



COMMITTEE ON PROGRAMME AND BUDGET

PROVISIONAL MINUTES OF THE THIRD MEETING

Palais des Nations, Geneva
Monday, 10 May 1965, at 2.30 p.m.

CHAIRMAN: Dr A. L. MUDALIAR

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Note: Corrections to these provisional minutes should be submitted in writing to the Chief, Records Service, Room A.843, within 48 hours of their distribution.

1. REPORT ON DEVELOPMENT OF THE MALARIA ERADICATION PROGRAMME: Item 2.4 of the Agenda (Resolutions WHA17.22 and EB35.R17; Documents A18/P&B/2 and A18/P&B/Conf.Doc. No. 1) (continued)

Dr KAUL, Assistant Director-General, Secretary, said that the Secretariat appreciated all the information provided by the members of the Committee during the discussion: knowledge of experiences in national programmes would help other countries. Speakers had stressed many important points regarding the various stages of eradication programmes, including the importance of thoroughness in implementation of the programme and of continuing the effort until the objective had been achieved. Stress had also been placed on the necessity of having a minimum health service structure on which to base the eradication programme, and on the role of the public health services during the consolidation and maintenance phases.

It had been said that when the global eradication programme had been started, in accordance with the decision of the Eighth World Health Assembly, the intention had been to complete the programme within ten years. In fact, the principles of malaria eradication adopted by the Eighth World Health Assembly had been based on concepts provided by the Expert Committee on Malaria - namely, a preparatory phase lasting a year or more, an attack phase lasting four years, and a consolidation phase lasting at least three years. Thus the time required for the successful completion of an eradication programme, if undertaken from the beginning on a country-wide basis, would be a minimum of eight years. At the time of the Eighth World Health Assembly the African continent had been excluded from the global programme, since it was not then clear what methodology should be adopted; but pilot projects had since shown

that eradication programmes were feasible in many parts of tropical Africa. He wished to correct any idea that the objective had ever been to achieve global eradication within ten years. Phasing of programmes was inevitable, owing to limited resources in funds and personnel in many countries, and in some cases a phased programme of up to fifteen years had been undertaken.

Regarding methodology, both the Expert Committee on Malaria and the Organization's specialists kept that aspect under constant review, in order to effect improvements and eliminate defects. It should be remembered that the eradication programme had no precedent, and it was only from experience that one could learn. Even if progress might appear slow, it did not seem that any fundamental changes of principle were indicated; slow progress was often due to administrative and financial difficulties and lack of resources at the national level. The Organization was giving top priority to finding solutions to the difficulties of the so-called "problem areas", which were limited in extent.

He was pleased to note that stress had been laid on the importance of not relying solely on residual insecticides: chemotherapy and larviciding might also be necessary.

Reference had been made to the costliness of the programme. It should, however, be remembered that the cost decreased as the programme progressed. Also the Organization was actively seeking more economical methods. In that connexion, there would be no compromise regarding the principles of total coverage and efficiency. The fact that the programme was being implemented in phases, and that it was at different stages in different parts of the world, made it more expensive, since

continued vigilance was necessary in those countries where eradication had already been achieved. Both the Expert Committee on Malaria and the Committee on International Quarantine had made recommendations regarding the protection of areas freed from malaria.

The delegate of Greece had referred to the question of susceptibility tests and BHC test papers. Unfortunately BHC, a fumigant, did not permit the preparation of the same kind of test papers as DDT and dieldrin.

The delegate of Israel had referred to publication by the Organization of the number of imported cases in areas in the maintenance phase. Any such information received by WHO was in fact published in the Weekly Epidemiological Record every six months.

The delegate of Pakistan had referred to research on DDVP. A WHO international team had been carrying out DDVP trials, and the Organization was also collaborating with various countries where other trials were being undertaken.

The delegate of Ceylon had referred to the importation of cases from a neighbouring area. The Organization was assisting the territory concerned to develop a pre-eradication programme.

The delegate of Spain had referred to the integration of malaria services into the general health services. It was perfectly true that, even where the health services could undertake eradication programmes without developing a specialized service, there should at least be a specialized unit in the health service to supervise the programme; and that might be necessary for a number of years after eradication had been achieved.

