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CAMPAIGN AGAINST SMALLPOX

The Seventh World Health Assembly considered the work already done in the campaign against smallpox and requested the Director-General to report again to the Eighth World Health Assembly on progress made and results obtained.[1]

A letter was sent by the Director-General to all Member Governments drawing attention to resolution WHA7.5 and offering advice and assistance if required.[2] A similar letter was sent by the Regional Director, African Region, to Member States and local health authorities in that Region, following a discussion of the matter in the Regional Committee meeting in September 1954.

Replies indicate that most Member States do not desire any immediate practical assistance in the control of smallpox. A small number would welcome technical advice and assistance, mainly in connexion with the production of reliable dried vaccine. Only two requests were made for consultant services.

The requests received from Member States and the discussions at Regional Committees have been the basis on which plans and programmes have been developed in all regions in which smallpox remains a problem. In the Region of the Americas an extensive programme to eradicate smallpox began in 1953 and is being expanded and intensified. Emphasis has been placed on the production of potent dried vaccine. In the Western Pacific an extensive survey has been carried out to determine the reasons for the persistence of smallpox in some areas and the measures needed for its control. The implications resulting from the report on this survey are now under consideration. The survey was extended to cover the neighbouring parts of the South-East Asian Region which are geographically and

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[1] Resolution WHA7.5

[2] C.L.27.1954

epidemiologically related to the Western Pacific. In both the South-East Asian and the Eastern Mediterranean Regions assistance is being given in the production of reliable dried vaccines which are needed to overcome difficulties caused by deterioration of vaccine during transport in the high temperatures found in these regions. In the African Region surveys are planned and technical advice is being given to health authorities in a number of territories.

Laboratory tests of smallpox vaccines dried by divergent techniques, to assess the influence on their potency of varying periods of exposure to different temperatures, have been completed. Two vaccines which showed good stability under the laboratory testing are now being used for extensive field trials in humans. These are expected to continue for another two years. The early findings in these trials suggest that the degree of drying of smallpox vaccine may be of vital importance in determining its heat stability. Laboratory tests have been begun to investigate this possibility and to determine the techniques necessary to ensure stability. The final results, it is hoped, will enable WHO to advise on the preparation, testing, storage and use of dried smallpox vaccine.