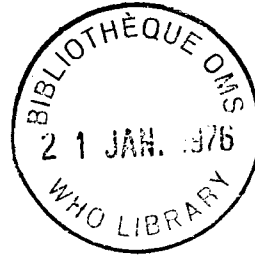




EXECUTIVE BOARD

Fifty-seventh Session

Provisional agenda item 10



INDEXED

REVIEW OF THE PROPOSED PROGRAMME BUDGET FOR 1976 AND 1977
(Financial year 1977)

SMALLPOX ERADICATION PROGRAMME

Report of the Director-General

1. The Director-General has the honour to present the following report regarding the programme of smallpox eradication.
2. The status of the smallpox eradication programme as at 27 December 1975 is shown in the end-of-year summary report to be published on 16 January 1976 in the Weekly Epidemiological Record¹ (preprint attached).
3. More rapid progress was made in the global smallpox eradication campaign during the past twelve months than during any preceding year. Only a year ago, four countries were regularly reporting cases - Bangladesh, Ethiopia, India and Nepal. Today the disease is believed to be confined to less than 60 villages, located in remote geographic areas of Ethiopia. The last known cases in Nepal occurred on 6 April; in India on 24 May; and in Bangladesh on 16 October 1975. However, continuing programmes of case search are in progress in these and other countries to detect any remaining hidden foci. Most significant is the fact that almost three months have now elapsed since the last known case of variola major, that form of smallpox which, wherever it occurs, is associated with case-fatality rates of 20 to 40 per cent. and not infrequently causes blindness. Smallpox cases in Ethiopia are much milder and case-fatality rates are only one to two per cent.
4. Although there are encouraging prospects that the last case of smallpox may be detected during 1976, the magnitude of the task ahead must not be underestimated, nor must a successful conclusion to the programme be jeopardized by premature complacency. The remaining endemic foci in Ethiopia are primarily located in remote, mountainous areas; amongst peoples who resist accepting the unknown process of vaccination; amongst groups who frequently practise variolation and so inadvertently encourage the spread of the disease; and in areas where civil disturbances sometimes prevent the carrying out of surveillance and vaccination for weeks at a time. Even when that point is reached where there are no known active cases, a specially intensive search for cases for not less than two years will be required before we can be fully assured that smallpox is not continuing to spread in some isolated valley. The need for such surveillance is particularly apparent in Ethiopia but it is no less important in all other countries, especially in those which only recently appear to have interrupted transmission.

¹ Weekly Epidemiological Record, 3 (1976).

5. The greatly accelerated progress of the programme during the past twelve months may be attributed to a greater national commitment by those in the remaining endemic areas, and to greatly increased international support. During 1975, contributions in cash and in kind totalling some \$ 12 million were received from 24 Member countries, the United Nations Emergency Operation, and private donors. Assuming that the last case in Ethiopia occurs by mid-1976, it is estimated that for 1976 through 1978 approximately \$ 16 million will be required in the form of international assistance to countries throughout the world to complete the task of global eradication. This support is required primarily to permit transmission in Ethiopia to be interrupted, to conduct an adequate search for possible hidden foci in all recently smallpox-endemic countries, to permit preparation of necessary documentation for and to convene the international commissions that will determine whether eradication can be certified, and to support further studies of monkeypox and other variola-related viruses so as to be assured that there is no persistent animal reservoir for smallpox. Funds from the Organization's regular budget and contributions so far received from or confirmed by various donors account for \$ 10 million. It is thus estimated that contributions amounting to about \$ 6 million are still required in order to complete the smallpox eradication programme.

Studies of monkeypox virus and other variola-related poxviruses

6. During the past year, a number of new observations have been made and new techniques have been developed that are and will be of help in further appraisal of the variola-related poxviruses. In February 1976, a meeting of epidemiologists and virologists concerned with this problem will be convened in Geneva. Scientists from 13 countries and from six collaborating laboratories will participate in a review of current knowledge of investigations and in planning collaborative studies to be undertaken. However, based on information so far available, the conclusion reached in a December 1973 meeting of research workers and epidemiologists remains valid today:

"Monkeypox and the white poxviruses do not, at present, appear to pose a threat to the smallpox eradication programme. Nevertheless, intensive surveillance activities must continue as well as further investigations in the laboratory and in the field. The most important basis for optimism is provided by the increasing areas which are now free of smallpox and the steadily increasing time that they so remain."

Registry of laboratories retaining stocks of variola virus

7. With the cessation of human-to-human transmission of smallpox, it will be important to assure that those laboratories retaining stocks of variola virus have satisfactory safeguards to ensure that human infections do not inadvertently occur. It was felt that a logical first step in this direction would be the development of an international registry of laboratories which indicate that they retain stocks of smallpox virus. In collaboration with regional offices and with governments, the preparation of such a registry has been initiated in four of the six WHO regions. The results, so far, are as follows:

Region	Number of countries	Number replied	Number of countries with variola virus stocks	Number of laboratories with variola virus stocks
Americas	28	-	No report as yet	-
African	38	-	To be initiated	-
South-East Asia	10	-	To be initiated	-
European	34	-	No report as yet	-
Eastern Mediterranean	23	20	1	1
Western Pacific	16	10	4	4