The delegate of the Soviet Union had referred to the need to assess the programmes of the various countries, and the global eradication programme as a whole. Dr Kaul agreed that such a review was necessary, and pointed out in that connexion that an expert committee meeting was proposed for 1966, to review the whole eradication programme. Was that perhaps the type of meeting the Soviet Union delegate had had in mind when he had referred to the possibility of establishing a committee in order to review the programme?

In connexion with the remarks made by the delegate of Trinidad and Tobago, he drew attention to operative paragraph 3 of the draft resolution contained in resolution EB35.R17, requesting the Director-General to "bring up to date his report on the financial part of the study of the malaria eradication programme carried out in accordance with paragraph 4 of resolution WHA16.23, for submission to a future Health Assembly". In the past the Organization had drawn up estimates of costs in so far as information was received from the various governments.

Regarding the drafting of legislation, the Organization was prepared to help any country desiring assistance in that field. Both the Expert Committee and the Organization had made various recommendations that might be useful in that connexion.

The disinsection of aircraft and the prevention of importation of vectors by air was one of the most important subjects covered by the International Sanitary Regulations, and a whole section of the report of the Committee on International Quarantine was devoted to that item. The delegate of Kuwait had referred to the development of automatic disinsecting systems built into the aircraft's ventilation system. Collaborative research in that field had been stimulated and promoted by

the Organization for many years, and the Expert Committee on Insecticides and the Committee on International Quarantine had made recommendations on the subject.

Regarding the amendments proposed by the delegation of Romania to the draft resolution contained in the Executive Board's resolution EB35.R17, he saw no objection to the proposal to add the words "particularly in regard to the training of personnel" at the end of operative paragraph 2. With regard to the proposal to add at the end of operative paragraph 3 the words "emphasizing the stage the programme will have reached when financial support by WHO ends", he was not clear as to the exact implications of that addition. The Organization gave assistance at all stages of malaria eradication programmes for as long as requested by the countries concerned. He agreed that operative paragraph 4 would be improved by substituting the word "ensure" for "stimulate", making the text more explicit.

Finally, he suggested that, in accordance with usual practice, the following be included in the text before the first preambular paragraph: "Having considered the report of the Director-General".

Professor CORRADETTI reminded the Committee that at the Seventeenth World Health Assembly the Italian delegation had pointed out that, of the Organization's total expenditure on malaria, only 2.14 per cent. was devoted to research, and had proposed that the proportion be increased to 10 per cent. Accordingly, he proposed the deletion of the third preambular paragraph ("Appreciating the steps that have been taken to intensify investigations with a view to determining the means of fully interrupting the transmission of malaria in problem areas"), and the insertion of a new operative paragraph, reading as follows:

REQUESTS the Director-General to increase the percentage of the budget destined to research with a view to intensifying investigations for determining the means of fully interrupting the transmission of malaria in problem areas.

Professor CLAVERO DEL CAMPO referred to the fourth paragraph of the preamble.

If there was a question of maintaining constant vigilance to avoid the risk of reappearance of the disease, then the disease no longer existed in the country, or it had ceased to be a public health problem; it was not that it had ceased to be a "serious" problem. He therefore proposed the deletion of the word "serious".

Regarding operative paragraph 5, he thought that malarious countries would certainly include teaching of both clinical and public health aspects of malaria in medical and public health schools. He therefore proposed that the paragraph be changed to read: "URGES governments in formerly malarious areas to take steps . . .".

Dr NAYAR (India) said it should be borne in mind that the maintenance phase, which would normally follow the completion of eradication, would impose additional financial burdens on Member States. The resolution should therefore make it clear that financing and other types of assistance from WHO should continue during the maintenance phase.

Dr AYE (Ivory Coast) pointed out that in his report the Director-General had drawn attention to the special situation in Africa, emphasizing that region's lack of resources, staff, equipment and funds. His delegation therefore considered that the sense of operative paragraph 2, which referred merely to the "extensive material needs of such programmes" was too restrictive and supported the amendment proposed by the delegation of Romania. He proposed that the second line of the paragraph should be amended to read "to meet the extensive needs of such programmes, particularly in the training of personnel and the provision of supplies".

