

Measles and Rubella Update WHO-Western Pacific Region UNICEF-East Asia & Pacific Region

13th Annual Meeting

The Measles & Rubella Initiative

9-10 September 2014

American Red Cross National Headquarters

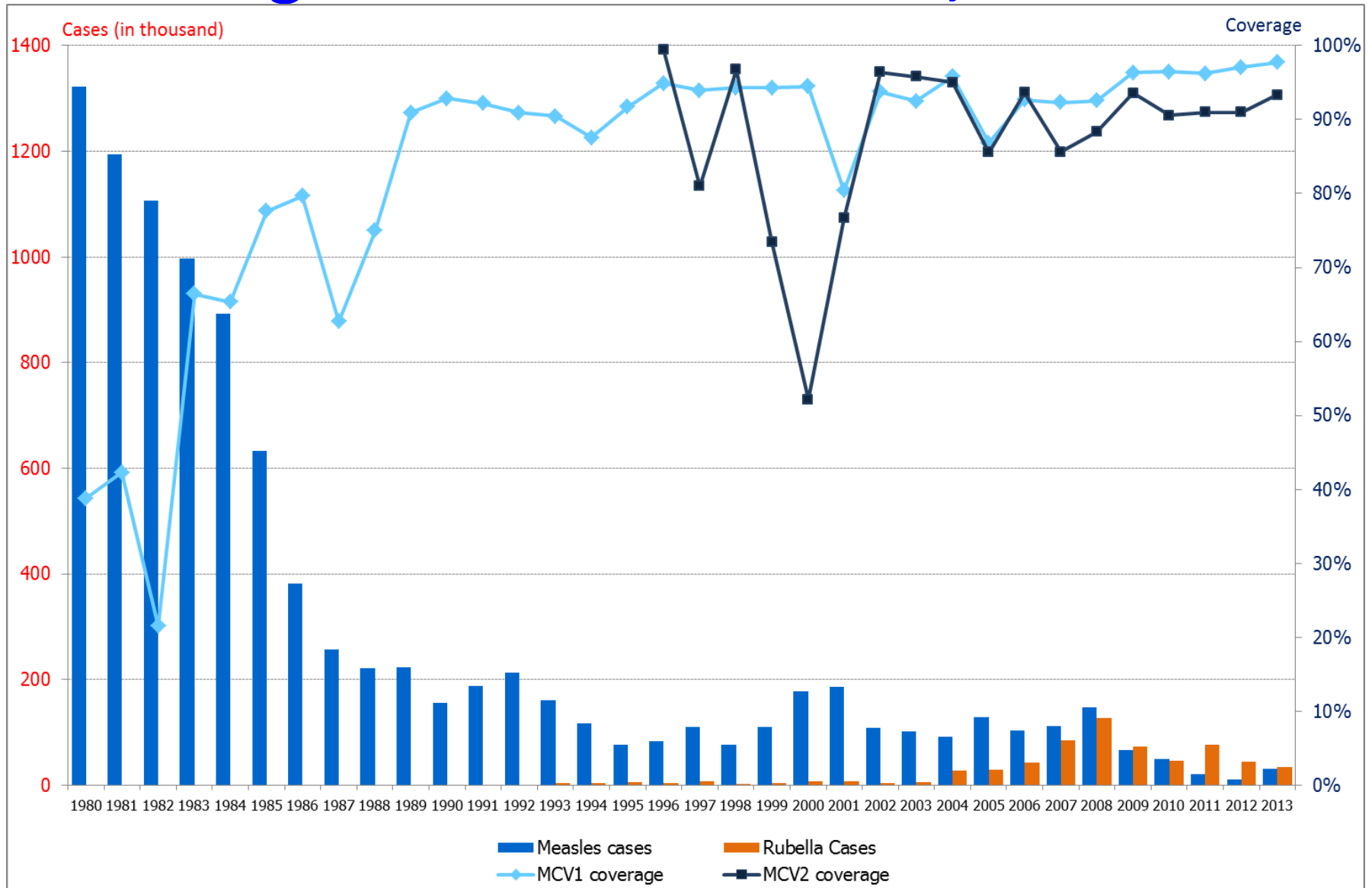
