"Antivirals, combined with public health measures, could help buy time for vaccine development," said Esveld.

The consultation called for the establishment of a task force to explore the possibility of a global stockpile of antiviral drugs for use in the early phases of a pandemic. Since antirvirals are in short supply, particularly in developing countries, their use would have a minimal impact later in the pandemic.

All participants agreed on the need to strengthen both human and animal influenza surveillance systems including laboratory facilities, in close collaboration with the agricultural sector.

Whilst the annual occurrence of seasonal influenza epidemics represents a major health and economic burden for developed countries, little is known about the impact of influenza in developing countries. However, influenza outbreaks in the tropics where viral transmission normally continues year-round tend to have high attack and case-fatality rates. For example, during an outbreak in Madagascar in 2002, more than 27 000 cases were reported within three months resulting in 800 deaths despite rapid intervention.

"More information on the burden of disease could help improve political commitment to invest in influenza control and pandemic preparedness," said Esveld.

Slowing the spread of a pandemic and reducing its impact will require planning, preparation and global coordination. "When the next pandemic emerges, we will be able to respond properly only if we prepare properly," said LEE.

For the latest updates on the human and avian influenza situation, visit: http://www.who.int/csr/don/en/ ■

Substance addiction treatable, says new report

Substance dependence is as much a disorder of the brain as any other neurological or psychiatric disorder, says a new report launched by WHO on 18 March 2004. The report also says that recovery from substance dependence is possible.

"While we still do not know to what extent it is curable — given the long-term alterations in brain functioning that result from substance abuse — we do know that recovery from dependence is effective through a number of effective interventions," said Dr Catherine Le Galès-Camus, Assistant Director-General from WHO's department of Noncommunicable Diseases and Mental Health.

Neuroscience of Psychoactive Substance Use and Dependence, the first report of its kind by WHO and three years in the making, summarizes the latest scientific knowledge on the subject and concludes that substance dependence is determined not only by biological and genetic factors but also by psychosocial, cultural and environmental factors.

It also calls for more awareness of the complex nature of the problem — in particular, how genes interact with environmental factors to sustain psychoactive substance-using behaviours — in order to better inform the development of new diagnostic tools and behavioural and pharmacological treatments. It supports effective policies, prevention and treatment approaches combined with the development of community-based interventions that do not stigmatize patients.

"The health and social problems associated with use of and dependence on tobacco, alcohol and illicit substances require greater attention by the public health community and appropriate policy responses are needed to address these problems in different societies," said WHO Director-General, Dr LEE Jong-wook. "Many gaps remain to be filled, but this important report shows that we already know a great deal about the nature of these problems."

Around 205 million people use an illicit substance, according to the United Nations Office on Drugs and Crime, with prevalence higher among men. Cannabis is the most common, followed by amphetamines, cocaine and opioids. However, studies reporting on the global burden of disease re-emphasize that the main burden is due to licit rather than illicit substances. Tobacco and alchohol contributed 4.1% and 4.0%, respectively, to the burden of ill-health in 2000, while illicit substances contributed 0.8%.

The explosive growth in knowledge in neuroscience in recent decades justifies the production of this report, said Dr Benedetto Saraceno, Director of WHO's department of Mental Health and Substance Abuse. "The public health impact [of substance dependence] is enormous and requires a comprehensive approach to policy and programme development." ■

Governments must promote breastfeeding, says WHO and UNICEF

Breastfeeding is critical for child survival and governments must increase their commitment to its promotion and protection, say UNICEF and WHO in the *Global Strategy for Infant and Young Child Feeding*, launched on 23 March 2004.

"There is no better way than breastfeeding to make sure that a child gets the best start in life," said UNICEF Executive Director, Carol Bellamy. "The strategy is an invaluable roadmap for governments to create supportive environments where women can make informed choices about feeding their children."

The document, a product of over two years of global consultation, pinpoints the main problems relating to infant and young child feeding and identifies approaches for their solution.

Breastfeeding alone provides the ideal nourishment for infants for the first six months of life as it contains all the nutrients, antibodies, hormones, immune factors and antioxidants an infant needs to thrive.

"Exclusive breastfeeding in the first half-year of life and continued breastfeeding coupled with appropriate foods reduce the number of children under five who die from malnutrition," said WHO Director-General, Dr LEE Jong-wook.

The strategy calls for a dramatic increase in the number of infants exclusively breastfed. Currently, no more than 35% of infants worldwide are exclusively breastfed during even the first four months of life. Complementary feeding frequently begins either too early or too late and foods are often nutritionally inadequate or unsafe.

The strategy also addressed the risk of HIV transmission through breastfeeding — an absolute risk of between 5% and 20% globally. This needs to be balanced against the increased risk of mortality when infants are not breastfed.

The *Global Strategy for Infant and Young Child Feeding* is available at: http://www.who.int/nut/documents/gs_infant_feeding_text_eng.pdf ■