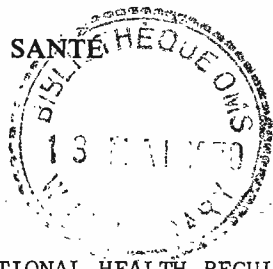




TWENTY-THIRD WORLD HEALTH ASSEMBLY



**COMMITTEE B**

Agenda Item 2.5

RESERVATIONS TO THE INTERNATIONAL HEALTH REGULATIONS, 1969

Under the terms of Article 100, paragraph 1, of the International Health Regulations adopted by the Twenty-second World Health Assembly on 25 July 1969, the period for rejection or reservation was nine months from the date of the notification by the Director-General of the adoption of the Regulations. The letter of notification was sent by the Director-General on 8 August 1969, so that the period for rejection or reservation expired on 8 May 1970.

Notifications of rejection or reservations have been received from the Governments of Australia, Cuba, India, Indonesia, Netherlands (in respect of Surinam), Pakistan, Singapore, South Africa, Turkey and United Arab Republic. These notifications are reproduced in Annexes A to J.

ANNEX A

AUSTRALIA

Letter from the Director-General of Health, received 14 April 1970

I refer to your letter of 8 August 1969, reference C.L. 17.1969, concerning the International Health Regulations. A certified copy of the International Health Regulations was received with your letter.

As noted in your letter the Regulations were adopted by the Twenty-second World Health Assembly and will enter into force on 1 January 1971.

I have to advise you that Australia wishes to make reservations to the following Articles of the International Health Regulations:

1, 24, 26, 29, 35, 36, 39, 47, 48, 49, 59, 67, 70, 74, 84, 86, 87, 90, 94, 96.

The Articles are listed below with the reservation following:

Article 1

The definitions in this Article of "disinsecting" and "free pratique" are not acceptable. In regard to disinsecting, although it is realized that the Regulations apply to human diseases, the right must be retained to employ disinsecting which would prevent the entry of insect agents and vectors of plant and animal diseases. The definition of "free pratique" is not acceptable under Australian quarantine practice. Australia employs two kinds of pratique, 'limited' and 'full' pratique, and in addition may allow a vessel to proceed around the Australian coastline in quarantine. It is considered that the definition of "free pratique" would not allow this practice to be continued.

Article 24

Under certain circumstances Australia may wish to take action in excess of those measures prescribed by the Regulations and this right must be retained.

Article 26

The right must be retained to also employ measures to prevent the entry of exotic animal and plant diseases.

Article 29

This Article is not acceptable on account of the concept of "free pratique" being unacceptable (see the notes on "free pratique" under Article 1).

Article 35

Part (b) of this Article would permit passengers and crew from a healthy aircraft to transfer from one airport to another even though some of these passengers and crew may be unvaccinated. This practice would be unacceptable to Australia.

Article 36

Two reservations are held to this Article. (1) The concept of "free pratique" is not acceptable (see notes on "free pratique" under Article 1). (2) Information concerning the health situation on board a ship is accepted for the purposes of radio

pratique only when the ship carries a surgeon and the surgeon has carried out an inspection of all persons on board within 24 hours of the time of arrival at the first port of entry into Australia. It has not been found practicable to apply a similar procedure to aircraft.

Article 39

This Article is unacceptable because it compels a health authority to remove an infected person from a vessel if so required by the person in charge of the vessel. In view of the extended coastline of Australia the implementation of this practice would not be practicable.

Article 47

This Article is unacceptable as the right must be retained to disinfect cargo and goods to prevent the entry of agents or vectors of animal and plant diseases. This Article limits health measures to cargo and goods coming from infected areas and which are believed to be contaminated by an agent of a disease subject to the Regulations or may serve as a vehicle for the spread of any such disease.

Article 48

The right must be retained to disinfect or disinsect baggage to prevent the introduction of agents or vectors of diseases of animals and plants.

Article 49

The right must be retained to disinfect or take other appropriate measures in regard to postal parcels as considered necessary. In addition, the right must be retained to prevent the entry of agents and vectors of animal and plant diseases which may be carried by postal parcels.

Article 59

The term "free pratique" is not acceptable (see note on "free pratique" under Article 1).

Article 67

The term "free pratique" is not acceptable (see note on "free pratique" under Article 1).