He pointed out, with respect to operative paragraph 4, that in some countries the health service was free from government control. He suggested therefore that the words "ensure or" be inserted between the words "to" and "stimulate" in the second line of the paragraph.

Dr BELIOS (Greece) said that his delegation wished to support the amendment proposed by the Italian delegation regarding the funds allocated to research on malaria eradication. Reference to pages 448 and 449 of Official Records No. 138 showed that during the previous three years there had been no increase in the funds allocated to research.

Dr ALDEA (Romania) endorsed what had been said by the delegate of India: the maintenance phase called for large financial contributions to maintain and consolidate the results obtained in the preceding phases.

The SECRETARY, referring to the observation by the delegate of Italy that there was a need for greater emphasis on malaria research and that there was no additional provision in the budget for that purpose, pointed out that the problem areas had been discussed at the Seventeenth World Health Assembly, which had adopted resolution WHA17.22 on the subject. The implication of that resolution was that countries should be assisted by the Organization. By and large, investigations were being undertaken with a view to solving the problems of the problem areas in the areas themselves. The Organization assisted in those investigations by providing additional advisory services and technical support. Not only had inter-regional teams been visiting some of the areas, but regional teams from the Organization had assisted governments, and expert and consultant advice had been provided at country level. The intensification of practical efforts to find a solution to

the problem areas was reflected in over-all programme expenditure at country level rather than in research expenditure as such. He submitted, therefore, that there had been an increase both in emphasis on and assistance in solving that problem. There had been a reorientation of research activities for which, within the same resources, more funds had been allocated to dealing with some of the questions related to the problem areas.

He felt that the suggestion of the Spanish delegate that the word "serious" should be deleted from the first line of the last paragraph of the preamble could be accepted. Similarly, there would be no difficulty in accepting the suggestion of the Indian delegate that the words "bringing out the need for continued assistance from WHO during the maintenance phase of malaria eradication programmes" be added in at the end of paragraph 3. He asked the Romanian delegate if the Indian amendment covered the intention contained in his proposed amendment to that same paragraph.

Dr ALDEA (Romania) replied in the affirmative.

Professor CORRADETTI (Italy), referring to operative paragraph 3 of resolution WHA17.22, asked how programmes of basic and applied research could be intensified if no additional budgetary allocations were made.

The SECRETARY said that it had been brought to his attention that he had not mentioned all the amendments proposed. He regretted that he had not referred to the suggestion of the delegate of the Ivory Coast; he thought the delegate had merely supported the amendment made by the Romanian delegate. If, however, he wished to add to the resolution, his suggestion would be taken into account.

He had not referred to the second point raised by the delegate of Spain because it seemed to be covered by the first part of operative paragraph 5. He requested the delegate of Spain to submit a written amendment if he wanted the matter clarified further.

The CHAIRMAN requested the Secretary to read out the amendments proposed to resolution EB35.R17.

The SECRETARY said that the first amendment, which was suggested by the Secretariat, was that the words "Having considered the Report of the Director-General" be inserted between the words "the Eighteenth World Health Assembly" and the first paragraph of the preamble.

It was so agreed.

The SECRETARY said that the next amendment related to the last paragraph of the preamble. The delegate of Spain had proposed the deletion of the word "serious" in the first line.

It was so agreed.

The SECRETARY said that the Romanian delegate had suggested that the words "and particularly in the training of personnel" be added at the end of operative paragraph 2.

Dr AYE (Ivory Coast), referring to operative paragraph 2, pointed out that he had proposed that the word "material" in the second line should be deleted and that the words "and the provision of supplies" should be added at the end of the paragraph, after the words suggested by the Romanian delegate.

Professor CORRADETTI (Italy) pointed out that he had suggested the deletion of the third paragraph of the preamble.

Dr QUIRÓS SALINAS (Peru) suggested that a working party be set up to redraft the resolution, taking account of the amendments proposed.

The CHAIRMAN said that in his opinion there were not enough amendments to warrant the setting up of a working party. He suggested that the Secretariat prepare a fresh resolution, containing all the amendments, for circulation at the next meeting.

It was so agreed.

