

Two countries re-infected with polio, as Nigerian state resumes vaccinations

Polio has spread from Nigeria to two more African countries, Guinea and Mali, three weeks after the Nigerian state of Kano which suspended immunization in August last year resumed polio vaccinations, WHO said.

WHO confirmed on 24 August that there were two new cases of children paralysed by polio in Mali and one in Guinea. Both countries had been polio-free for four years. WHO also confirmed three more cases of polio in Sudan's Dafur region, which is facing a severe humanitarian crisis, in addition to a case reported in June.

Nigeria's northern state of Kano became the last of several to resume vaccinations on 31 July, marking an important step towards global efforts to halt transmission of the virus by the end of 2004, WHO said.

But WHO renewed a recent warning, following the news of the six latest polio cases, that Africa could be on the brink of the largest polio epidemic in recent history if efforts are not stepped up to bring the spread of the disease under control.

These six latest cases bring the tally of African countries that have been re-infected with polio to 12 and the number of children paralysed to 94 — not including Niger and Nigeria — since Kano and several other northern Nigerian states suspended a polio immunization campaign in August last year.

Since leaders in some of Nigeria's northern Moslem states suspended immunization over unfounded concerns about the oral vaccine's safety, the number of cases in Nigeria has also shot up, with 476 by 24 August, compared with 107 a year before.

Over the last 12 months, the virus has spread to Benin, Botswana, Burkina Faso, Cameroon, Central African Republic, Chad, Côte d'Ivoire, Ghana and Togo, which had also been polio-free for several years.

Twenty-two countries in western central Africa are preparing to carry out synchronized immunization campaigns in October and November targeting 74 million children under five years old.

Since the global eradication campaign was launched in 1988, the polio virus has been reduced from 125 to six

countries where the virus is endemic, or present and circulating: Afghanistan, Egypt, India, Niger, Nigeria and Pakistan.

On 30 June, WHO advised international travellers to Nigeria that they should be up to date with their polio vaccinations.

WHO guidelines recommend a booster dose four to six years after primary series of vaccinations and that anyone intending to visit Nigeria should have completed a full course of polio vaccination as recommended by their national governments.

The eradication campaign is being led by WHO in cooperation with United Nations children's fund UNICEF, Rotary International and Centers for Disease Control and Prevention in Atlanta, the United States. ■

WHO Regional Director dismisses "bleak picture" of his work in Africa

The director of WHO's Regional Office for Africa, Ebrahim Samba, dismissed a scathing critique published in the *Lancet* on 7 August of his work.

Dr Samba, who has been regional director for 10 years, argued that despite widespread poverty and instability in the region his office had achieved unprecedented success.

In a response published on 11 August, Dr Samba rejected the *Lancet's* central charge that appointments of WHO country representatives and senior staff were "often paybacks for political or other favours", or that his successor would be selected on a political basis.

He said that to suggest as much was a misunderstanding of WHO's role and that as an international organization it was inevitably close to the 192 governments it represents.

"The *Lancet* painted a bleak picture of the work of WHO in the African Region, giving the impression that WHO is not recording any successes there. In fact, despite the challenges and ongoing instability, the opposite is true," Dr Samba said.

He gave polio eradication, as well as fighting leprosy and guinea worm, and helping to rebuild health systems in post-conflict Liberia and Sierra Leone as examples of those successes.

In an editorial (2004;364;9433) entitled: WHO's African regional office

must evolve or die, the *Lancet* called for more transparency from WHO and public debate over the nomination of a successor to Dr Samba, who retires in January.

The *Lancet* said WHO's African office had an "ineffective and self-serving central management" leaving staff "demoralized and unsupported", and that the root cause was mistakenly acting like a "political rather than technical agency".

The weekly journal said that despite having the world's highest disease burden and lowest level of economic development, and the constraints of "corruption, poor governance, political instability, and civil strife" in Africa, WHO's Regional Office for Africa could do better.

"Indeed many commentators are privately and scathingly critical of its composition and working practices", the *Lancet* said.

Dr Samba said that all staff were recruited "strictly on the basis of qualification, experience, proven track record and competence" and that a current review of WHO policy on selection, placement and rotation of WHO representatives would address some of the *Lancet's* concerns as well as other issues.

On 1 September, each of the five candidates for the post was due to be interviewed for an hour by the African Regional Committee which comprises health ministers from 46 countries that belong to the African Region. Then they will vote on the nomination.

The candidates are Dr Deogratias Barakamfitiye of Burundi, Dr Phetsile Kholekile Dlamini of Swaziland, Dr Evaristo Njelesani of Zambia, Dr Francis Gervase Omaswa of Uganda and Dr Luis Gomes Sambo of Angola. The result of the vote will be announced on 2 September.

Dr Samba, who comes from the Gambia, accepted the *Lancet's* concerns that some programmes were driven by donors. He said this was true of "some important programmes" and had been the subject of considerable internal discussion.

Dr Samba added that far from being "limited" extra-budgetary resources had grown from a combined budget of 90 million dollars for 1994 and 1995, when he first took office, to 350 million dollars for 2002 and 2003, which he viewed as a "vote of confidence".

The *Lancet* recommended that WHO should loosen political ties between its Regional Office for Africa