Article 70

Paragraph 1 of this Article is not acceptable. It is considered that the testing of samples by examination of cultures is an insufficient safeguard to exclude infected food or beverages.

Article 74

The right must be retained to disinsect aircraft on arrival to prevent the introduction of insect agents and vectors of human, animal and plant disease. Paragraph 2 of this Article would not allow this.

Article 84

The right must be retained to detain in quarantine a person who does not fulfil the Australian requirements for vaccination against smallpox. In view of Australia's extensive area, surveillance is not always practicable.

Article 86

The term "free pratique" is not acceptable (see notes on "free pratique" under Article 1).

Article 87

Under Article 87 the term "free pratique" is not acceptable (see notes on "free pratique" under Article 1).

Article 90

Paragraph 3 of this Article is not acceptable. In Australia a quarantine officer has to advise the Chief Boarding Officer (Immigration) of any persons on board the ship who on landing may become a charge on the State because of a chronic disability. The Maritime Declaration of Health in the Regulations is not sufficiently comprehensive to cover cases of this nature.

Article 94

Under Australian quarantine procedures a Supplementary Health Report is used when infectious disease is present on a sea vessel or when a second inspection of a vessel is considered necessary. This Article would prohibit the use of this document and accordingly is not acceptable.

Article 96

The right must be retained to disinsect aircraft on arrival. Paragraph 1 of this Article would not allow this.

These reservations are submitted in conformity with Article 22 of the Constitution of the Organization and Article 100 of the Regulations.

It would be appreciated if you would acknowledge receipt of this letter.

CUBA

Letter from the Director of Relations with International Organizations  
and Conferences, dated 28 April 1970, received on 8 May 1970  
(Translation)

With regard to the International Health Regulations adopted by the Twenty-second World Health Assembly on 25 July 1969 in the city of Boston, Massachusetts, United States of America, I have the honour to inform you that the Government of Cuba has decided to make the following reservations to the aforesaid Regulations:

Article 63 (Chapter II - Cholera)

"The Revolutionary Government of the Republic of Cuba reserves the right to extend measures for the control of cholera from international travellers arriving from an infected area to all persons coming from any part of the territory of a country in which a case of sickness has been notified."

Article 73 (Chapter III - Yellow Fever)

"With regard to measures for protection against yellow fever, the Revolutionary Government of the Republic of Cuba will require international certificates of vaccination against yellow fever to be produced by all international travellers coming from territories included in the endemic zones delineated by the World Health Organization, until such time as evidence is forthcoming that the virus is not active. In the case of travellers unable to produce such a certificate, the measures specified in Article 75 of these Regulations may be applied to them."

I think I should add that the reservation to Article 63 is based on the fact that the passports of travellers arriving from abroad do not specify the exact part of the country from which they have come, so that they may have come directly from or passed through an infected area.

With regard to the reservation applicable to Article 73, the reason why it has been made is, as you can see, self-explanatory.

In notifying you of the above reservations, in accordance with the provisions of Article 22 of the Constitution of the Organization, I should like to take this opportunity of once again assuring you of my highest regard.

ANNEX C

INDIA

Letter, dated 2 May 1970, from the Deputy Secretary, Ministry of Health,  
Family Planning and Works, Housing and Urban Development (Department of Health),  
received 4 May 1970

1. With reference to your letter No. C.L.17.1969, dated the 8th August, 1969, on the subject mentioned above, I am directed to notify the Director-General, World Health Organization, the reservations in respect of articles 1, 7(2)(b), 43, 44 and 94 to the International Health Regulations adopted by the World Health Assembly at its meeting held at Boston in July, 1969, as shown in the annexure to this letter.
2. It is requested that the reservations referred to above may kindly be placed for consideration before the World Health Assembly at its next meeting.
3. The receipt of this letter may kindly be acknowledged.

Reservations to the International Health Regulations

Article 1 of the International Health Regulations

"The Government of India reserves the right to consider the whole territory of a country as infected with yellow fever whenever a case of yellow fever is reported from that country in terms of the definition of 'infected area' in the International Health Regulations."

Article 7(2)(b) of the International Health Regulations

"The Government of India reserves the right to continue to regard an area as infected with yellow fever until there is definite evidence that yellow-fever infection has been completely eradicated from that area."

