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PROGRAMME

AND

BUDGET ESTIMATES

FOR

1950

BUDGET ESTIMATES FOR THE REGULAR OPERATING PROGRAMME AND THE SUPPLEMENTAL OPERATING PROGRAMME OF ADVISORY AND TECHNICAL SERVICES FOR THE FINANCIAL YEAR 1 JANUARY-31 DECEMBER 1950

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WORLD HEALTH ORGANIZATION

Palais des Nations, Geneva

April 1949

7.5.4 EPIDEMIOLOGICAL STUDIES

7.5.4.1 INTRODUCTION

On the basis of available statistics and medical literature, studies will be made on communicable diseases, at the request of the Executive Board of WHO, with a view to ascertaining whether international action can be useful in their control and what international action to take in that connexion by: (a) setting up an expert committee; (b) holding an international conference; (c) creating field study groups, or establishing advisory and demonstration services.

The communicable diseases which will be dealt with as a result of decisions by the first Health Assembly—in addition to those for which "projects" are already proposed—are the following :

(I) *Pestilential diseases*: smallpox and yellow fever;

(2) Parasitic diseases: filariasis (particularly onchocerciasis), trypanosomiasis, leishmaniasis, ankylostomiasis.

(3) Virus diseases: poliomyelitis, trachoma, rabies.

(4) Common communicable diseases of childhood: diphtheria, whooping cough, measles.

(5) Leprosy.

An outline of the importance of these diseases, of the work previously accomplished and of the programme for 1950 is given below.

7.5.4.2 PESTILENTIAL DISEASES

7.5.4.2.1 SMALLPOX

7.5.4.2.1.1 The Problem and its Significance

Apart from occasional importation, smallpox has been practically eliminated from countries of temperate climates where vaccination is extensively practised. It persists, however, in most tropical territories, in spite of prolonged efforts towards its eradication. There, fresh outbreaks result from migrations or any slackening in systematic revaccination. Such was the case in Africa and Asia during the war.

In 1944, no fewer than 216,000 deaths were ascribed to smallpox in British India alone.

7.5.4.2.1.2 Objectives

The long-term objective is to make the whole population of the world immune to smallpox by proper vaccination. This involves, in countries in which the disease appears as a remote danger, provision for vaccination at an age sufficiently early to reduce the risks of post-vaccinal encephalitis to negligible proportions and, in tropical endemic countries, improved administrative machinery for bringing vaccination to the most remote and inaccessible population groups and provision of a lymph preserving its activity under all environmental conditions (such as dry vaccine).

7.5.4.2.1.3 Work previously accomplished

Extensive enquiries made by the League of Nations and the Office International d'Hygiène Publique have shown that post-vaccinal encephalitis was not the result of any contamination of the vaccinal lymphs, but of latent infection in human beings, prior to vaccination.

In 1948 a Joint OIHP/WHO Study-Group on Smallpox reviewed existing knowledge, recommended one technique of vaccination and defined and interpreted the various forms of reaction following vaccination and revaccination.¹

The study-group recommended further studies and observations on :

the duration of immunity after vaccination and revaccination carried out at various ages, as measured by antibody titration and reactions after revaccination in countries free from smallpox, and as proved by actual protective efficacy in countries of smallpox endemicity;

the means of preparing an active but pure dry vaccine.

¹ Off. Rec. World Hlth Org. 11, 18

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7.5.4.2.1.4 Programme for 1950

The above studies are to be carried out in 1949 and continued in 1950.

It is intended that their results, and any new problem that the experts may find it desirable to elucidate, be discussed by an expert committee (or study-group) in 1950. It is intended to hold, immediately before or after the meeting of smallpox experts, a meeting of medical officers responsible for vaccination in tropical areas, to discuss the most effective means of obtaining universal means in undeveloped tormitories of obtaining universal vaccination in undeveloped territories.

It is intended also to assist interested health administrations in tropical countries in the experimental use and the preparation of dry vaccine.