Washington, DC



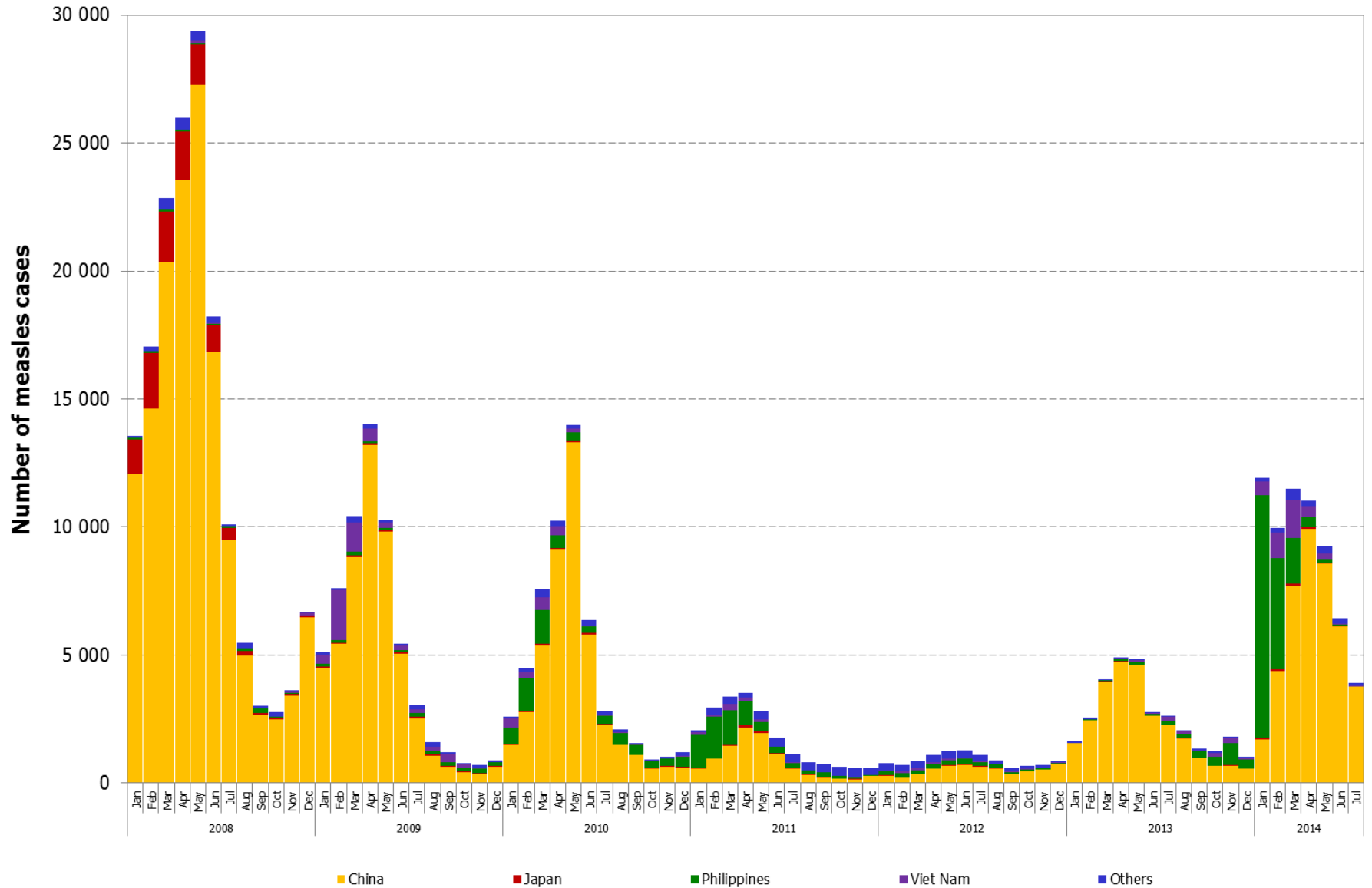
What we know:

- Trend for measles and rubella cases
- Trend for routine vaccination coverage
- Measles incidence
- Performance against standard indicators
- Progress towards verification

