be published by WHO in the next two to three years. It is planned that this book will be prepared by an editorial board which will seek the advice, experience and knowledge of a wide variety of scientists or programme staff who have actively participated in the programme. Thus the book will provide a comprehensive historical account of the programme and of technical aspects of the disease.

¹ Basu, R. N., Jezek, Z. & Ward N. A. The eradication of smallpox from India, New Delhi, World Health Organization, 1979 (WHO Regional Publications, South-East Asia Series No. 5; History of International Public Health No. 2).