Article 43 of the International Health Regulations

"The Government of India reserves the right immediately to disinsect on arrival an aircraft which, on its voyage over infected territory, has landed at a sanitary airport which is not itself an infected area, if an unprotected person from the surrounding infected area has boarded the aircraft and if the aircraft reaches India within a period during which such a person is likely to spread yellow-fever infection.

The above reservation will not apply to the aircraft which are fitted with sound DDVP system and the same is compulsorily operated. The aircraft not fitted with the said system shall be subject to the above reservation."

Article 44 of the International Health Regulations

"The Government of India reserves the right to apply the terms of article 75 to the passengers and crew on board an aircraft landing in the territory of India who have come in transit through an airport situated in yellow-fever infected area, not equipped with the direct transit area."

Article 94 of the International Health Regulations

"The Government of India shall have the right to require of persons on an international voyage arriving by air in its territory or landing there in transit, but falling under the terms of paragraph 1 of the article 76, information on their movements during the last six days prior to disembarkation."

ANNEX D

INDONESIA

Letter, dated 18 April 1970, from the Director-General for  
Communicable Disease Control, received 4 May 1970

Re:

1. The adoption of the International Health Regulations by the Twenty-second World Health Assembly in July 1969 in Boston;
2. The fact that these Health Regulations shall come into force on the 1st January 1971;
3. The responsibility of Indonesia as a Member State of WHO and, on the other hand, its ability to execute the International Health Regulations;

Having taken note of Articles 100 and 106 of the International Health Regulations, I have the honour to draw your attention to the following:

A. Indonesia has reservations about:

(1) Article 1: (a) Concerning the definition of "infected person". For Indonesia the old definition of ISR-1951 remains, i.e. "infected person means a person who is suffering from a quarantinable disease, or who is believed to be infected with such a disease".

Note: This definition will be handled in the first place by the Port Medical Officer in charge and it will be very difficult for him to find out what is stated in the new definition, namely: who is subsequently shown to have been incubating such a disease.

(b) Concerning the definition of "in quarantine". For Indonesia, at the end of the new definition, should be added: "or to which by the health authority concerned has not yet been given free pratique".

(2) Article 39: For Indonesia at the end of the article should be added the following sentence:

"Such removal, if required by the person in charge of the means of transport, should not be insisted upon in ports and airports where adequate facilities for the reception of such a person cannot be expected to be available".

Note: Not yet all ports with international traffic have these facilities.

(3) Article 58 para. 4: After the word "infected" should be added the words "or suspected of being infected" so that for Indonesia para. 4 reads: "if a rodent infected or suspected of being infected with plague is found on board an aircraft, the aircraft shall be disinfected and deratted".

Note: It is very difficult for the Port Medical Officer in charge to make a diagnosis at the airport that a rodent is infected with plague without a laboratory examination, and to wait for the result of the laboratory examination lasts in Indonesia a relatively long time.



(4) Article 77 para. 2: For Indonesia the second sentence should read as follows:

"It shall be regarded as suspected if the health authority is not satisfied with a disinsecting carried out or it finds live mosquitoes on board even if a disinsecting is carried out in accordance with para. 2 of article 74."

Note: The original wording does not mention other disinsecting methods and the wording is not clear.

(5) Article 92 para. 5: For Indonesia these words should be deleted "and no photograph shall be included"; they should be replaced by the words: "but a recent photograph may be included".

Note: In Indonesia it is very difficult to depend only on a man's name, since it is allowed to change his name in important circumstances for the person concerned.

B. Indonesia makes the following remarks concerning:

(1) Article 1: Concerning the definition "diseases subject to the Regulations (quarantinable diseases)". For Indonesia the quarantinable diseases remain as is mentioned in the International Sanitary Regulations 1951, namely six diseases until such time as the Indonesian law of quarantinable diseases is changed (is passed by Parliament).

(2) Article 20 para. 1 and para. 2: At present Indonesia is not yet in a position to carry these paragraphs out, especially as Indonesia now has 41 ports, where international traffic is allowed and while also no specifications are available concerning:

(a) how much of the port-area should be kept free of Aedes aegypti and of mosquito vectors of malaria and other diseases of epidemiological significance in international traffic,

(b) effective methods to be used.

(3) Article 74 para. 3 and para. 4

Note: At present Indonesia has not got sufficient facilities for carrying them out.

(4) Article 96 para. 1 and para. 2:

Note: See note for Article 74.

