



Expanded Programme on Immunization

Summary Information Sheet

Immunization is one of our most powerful and cost effective weapons of disease prevention, yet remains tragically under-utilized. In the developing world today, six children die and another six become disabled with each passing minute because of the lack of availability of immunizations. Diseases, such as neonatal tetanus and poliomyelitis, which have been virtually eliminated in most of the developed world, continue to take a horrible toll in the developing world. Measles, which kills only some two of each 10 000 cases in the United States, kills two per 100 cases in the developing world, the figure rising to 10 or more in malnourished populations. Lacking immunization, almost all children will contract this disease. Whooping cough is another major killer, particularly in the child of less than six months of age, and diphtheria and tuberculosis can be added to the list as additional important problems. During the course of a year, 3 million children will die and another 3 million will become crippled, deaf, blind or mentally retarded because of these six vaccine-preventable diseases.

The high incidence and great severity of these diseases in the developing world is due to a vicious cycle of infection and malnutrition, with either factor capable of initiating the cycle. Children in developing countries often have their defence mechanisms compromised from the start by low birth weight and then are assailed by a series of stresses which include whooping cough, measles and weaning on top of repeated episodes of diarrhoea and malaria. Each event sets the child back in growth and development and, if the interval between events is too short, the child spirals down to death.

Immunization services are effective in preventing specific diseases which can precipitate malnutrition and, by permitting the child a longer recovery period between the events mentioned above, can prevent this downward spiral and contribute significantly to the overall reduction of childhood mortality.

By preventing some of these events, immunization services can help reverse this cycle, and their contribution to the prevention of infant and childhood disability and death can therefore extend beyond the prevention of the individual target diseases. But immunization services are themselves best delivered along with other services of high relevance to pregnant women and children in their first year of life, the persons who represent the prime concerns of immunization programmes in the developing world. These services include oral rehydration for diarrhoeal diseases, malaria treatment and prophylaxis, and counselling with respect to nutrition during pregnancy, breastfeeding, weaning, child spacing, clean water and sanitation. Not only do such services act in synergy to break the vicious cycle of infection and malnutrition, but each service helps promote the utilization of the other services by the population concerned, leading to greater efficacy and lowered cost per service delivered. Thus the effort to make immunization services available in the developing world should be viewed as an integral part of the effort to strengthen preventive and curative services available to mothers and children.

* Originally issued as document EPI/GEN/84.5

This document is not a formal publication of the World Health Organization (WHO), and all rights are reserved by the Organization. The document may, however, be freely reviewed, abstracted, reproduced or translated, in part or in whole, but not for sale or use in conjunction with commercial purposes.

The views expressed in documents by named authors are solely the responsibility of those authors.

Le document n'est pas une publication officielle de l'Organisation mondiale de la Santé (OMS) et tous les droits y afférents sont réservés par l'Organisation. S'il peut être commenté, résumé ou cité sans aucune restriction, il ne saurait cependant être reproduit ni traduit, partiellement ou en totalité, pour la vente ou à des fins commerciales.

Les opinions exprimées dans les documents par des auteurs cités nommément n'engagent que lesdits auteurs.

It is in recognition of the above that immunization has been cited as one of the essential elements of primary health care in the Declaration of Alma-Ata, and that WHO, with the help of UNICEF, UNDP, national donor agencies and voluntary agencies, is sponsoring the global Expanded Programme on Immunization whose goal is to provide immunizations for all children of the world by 1990. A good start has already been made, with most developing and developed countries implementing this programme, and with over 25 000 professional national and international staff trained in EPI management courses. It is estimated that in 1987 US\$ 500 million was invested in the programme, 70 % from the budgets of the developing countries themselves. But at an estimated cost of US\$ 5.00 to US\$ 15.00 per fully-immunized child, some US\$ 500 to US\$ 1 500 million will be required each year by the end of the decade to reach the 100 million children needing coverage in the developing world. So, although much has been done, much more is required.

The challenge is great, but the promise is even greater: for a cost amounting to only US\$ 0.20 to US\$ 0.60 per capita in the developing world, the six killer scourges of diphtheria, measles, poliomyelitis, tetanus, tuberculosis and whooping cough can be eliminated as public health problems of the young child. The elimination of these diseases will constitute a major contribution to the prevention of infant and childhood disability and death, and this, by demonstrating to parents that their children are likely to live, will diminish the incentives for having many children. Furthermore, by establishing vaccine delivery systems in the developing world which are capable of achieving high coverage of susceptible population with vaccines known to be safe and potent at the time of use, the stage is set for the introduction of other vaccines, particularly new vaccines now being developed through research, which will increase the overall effectiveness of immunization services. This is a challenge which must not be refused.

Further information concerning the Expanded Programme on Immunization can be obtained from individual Ministries of Health, and/or the WHO Programme Representative in the country concerned, and/or from the Headquarters Office in Geneva at the following address:

E. P. I.
World Health Organization
CH - 1211 Geneva 27
Switzerland
Telex: 27821 UNISANTE GENEVA
Telephone: 022 91 24 89