



In the Name of God, the Compassionate, the Merciful

Message from

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to the

INTERCOUNTRY MEETING ON MEASLES CONTROL AND ELIMINATION

Sharm El Sheikh, Egypt, 28 November–1 December 2010

Dear Colleagues,

It gives me great pleasure to welcome all of you to the intercountry meeting on measles control and elimination. This meeting comes at a time when measles is being raised higher on the global agenda and the possibility of establishing a global measles eradication goal is being pushed forward. This meeting comes also at the end of 2010, the target date for the elimination of measles from the Eastern Mediterranean Region. This situation gives our meeting special importance and imposes on all of us present in this room, a special responsibility to ensure that the measles elimination strategy is well addressed and is given a prominent position on the health agenda.

I would like to welcome the country participants and express my appreciation for the progress and achievements so far, although a lot more remains to be done. I would like also to welcome members of our Regional Technical Advisory Group for immunization and our colleagues from WHO and UNICEF headquarters, regional and country offices who are participating in this meeting. My sincere welcome and deep thanks go also to the representatives of the various partner agencies, especially the Centers for Disease Control and Prevention in Atlanta and United Nations Foundation, for their continued interest, commitment to and support for immunization programmes in general and measles elimination activities in particular. I would like also to send, from here, a word of thanks and

appreciation to other members of the measles partnership for their unlimited support to measles elimination activities in the Eastern Mediterranean Region.

Dear Colleagues,

The Region has made commendable progress towards achieving the measles elimination goal since 1997, when the Regional Committee for the Eastern Mediterranean passed a resolution adopting the regional target of measles elimination by 2010. Routine immunization coverage of the first dose of measles-containing vaccine for the Region has increased, from 78% in 1997 to 84% in 2009. Nineteen countries provide a routine second dose of measles vaccine with variable levels of coverage. All countries in the Region have completed the nationwide measles catch-up campaign, and 384 million children in the Region were vaccinated against measles through supplementary immunization activities between 1994 and 2009. As a result, the number of reported measles cases has dropped dramatically, especially during the past four years, and measles mortality was reduced by 93% between 2000 and 2008. Measles and rubella case-based surveillance was enhanced throughout the Region. 19 countries are implementing nationwide measles laboratory case-based surveillance and Morocco is on track to do so, while Pakistan, Somalia and southern Sudan are starting to implement it. These achievements are due to the implementation of measles elimination strategies in most of our countries, thanks to sincere national efforts and the unwavering support of partners.

However, we should remember very well that the regional elimination target was not achieved, although 8 countries are moving towards validating elimination. Routine vaccination coverage in many countries still has not reached a level that supports achievement of elimination, measles surveillance is still not up to the standard that supports validation of measles elimination, even in most of the countries with nationwide surveillance, and some countries of the Region still experience measles outbreaks, even among the age groups that were vaccinated during activities with reported high coverage. A lot of quality issues still need to be looked at and corrective measures applied.

In fact, the Region is still facing challenges that will require sustained effort and higher input by Member States, as well as continuous collaboration and support from partners in order to sustain the gains in reducing measles mortality and avoid a resurgence of measles (as happened in southern Africa), well as to achieve measles elimination. Routine immunization still needs strengthening in all countries to achieve the required 95% coverage with 2 doses of

measles vaccine in all districts. Intensive efforts and innovative approaches are still needed in order to reach the inaccessible areas, especially those that are inaccessible due to security and safety issues. Several countries still need to conduct follow-up measles campaigns that will require a considerable amount of resources to be allocated by the countries and mobilized by partners.

Dear Colleagues,

During the EPI managers' meeting in July of this year, we agreed together to postpone the target date of regional elimination of measles to the year 2015, with validating measles elimination in the countries that are ready to do so at any point of time. Today we meet to discuss together, in depth, what has gone right and resulted in the recognized achievements on which we will build, and what has gone wrong and resulted in delaying the target date in order to apply corrective measures. We will review together the national plans for measles elimination in view of the regional strategy and plan of action for 2011–2015. I urge you to make optimal use of this meeting and to utilize the support of the experts attending this meeting to review your national plans and establish the next steps. I also strongly urge all partners to continue providing the support necessary in order to sustain the gains and achieve the target.

Once again, I wish to express my sincere thanks to all of you, countries and partners, for your efforts and for participating in this meeting. I wish you a pleasant stay in Sharm El Sheikh.