(5) Article 97 para. 1: This article could be in contradiction with Article 24 and gives possibilities of excessive measures (as in a certain State concerning pilgrims). It is suggested that this article should be read:

"Migrants, nomads, seasonal workers or persons taking part in periodic mass congregations, and any ship, in particular small boats for international coastal traffic, aircraft, train, road vehicle or other means of transport carrying them, may be subjected to additional health measures conforming to any agreement concluded between the importing and the exporting States."

Notes: Indonesia experienced many difficulties to fulfil the requirements of a certain country, which were in excess of the International Sanitary Regulations, during the pilgrimage season.

Thanking you in advance for your consideration and co-operation in this matter.

NETHERLANDS

Letter, dated 24 April 1970, from the Director-General for  
International Affairs, received 29 April 1970

I inform you herewith that the Government of Surinam has informed me that the Government is in agreement with the text of the International Health Regulations, but that it has to make a reservation regarding Article 17, paragraph 2, and Article 58.

## PAKISTAN

Letter, dated 30 April 1970, from the Assistant Director-General of Health,  
received 7 May 1970

I am directed to refer to your letter No. C.L.17.1969 dated the 8th August 1969, on the above subject, and to say that the Government of Pakistan have given careful consideration to the provisions of the proposed new International Health Regulations and to inform the Organization that these Regulations it is felt expose Pakistan, a receptive country, to a serious risk of importation of yellow fever. However, the Government of Pakistan accept these regulations subject to the following reservations as detailed in its reservations to the unamended International Sanitary Regulations, 1951:-

1. Article 1 (definition "infected area")

The Government of Pakistan reserves the right to consider the whole territory of a country as infected with yellow fever, where conditions in term of the definition of yellow fever infected area are fulfilled in any part of its territory. Further the Government of Pakistan reserves the right in special circumstances after giving fullest possible consideration to the population characteristics, density and mobility, vector and animal reservoir potential to delineate a zone as a yellow fever endemic zone in terms of the definition as contained in Article 1 of the unamended International Sanitary Regulations, 1951 and also reserves the right to apply measures against arrivals in its territory from infected area or group of infected areas where the conditions of the definition of "yellow fever endemic zone" are fulfilled, but which are outside the delineated zone, as if they were part of the delineated zone.

In declaring to the Organization the infected area, or group of infected areas, to which the reservation would apply, the Government of Pakistan shall give motives underlying such a declaration and the reasons for urgency, in order to permit the Organization to notify all States accordingly.

In regard to persons who embark on a ship or aircraft in a port or an airport which has been removed from a yellow fever endemic zone, in compliance with the terms of paragraph 2 of Article 70 (of the International Sanitary Regulations 1951 unamended) and who are unable to prove that they have not been in a yellow fever endemic zone within nine days prior to disembarkation, the Government of Pakistan reserves the right to treat such persons as if they had come from a yellow fever endemic zone.

The Government of Pakistan shall declare to the Organization, without delay, the ports or airports to which this reservation will apply.

2. Article 43

The Government of Pakistan reserves the right to disinsect immediately on arrival an aircraft which on its voyage over infected territory, has landed at a sanitary airport which is not itself an infected area.

3. Article 44

The terms of Article 75 may be applied to the passengers and crew on board an aircraft landing in the territory or territories of the Government of Pakistan who have come in transit through any airport situated in a yellow fever endemic zone, not equipped with a direct transit area.

4. Article 75

The words "six days" shall be replaced by the words "nine days".

5. Article 94

The Government of Pakistan shall have the right to require of persons on an international voyage arriving by air in its territory or landing there in transit but falling under the terms of paragraph 1 of Article 76, information on their movements during the last nine days prior to disembarkation.

SINGAPORE

Letter, dated 12 September 1969, from the  
Director of Medical Services, received 15 September 1969

