

WORLD HEALTH ORGANIZATION ORGANISATION MONDIALE DE LA SANTÉ WELTGESUNDHEITSORGANISATION ВСЕМИРНАЯ ОРГАНИЗАЦИЯ ЗДРАВООХРАНЕНИЯ

> REGIONAL OFFICE FOR EUROPE BUREAU RÉGIONAL DE L'EUROPE REGIONALBÜRO FÜR EUROPA ЕВРОПЕЙСКОЕ РЕГИОНАЛЬНОЕ БЮРО

> > Head office:

UN City, Marmorvej 51, DK-2100 Copenhagen Ø, Denmark Tel.: +45 45 33 70 00; Fax: +45 45 33 70 01 Email: contact@euro.who.int Website: http://www.euro.who.int

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Honourable members of the Senate Health Commission,

The Global Vaccine Action Plan endorsed by the World Health Assembly in 2012 and the Global Measles and Rubella Strategic Plan 2012–2020 both include elimination of measles, rubella and congenital rubella syndrome as a main objective. In September 2016, the Region of the Americas was declared to have had eliminated measles, making it the first region in the world to achieve this milestone. Elimination of both measles and rubella is one of the top immunization priorities of the 53 Member States of the WHO Regional Office for Europe as enshrined in the European Vaccine Action Plan (EVAP) 2015 - 2020. Today measles is circulating in several countries in the European Region, including Italy, thereby threatening the progress toward the elimination target which the Member States have together worked so hard to achieve.

Date: 19 June 2017

The WHO European Region has made steady progress toward elimination of measles and rubella in recent years. Reported measles cases in the Region decreased from around 34,000 in 2010 to 5100 in 2016. Based on the data available to WHO, 5483 measles cases have been reported in the WHO European Region for the year 2017 so far, with Italy contributing 43% of the total. Vaccination coverage in Italy, for all vaccines, has shown a stagnating or in some areas even declining trend in the past few years.

The WHO Regional Office for Europe is concerned about the current situation and the spread of measles and other vaccine-preventable diseases within Italy. We are pleased to note that Italy is now making every effort to reverse this trend and join the other 37 Member States in the Region that have successfully interrupted transmission of this disease and prevent resurgence of other vaccinepreventable diseases. The WHO Regional Director for Europe, Dr Zsuzsanna Jakab, applauds the Ministry of Health in taking an active step towards assuring safer communities and learning environments by closing immunity gaps.

The 65th World Health Assembly resolution in 2012 on Global Vaccine Action Plan recognized immunization as one of the most cost-effective interventions in public health and urged countries to pay particular attention to improving performance of the Expanded Programme on Immunization according

contact@euro.who.int

Website: http://www.euro.who.int

Tei.: +45 45 33 70 00

Fax: +45 45 33 70 01

to the epidemiological situation in their respective countries. National immunization programmes and ministries of health are thus expected to develop policies and regulations related to vaccines and immunization according to the prevailing disease epidemiology.

Vaccination policies should be evidence-based and the outlined strategies to achieve high coverage should guide the national immunization programmes to ensure optimal credibility, governance and performance. Depending on the national context and the national vaccine-preventable disease epidemiology, vaccination policies and their enforcement vary considerably around the world. Here in Europe, a report published in 2011 showed that out of the 27 European Union Member States (plus Iceland and Norway) 15 countries did not have any mandatory vaccinations. The remaining 14 had at least one mandatory vaccination included in their programmes. Vaccination against polio was mandatory for both children and adults in 12 countries; diphtheria and tetanus vaccination in 11 countries and hepatitis B vaccination in 10 countries.

The WHO position paper on measles vaccination published in 2017 recommends that children should be screened for their measles vaccination history at the time of school entry, and those lacking evidence of receipt of two doses should be vaccinated. Such school-based vaccinations have proven to be an effective strategy in many countries for achieving high coverage and preventing outbreaks in schools. According to information collected by the WHO Regional Office for Europe in 2015, there were 12 countries in the Region that required proof on immunization at school entry. WHO does not collect information on the level of enforcement of this requirement.

The vast majority of people in the WHO European Region accept vaccination and demand it as their right to be protected against potentially serious diseases. The reasons some people are not vaccinated are very complex and context-specific. To mitigate the potentially negative impact of misinformation it is vitally important to provide accurate and evidence-based information on the benefits and safety of vaccines and immunization. This effort includes listening carefully to the concerns of parents and the public in general and working with communities and health professionals to raise awareness and better meet individuals' needs so that they can make informed choices for themselves and their children.

The WHO Regional Office for Europe applauds Italy's accelerated action to stop measles transmission and stands ready to offer all necessary technical support to help the country improve vaccination coverage rates and achieve disease control and elimination targets.

Kind regards,

Robb Butler

Programme Manager

Vaccine-preventable Diseases and Immunization programme