2. INTERNATIONAL QUARANTINE: Item 2.7 of the Agenda

Consideration of the Thirteenth Report of the Committee on International Quarantine:
Item 2.7.1 of the Agenda (Document A18/P&B/5)

The CHAIRMAN invited the Secretary to introduce the thirteenth report of the Committee on International Quarantine.

The SECRETARY said that item 2.7 was divided into three parts. The first part dealt with the report of the Committee on International Quarantine on all items except the proposed amendments to the international certificate of vaccination or revaccination against smallpox, which were dealt with under item 2.7.2. The third part of item 2.7 related to the question of extending the validity of the yellow fever vaccination certificate. He suggested that the discussion might be divided

according to those sub-items, and at the present stage he would introduce the report of the Committee on International Quarantine on all questions except the amendments to the international certificate of vaccination or revaccination against smallpox. The Committee's report (WHO/IQ/145.65) was attached to document A18/P&B/5.

In his report the Director-General had presented a draft resolution suggesting suitable wording for the amendments to the International Sanitary Regulations, to which he would refer.

The Committee on International Quarantine had met in Geneva from 22 to 26 February 1965, when it had considered the annual report of the Director-General on the functioning of the Regulations and their effect on international traffic. That report had been prepared in accordance with Article 13 of the International Sanitary Regulations. The Committee's opinions and recommendations were contained in the document before the meeting.

He drew the attention of the Committee on Programme and Budget to the following points in that report. In considering mosquito vectors of disease and aircraft disinsection, the Committee recommended that the International Sanitary Regulations be amended by the insertion of a new Article embodying the rights and obligations of States currently covered by paragraph 2 of Article XVII of the International Sanitary Convention for Aerial Navigation, 1944, modifying the International Sanitary Convention of 12 April 1933, opened for signature in Washington on 15 December 1944. The proposed new Article was to be numbered 102 and its provisions were to be found on pages 2 and 3 of the Director-General's report (document A18/P&B/5).

A guide to vessel sanitation had been presented to the Committee on International Quarantine. The Committee had found it compatible with the provisions of the Regulations, and was of the opinion that it contained useful recommendations for health administrations, port health authorities and others concerned. It was now being edited and would be published.

The Committee had been disturbed to learn that some international travellers of diplomatic status appeared to believe that the provisions of the International Sanitary Regulations were not applicable to them. The Committee had pointed out that such travellers were not exempt from application of the Regulations and had requested the Director-General to bring that to the notice of the Member States.

The Committee had reviewed cholera matters and considered results of studies on cholera vaccine in India, Pakistan and the Philippines, and the possible role of carriers. It had noted that most vaccines used were effective, although in a lower degree than would be considered satisfactory, and that the duration of effectiveness appeared to be no longer than six months. It had noted that studies to improve the effectiveness of cholera vaccine, including the duration of immunity, were under way. The Organization was continuing its support for such studies. The Committee was of the opinion that there was insufficient evidence to consider amending the cholera provisions of the regulations at that time.

The Committee had recommended the adoption of an amendment to Article 96 of the Regulations which would permit health authorities at the port of arrival to waive routine submission of the Maritime Declaration of Health in special circumstances. The amendment was explained on page 2 of the Director-General's report (document A18/P&B/5). The deletion of the word "further" in paragraph 2 of Article 97 of the International Sanitary Regulations was a consequential change.

If it agreed with the recommendations of the Committee on International Quarantine, the Committee on Programme and Budget would have to adopt the report of that committee, since it related to amendment of the Regulations. He submitted that the Committee on Programme and Budget should discuss those amendments, and decide whether it wished to adopt them. When all three sub-items had been considered, the Committee might adopt an over-all resolution incorporating all the amendments.

Mr CUENCO (Philippines) congratulated the International Quarantine Committee on its report, which was concise and accurate and fully covered the international problem of quarantinable diseases for the preceding year. His Government firmly supported the proposed amendment to Appendix 4 of the International Sanitary Regulations. At the previous Health Assembly it had been proposed that, for purposes of international travel, smallpox vaccinations should contain a reading of reactions six days after vaccination. Alternatively, it had been proposed that two insertions of lymph virus should be sufficient for travel. The purpose of those two proposals was to achieve better vaccination results. Subsequent studies had shown that the proposed procedures did not in any way improve the results of smallpox vaccination for international travel. He therefore commended the Director-General on the success of the studies of the Committee on International Quarantine, which had decided to withdraw those proposals.