1. I refer to your circular letter of 8 August 1969 Ref: C.L.17.1969, advising us of resolution WHA22.46 of 25 July 1969 with regard to the International Health Regulations which are to replace the existing International Sanitary Regulations.
2. As you are aware, the Republic of Singapore has not in the past been bound by the International Sanitary Regulations which the International Health Regulations will replace.
3. It is the view of the Ministry of Health that the reservations which have previously been communicated to the Director-General in respect of the International Sanitary Regulations are still applicable; Singapore would wish to maintain the necessary flexibility it has had in respect of the application of its quarantine procedures and is therefore not in a position to accept the International Health Regulations.
4. Our major reservations cover the following points:-
  - (i) "infected area" - The concept and definition of "infected area" is too broad and general to be effective and meaningful for the application of control against introduction of external disease.
  - (ii) It is the view of this Ministry that isolation expenses should be chargeable to carriers and this is currently being done in respect of quarantine of deck passengers. Provision also exists in respect of other passengers should the need arise.
  - (iii) It is necessary to take additional quarantine measures against deck passengers, barter traders and other travellers who, having regard to the epidemiological situation prevailing in South-East Asia, still pose a high risk in the transmission of dangerous infectious disease.
  - (iv) A certification of sanitary ports and airports by external agencies imposes powers beyond the scope of national health administrations.
  - (v) It is felt that the period of infectivity in the case of yellow fever should be 9 days. It is also our view that any person leaving a yellow fever endemic area should be in possession of a valid yellow fever certificate.
5. For these reasons, it is our view that the Republic of Singapore will continue to remain in the position as heretofore, i.e. in not being bound either by the present International Sanitary Regulations or the proposed new International Health Regulations.

ANNEX H

SOUTH AFRICA

Communication, dated 6 May 1970, from the Permanent South African  
Mission, received 6 May 1970

The South African Permanent Mission presents its compliments to the Director-General of the World Health Organization and has the honour to refer to the latter's letter No. C.L.17.1969 of 8 August 1969, to the Secretary for Health in South Africa, in connexion with the International Health Regulations which were adopted by the Twenty-second World Health Assembly to replace the existing International Sanitary Regulations.

The South African Permanent Mission wishes to inform the Director-General that the South African authorities are substantially in agreement with the provisions of the new International Health Regulations. They wish, however, to retain their reservation in regard to yellow fever. Since South Africa is a yellow fever receptive area and is, therefore, vulnerable to that disease, the limited scope of the new definition of "infected area" cannot be accepted as adequate.

With regard to the term "International voyage" in Article 1 of the new International Health Regulations, the South African authorities wish to state that they are experiencing difficulties with international fishing vessels visiting ports under the jurisdiction of the Republic of South Africa and which come into regular contact with foreign ships on the open sea and from which source they may convey infection to the above mentioned ports and so to the Republic and to ports under its jurisdiction. For these reasons, they would prefer that the words "including a ship" be added after the words "has relations with the territory of any other State ..."

In the view of the South African authorities, the new definition of the term, "Medical examination" in Article 1 of the new Regulations is broader than the existing one. "The scrutiny of vaccination certificates", is a function which at present devolves on non-medical personnel at ports of South Africa or ports under its jurisdiction and the existing arrangement has been found satisfactory.

The South African Mission wishes to state further that plague is endemic in wild rodents in South Africa. Although their activity has, as a result of intensive control measures, been reduced to two foci of relatively limited extent, the plague bacillus is present in these rodents "within the Republic of South Africa" and is likely to remain there for the foreseeable future, although in terms of article 7(2)(c)(ii), South Africa is free of plague. The South African authorities consider that the reference to the plague bacillus in article 4(1) should have been limited to bacilli isolated in human cases.

In view of the above, the South African authorities wish to reserve the right:

- (i) to take any steps necessary to prevent the introduction of yellow fever into South Africa and areas under its jurisdiction;
- (ii) to take whatever steps are necessary to prevent foreign ships visiting the ports of South Africa or ports under its jurisdiction that could have been in contact with ships on the high seas, from conveying infective conditions from the latter to such ports;
- (iii) to continue using non-medical staff at ports under South African jurisdiction for the scrutiny of vaccination certificates; and
- (iv) to report to the World Health Organization only such cases of human plague found to be infected with Pasteurella pestis.

TURKEY

Letter dated 29 April 1970 from the Minister of Health and Social Welfare,  
received 4 May 1970 (Translation)

I have the honour to refer to your letter of 8 August 1969 informing us of the adoption by the Twenty-second World Health Assembly of the new International Health Regulations.

I have pleasure in informing you that Turkey is prepared to accept these new Regulations subject to the provisions and declarations of the Lausanne Peace Treaty, signed on 24 July 1923, and the provisions and Annexes of the Montreux Convention, signed on 20 July 1936.

I am confident that the World Health Assembly will understand Turkey's position and accept this reservation. Needless to say, at the Assembly the Turkish delegation will be ready to provide information on this subject to any delegation that may desire it.