Measles and rubella reported cases and coverage of MCV1 and MCV2, 1980-2013



Measles Cases by Month and Year, WPR, 2008–2014



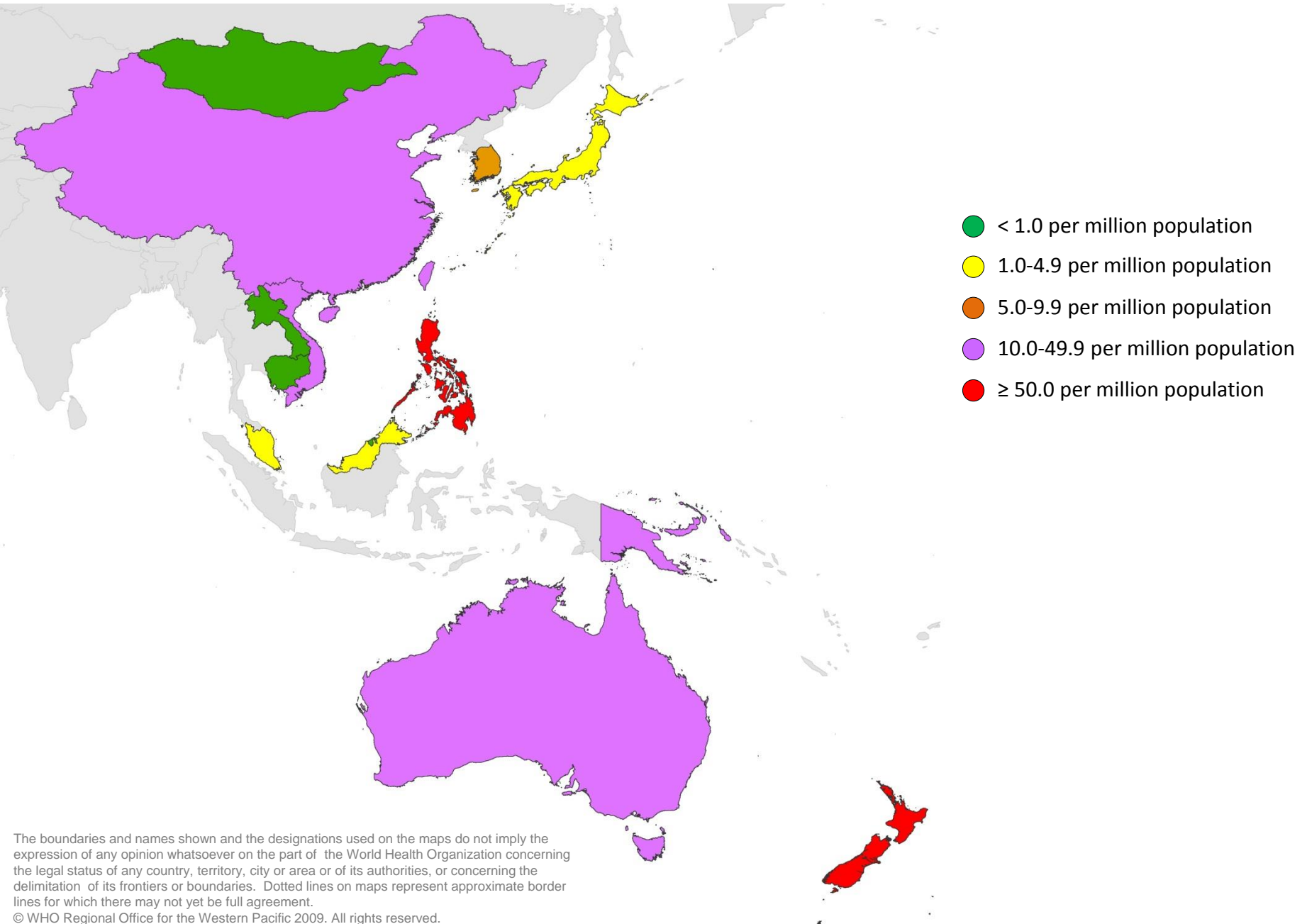
Indicators of progress towards measles elimination and rubella control, Western Pacific Region, 2008-2014¹

Category	Target	2010	2011	2012	2013	2014
Low measles incidence						
Incidence (% countries < 5 per million population)		59%	41%	59%	53%	29%
Incidence of confirmed measles per million population ²		27.0	11.7	5.9	17.6	60.0
High quality surveillance						
National reporting of discarded measles cases	> 2 per 100,000	1.7	2.8	2.4	3.5	5.0
% of 2 nd level admin units reporting ≥ 2/100 000 discarded measles cases	≥ 80%	28%	40%	35%	38%	44%
% of suspected cases with adequate blood specimens	≥ 80%	89%	78%	93%	92%	90%
High population immunity						
% countries with MCV1 ≥90%		66%	70%	76%	81%	
% countries with MCV1 ≥80% in all dist		46%	41%	63%	45%	

¹ Data as of 20 August 2014

² Only lab and epi linked cases from 2013 onwards

Measles incidence rate by country, WPR, Aug 2013-Jul 2014



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Summary of Progress Towards Measles Elimination

	Categories	Countries, Areas, Epidemiological Blocks
1	Verified in March 2014 as having achieved elimination	Australia, Macao (China), Mongolia, Republic of Korea (n=4)
2	May be ready for verification but additional information needed	Brunei Darussalam, Hong Kong (China), Japan, Singapore (n=4)
3	<36 months since achieving interruption of endemic measles transmission	Cambodia, New Zealand (n=2)
4	Periods with low/no documented transmission followed by outbreaks	Viet Nam, Lao People's Democratic Republic, Papua New Guinea, Pacific islands (n=4)
5	Endemic transmission	China, Malaysia, the Philippines (n=3)

What we want:

- WHO Regional Committee resolutions
- Planned and potential SIAs
- Measles second dose and rubella vaccine introductions
- Plans to strengthen routine immunization
- Plans to strengthen surveillance