At the last meeting of the Committee on International Quarantine it had been decided that the use of freeze-dried smallpox vaccine should be proposed to the Eighteenth World Health Assembly. Studies had proved that a higher percentage of "takes" was achieved if freeze-dried vaccines were used. In addition, freeze-dried vaccine was easier to transport and could be kept for long periods of time without

losing its potency. The Philippines had not yet begun production of freeze-dried smallpox vaccine but hoped to be able to do so in the very near future. It realized that the use of that vaccine would, to a large extent, reduce the danger of the international spread of smallpox.

The CHAIRMAN reminded delegates that the question of smallpox would be discussed under a separate subject item.

Dr HUDSON (United States of America) said that his delegation supported the amendments to Articles 73, 96 and 97 of the Regulations and agreed that there should be a new Article 102 to which, however, it suggested the following minor amendments:

- (1) In paragraph 1, second line, the words "arthropod-borne" should be substituted for the words "mosquito-borne".
- (2) The same substitution should be made in paragraph 2, first line, and the words "or arthropods" should be inserted after the words "live mosquitos" in the last line.
- (3) At the end of paragraph 3, the words appearing "which can be so disinsected" should be replaced by the words "or of the parts of the ship which, during the voyage, can be so disinsected".

The reason for those amendments was that the proposed new Article 102 would not provide States with such wise authority for disinsection of aircraft as the one which it would replace. The amendments proposed by his delegation would remedy that deficiency.

The WHO proposal used basic terms appearing in Articles 73 and 76 concerning the disinsection of aircraft. The changes outlined were consistent with the provisions in Articles 77 and 78 concerning a healthy ship or aircraft coming from an infected local area and with the provisions of the International Sanitary Convention for Aerial Navigation that was to be replaced.

Dr WEBB (Australia) said that, with regard to the amendments to the proposed new Article 102 suggested by the United States delegation, the Australian delegation had no objection regarding paragraph 1 but would make a qualification regarding the disinsection of aircraft.

He reserved the right to comment on other parts of the report at the appropriate time.

Dr OZAKI (Japan) welcomed the comprehensive report that had been submitted by the Director-General, which was the result of continuing efforts to improve international quarantine measures. His delegation supported the proposed amendments relating to disinsection of ships and aircraft but would reserve its views on the proposed amendments concerning the form of the International Certificate against Smallpox for a later stage of the discussion.

The Committee on International Quarantine had concluded (page 25 of the report) that there was insufficient evidence to consider amending the cholera provisions of the Regulations. His delegation would accept that conclusion at the present time. He wished to point out, however, that his Government was working in close co-operation with the Government of the Philippines and with WHO on a joint research programme on cholera problems and was convinced that, in the very near future, sufficient data would be forthcoming to justify amending the current provisions.

Mr CHEBELEU (Romania), referring to recommendations of the United Nations Economic and Social Council contained in document E/3590 dated April 1962, drew attention to the fact that vaccination requirements for international traffic could be found only in the publications of the World Health Organization; consequently tourists were not fully informed as to what they should do, and sometimes had difficulties when entering a country. Information on the sanitary regulations should be made more accessible to the public, and in that respect travel agencies could play an important part. Special health measures for tourists should be confined to epidemiological needs, which in turn should be analysed more frequently. In areas where insect-borne diseases were prevalent, disinsection measures should be organized in such a way as to create a safety zone at least around international airports.

One difficulty was that of meeting all demands for vaccination within the short time before the date of departure; the many diseases for which vaccination was required constituted a considerable problem for both vaccinator and traveller, which had been discussed by various expert committees. It would be useful if WHO could collect information on experience throughout the world and, with the help of a committee of experts, draw up the most suitable scheme of vaccinations for a minimum period of time, showing the variations for the different ports and airports.

Dr KALAJDŽIEV (Bulgaria) said that, owing to its geographical situation between Europe and Asia and its development as a tourist country, his country was studying very carefully the question of international quarantine. The necessary organization, including a sufficient number of medical institutions and staff, already existed and was carrying out sanitary control at the frontiers on travellers entering by air, sea, rail or other means of transport. International quarantine measures were being fully applied. With regard to international quarantine, his Government was guided

by the principle that quarantine should be effective; but, at the same time, that the formalities and resultant delays in the international import and export of goods should be reduced to a minimum.