ANNEX J

UNITED ARAB REPUBLIC

Letter, dated 20 April 1970, from the Under-Secretary of State  
for Health, received 4 May 1970

I wish to refer to WHO Circular letter No. 17 of 8 August 1969 regarding the new International Health Regulations, and the reservations of this Ministry in this respect.

We wish to inform you that the Ministry agrees to accede to the new International Health Regulations to which the attached reservations are made.



Reservations of the Government of the UAR

to

The International Health Regulations

Article One

Infected Area

The Government of the UAR taking in consideration health measures being only applied to infected areas as defined in Article (1) of the Regulations and as notified by the health administration concerned, reserves the right in special circumstances to treat passengers arriving from territories outside the delineated area notified as infected with cholera or yellow fever, as if they were coming from the infected area. The reservation is based upon the following facts:

- (1) Free mobility of the population, vectors, means of transport and water channels within a country.
- (2) The impossibility of verification whether a passenger arriving from a non-infected area in a certain country had been to any of the infected areas in that country within the incubation period of the disease prior to his departure.

Article 22

This new article cannot be accepted because the principle of inspection of airports of a country by members from other countries is in contradiction with the sovereignty of the state on its territory.

We suggest regulations to include necessary standards for sanitary airports and transit areas, and health administrations being responsible of notification of their airports and transit areas fulfilling the standards required by the Regulations. Consequently the Government of the UAR rejects this Article.

Article 70

The Government of the UAR finds the amendment of Article 68 impracticable for the following reasons:

- (1) Taking samples for laboratory examination from food to be unloaded in a port, an airport or a frontier post will cause delay to the means of transport. The ship, aircraft or other means of transport has to be detained until the health authority makes sure by laboratory examination that there is no risk of infection being carried to the population in this way.
- (2) Negative laboratory results of random samples of food cannot be a sure evidence that the whole quantity of food is free of pathogenic vibrios.

The Government of the UAR suggests the amendment to give power to the health authority owing to its own discretion to apply one of the following two measures:

- (1) Either to take samples of food to be unloaded for laboratory examination to exclude any possibility of infection being carried to the population. The master of the means of transport has to accept waiting for the results of the procedure;

(2) or to prohibit the unloading of the food within the territory of the country.

Article 71, paragraph 2

Owing to the new epidemiological findings in the field of cholera especially the carrier state, the Government of the UAR finds it absolutely necessary to stick to its present reservation on paragraph 2 of Article 69 of the present Regulations.

The reservation in the New Health Regulations will read as follows:

Article 71, paragraph 2

Persons on an international voyage arriving from an infected area, within the incubation period of the disease, may be required to submit to stool examination, subject to the conditions:

- (a) that the reservation constitutes no derogation from the provisions of Articles 35 and 63 or any other Articles of the Regulations;
- (b) that the period within which a person may be submitted to stool examination does not exceed five days, reckoned from the date of the departure of the person from the infected area;
- (c) that the measure be used with discretion and only in the case of absolute necessity.

Article 73

- (1) The Government of the United Arab Republic reserves the right to consider an area as infected with yellow fever in case that area forms a part of the area provisionally delineated under Article 70 of the 1951 Regulations as potential reservoir of the yellow-fever virus in mosquito or vertebrates other than man.

Any new delineation of that area after definite evidence, adopted by the World Health Organization, that infection has been completely eradicated, will be given full consideration in respect of the measures to be applied upon arrivals from that area.

- (2) The Government of the UAR reserves the right to treat a person arriving from a country with one or more yellow-fever infected areas, and embarking from a free port or airport in that country, as if he had come from an infected area, unless he is able to prove that he has not been to an infected area within six days prior to disembarkation.

Articles 90 and 91

The Government of the UAR reserves the right to ask for Maritime and Aircraft Declarations of Health from all arriving ships and aircrafts at the first port or airport of call in its territory.

Article 92, paragraph 7

The Government of the UAR reserves the right to isolate for the incubation period of the disease, any passenger arriving from an infected area and provided with a certificate notifying that his vaccination is contraindicated on medical grounds.

Article 97, paragraph 3

The Government of the UAR reserves the right to require that the standards of hygiene on ships and aircrafts carrying persons taking part in periodic mass congregations shall not be inferior to those contained in Annex B, International Sanitary Regulations 1951.