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VERBATIM RECORDS OF PLENARY MEETINGS
SUMMARY RECORDS AND REPORTS OF COMMITTEES



WORLD HEALTH ORGANIZATION
GENEVA
1974

Communicable disease prevention and control (programme 5.1) (continued from the fourteenth meeting)

Dr VELIMIROVIC (Austria), Chairman of the working group established to draw up a revised resolution on the WHO expanded programme on immunization, introduced the following text:

The Twenty-seventh World Health Assembly,

Having considered the statement on immunization against the childhood diseases and the allocation of funds for an integrated programme on immunization contained in the proposed programme and budget estimates for 1975;

Recognizing the immense contribution immunization has made to the control of many of the common communicable diseases in the countries where it has been effectively applied;

Noting that in extensive regions of the world immunization is available for only a small proportion of children in the susceptible age-groups;

Aware of the potential for disease control when a well-planned and well-coordinated programme is instituted;

Reaffirming the importance of systematic immunization programmes in all countries; and

Expressing its satisfaction at the readiness of the World Health Organization to further promote measures to assist countries in extending their immunization programmes to cover the greatest possible percentage of the susceptible populations,

1. RECOMMENDS that Member States develop or maintain immunization and surveillance programmes against some or all of the following diseases: diphtheria, pertussis, tetanus, measles, poliomyelitis, tuberculosis, smallpox and others, where applicable, according to the epidemiological situation in their respective countries;

2. REQUESTS the Director-General

(a) to intensify at all levels of the Organization its activities pertaining to the development of immunization programmes, especially for the developing countries;

(b) to assist Member States (i) in developing suitable programmes by providing technical advice on the use of vaccines and (ii) in assuring the availability of good-quality vaccines at reasonable cost;

(c) to study the possibilities of providing from international sources and agencies an increased supply of vaccines, equipment and transport and developing local competence to produce vaccines at the national level;

(d) to continue to support research on the efficacy of vaccines and on as yet unsolved practical problems encountered in immunization procedures;

(e) to arrange seminars and other educational activities on the design and execution of programmes; and

3. FURTHER REQUESTS the Director-General

(a) to establish a special account under the Voluntary Fund for Health Promotion to be credited with the values of gifts intended for the expanded programme on immunization and to ensure that vaccines donated to the programme conform with the relevant WHO requirements;

(b) to report progress annually to the World Health Assembly.

¹ Transmitted to the Health Assembly in the Committee's fifth report and adopted as resolution WHA27.56.

He hoped that, in implementing the resolution, upon its adoption by the Health Assembly, the Director-General would remember that the principle involved had met with ready approval and support; only the drafting had given rise to difficulty. He recalled recent bitter criticism of WHO and PAHO which, it had been alleged, had done no more than the governments themselves for the control of diseases that could be controlled by mass vaccination. The draft resolution was therefore particularly timely. Criticism and differences of opinion were to be expected on such matters as side effects and complications, combined vaccination, use of multiple antigens, legal aspects, as well as on the very principle of vaccination, so that it was not surprising that certain emotional responses should have shown themselves in the Committee as they did in the daily professional life of the health administrator.

Even countries where communicable diseases were not the major problem that they were elsewhere could nevertheless spend up to 85% of their health budget on the prevention of those diseases. Whatever the uncertainties and however intangible the benefits, health administrators had to take decisions. The benefits of the decision they were now faced with were not intangible and, if they remembered that once disease had struck the time for protection had passed, the decision should be easy.

Decision: The draft resolution was approved.¹

¹ Transmitted to the Health Assembly in the Committee's fifth report and adopted as resolution WHA27.57.