Regional Measles and Rubella Goals

- 2003: Measles elimination to be used to strengthen routine immunization;
- 2005: By 2012, the Region should aim to eliminate measles;
- 2010: Reaffirms the 2012 measles elimination goal and calls to accelerate control of rubella;
- 2012: Reaffirms the commitment to eliminate measles and accelerate rubella control;
- 2014: Rubella elimination goal will be considered by the Regional Committee in October

Confirmed Measles Supplemental Immunization Campaigns, WPR, 2014-2020

Country	Vaccine	Target Age	Dates	Geographic Extent
Micronesia	MMR	12-59 m	Jun 2014	Chuuk, Kosrae, and Pohnpei States
Philippines	MR	9-59 m	Sept 2014	Nationwide
Solomon Islands	MR	9 m-30 y	Sept 2014	Nationwide
Viet Nam	MR	9 m-15 y	Oct 2014-Feb 2015	Nationwide
Lao PDR	MR	9 m-10 y	Nov 2014	Nationwide
Papua New Guinea	MR	9 m-15 y	Apr-Sept 2015	Nationwide

Possible Measles Supplemental Immunization Campaigns, WPR, 2014-2020

Date	Country	Target age	Vaccine	Comments
2015	6 U.S. affiliated Pacific islands	1-40 y	MMR	American Samoa, Guam, Mariana Islands, Marshall Islands, Micronesia, Palau
2015	Fiji, Samoa, Tuvalu	1-5 y	MR (MMR in Samoa)	
2017	Philippines	9m-5y	MR	Much wider age range needed
2017	Lao PDR	9m-5y	MR	Last SIA 2014; no MCV2
2017	Kiribati	1-5y	MR	Last SIA 2013; MCV1 & 2 ~90%
2017	Viet Nam	9m-3y	MR	Subnational in high risk districts such as North Mountains & Midlands, Red River Delta, South East, and Mekong Delta
2018	Cambodia, PNG, Solomon	9m-5y (1-5 y for Solomon)	MR	SIAs in 2013-2015
2019	Viet Nam	9m-5y	MR	SIA in 2014-2015

Needed SIAs

- Overdue
 - Vanuatu: Should immediately conduct wide age range MR catch up campaign;
- Endemic countries:
 - China: Province specific approach
 - Philippines: Region specific approach; must address immunity gaps among older children, adolescents, and young adults
 - Malaysia: Assess and address immunity gaps

Remaining measles second dose and rubella vaccine introductions, WPR

Country	Year of MSD introduction	Year of rubella introduction
Lao PDR	2017	2012
Papua New Guinea	2015	2015
Solomon Islands	2018 (?eligible; not in cMYP)	2012
Vanuatu	No plan	No plan
Viet Nam	2011	2015

2015 plans to strengthen routine immunization, WPRO/EAPRO

- Reviewing and refining, if feasible, a mechanism of calculating and reporting vaccination coverage denominator in priority countries (e.g. Philippines, Cambodia, PNG and Solomon Islands);
- Conducting routine catch-up after mapping/verifying underserved population groups/communities identified during the 2013-2014 MR SIAs;
- Reviewing and refining Reaching Every Community Strategy in context of lessons learned in different countries/areas and linking to HSS to implement the strategy;
- Providing intensive support to the Philippines to quickly improving MCV-2 coverage
- PNG as WHO/UNICEF joint equity country for 2015

2015 plans to strengthen surveillance, WPRO/EAPRO

- Surveillance training/reviews
 - Cambodia
 - Pacific islands
 - Viet Nam
- Inter-regional cross border activities
 - EURO
 - SEARO

What we need:

- Advocacy
 - As a national priority
 - To increase confidence in feasibility
 - Verification process playing a key role (support from MRI)
- Resources
 - MRI outbreak response funds—THANK YOU
 - Region-specific MR-SIAs in the Philippines and Viet Nam between 2015-2019 to close immunity gaps
 - Support for EPI officer in Vanuatu
 - Support for Pacific islands
- Technical assistance
 - Monitors for 2014-2015 SIAs
 - Risk assessment support
 - Outbreak response guidelines (great progress on the SIA and surveillance guidelines; SIA readiness assessment tools)

How do we get there?

- MCV1/MCV2 > 95%
 - Improved microplanning at district and health center level
 - Use combination MR or MMR vaccines for every dose;
 - Provide supplementary doses from 6 months for children at high risk
 - MCV2 in the second year of life
 - Use school entry as way to ensure all children have received two doses

How do we get there?

- SIAs
 - Sub-national plan and strategies in large countries, with preventive sub-national SIAs
 - Very wide age-range MR-SIA to fill immunity gaps
- Verification standard surveillance
 - Focus on subnational performance
- Increase government support
 - Annual update, discussion and resolutions in RCM in 2015-2000
- Increase partner support
 - Regional MRI partnership

On behalf of the children of the Western Pacific Region, . . .



Thank you