The thirteenth report of the Committee on International Quarantine had been very carefully studied by his delegation, which supported the proposed amendments to Articles 73, 96, 97 and 105. It also considered that the proposed new Article 102, containing certain measures to control malaria, would help in ensuring more effective control, which would serve eventually to eradicate that disease. The proposed text was fully acceptable to his delegation; it considered, however, that other measures designed to prevent the import of malaria should also be studied within the framework of the International Sanitary Regulations.

Dr AMMUNDSEN (Denmark) said that her remarks would be confined to the proposed amendments to Article 96. Her Government was ready to facilitate formalities during short trips such as the one, mentioned in the report, between Denmark and Western Germany, which took only one hour. Her delegation would vote in favour of the amendments; she reserved her remarks on other parts of the report until a later stage.

Dr KENNEDY (New Zealand), referring to the proposed new Article 102, said that he had two comments to make. The first concerned paragraph 2, which was rather more restrictive on the health authority than was current practice under Article 105, paragraph 1(j) in one respect: under the new proposal it was not sufficient for the health authority not to be satisfied with the disinsection carried out, it must also find live mosquitos on board. In the proposed paragraph 2, therefore, he would suggest that the concluding phrase read "or it finds live mosquitos on board".

With regard to paragraph 3, there should be some qualification as to what was meant by "disinsection in flight". Did that refer to the techniques described on pages 5 and 6 of the report? If that was so, then it would be useful if some note to that effect could be incorporated in the appropriate place. Otherwise airlines might think that it referred to the classical aerosol disinsection while the aircraft was in flight.

Dr NOVGORODCEV (Union of Soviet Socialist Republics) said that, in the opinion of his delegation, the thirteenth report of the Committee on International Quarantine should be accepted. He would, however, make two comments: first, the Soviet Union was concerned about the increase of cholera cases in the last few years. Cholera had been eradicated from the Soviet Union since 1926. The high incidence of the disease in many countries, the increase in the number of carriers, ineffective vaccination measures, the development of international communications, and the spread of air traffic made it, however, a serious problem for his country. The Soviet Union was prepared to take part in the campaign against cholera at the international level; it would provide specialists, vaccines and bacteriophages and would also make available for international trials, with the assistance of its representatives, vaccines and bacteriophages produced in the Soviet Union.

Secondly, additional training for physicians dealing with quarantinable diseases was of particular importance for countries where such diseases had been eradicated. For that reason WHO should organize seminars for doctors from those countries, and from countries and territories where diseases still existed. First of all, seminars of that type should be held in countries where WHO considered that quarantine services were well organized.

Dr HABERNOLL (Federal Republic of Germany), referring to Article 96, said that international quarantine regulations required that the master of a ferry-boat between the Federal Republic of Germany and Denmark should supply a Maritime Declaration of Health. That was a mere formality, since the journey took only one hour and the delivery of such a certificate should not be required; his delegation was, therefore, in favour of the proposed amendment to Article 96.

Dr BORIES (Gabon) said that the proposed amendments to Articles 73, 96 and 97 of the International Sanitary Regulations did not call for any reservations on the part of the Gabon delegation.

His delegation felt somewhat concerned about the proposed new Article 102 extending to malaria measures that were already in effect against yellow fever, because it considered that some States would not be in a position to put such measures into effect. Disinsection of aircraft raised no problem, but the systematic disinsection just before the time of sailing of ships leaving ports that were free from Aedes aegypti would undoubtedly tax the health services of countries as yet unaffected by malaria. Countries concerned, particularly those on the African coast which had only small port health services, should carefully consider the proposed new Article 102 before undertaking any formal engagement. The subject was so important that several countries, including Gabon, might put forward reservations within the stipulated time-limit even though they fully recognized the need for such measures.

Apart from that comment on the substance, he supported the amendment proposed by the New Zealand delegate, namely that in paragraph 2 of Article 102, "or" should be substituted for "and" in the last line.