

Public health round-up

WHO's social media followers join World Health Day campaign

WHO's thousands of @WHO Twitter and Facebook followers were invited to mark World Health Day on 7 April by posting "selfies" on WHO's Facebook page or their own Twitter feeds. The self-portrait photographs show them holding up a WHO campaign leaflet, styled like a plane boarding pass, that explains what people can do to protect themselves from vector-borne diseases – the theme of this year's campaign.



Climate change tops international agenda

Delegates from WHO's Member States will discuss "the link between climate and health" this month at the World Health Assembly (WHA) – just three months before WHO hosts the first ever global conference on climate change and health.

Climate change is already having detrimental effects on "agriculture, human health, ecosystems on land and in the oceans, water supplies, and some people's livelihoods" all over the world, according to the latest report by the Intergovernmental Panel on Climate Change (IPCC), the United Nations (UN) group that assesses the science related to climate change.

The IPCC, in the second of three parts of its Fifth Assessment Report released on 31 March, found that the world was "ill prepared for risks from climate change".

In the general discussion at the Assembly from 19 to 24 May, delegates are expected to share their own national experiences and efforts to address the link between climate and health.

"Climate change is moving to the top of the international agenda, as countries prepare to negotiate a new international climate treaty through the UN Framework Convention on Climate Change next year," said Maria Neira, director of the Department of Public

Health, Social and Environmental Determinants of Health at WHO.

The WHO Conference on Health and Climate in Geneva is due to take place from 27–29 August. Health policy-makers and their colleagues working on environment and climate from many countries will join experts from WHO and other UN organizations, nongovernmental organizations, national development agencies and philanthropic foundations.

"We want to empower countries by providing them with information on the evidence and policy mechanisms linking climate change and health," said Diarmid Campbell-Lendrum, leader of the climate change and health team at WHO HQ, which is organizing the event with their counterparts in WHO's regions.

The main topics for discussion will be how to make health systems more resilient when it comes to climate change risks and how to improve health while also controlling climate pollutants.

The goal of the conference is to provide policy-relevant scientific evidence on the links between health and climate change, and summaries of effective policies and initiatives, as well as to develop recommendations on how the health community can collaborate more closely with their climate and sustainable-development colleagues.

It will be the first WHO conference that adheres to new UN guidance on "green" meetings, for example, with

minimal use of paper and maximum use of information technology, such as video-conferencing for some keynote speeches.

On 23 September the UN Assembly will hold a Climate Summit in New York, which is not part of the UN negotiation process itself, but that focuses on solutions to problems.

<http://www.who.int/globalchange>

First WHO hepatitis C treatment guidelines

WHO issued its first set of guidelines on the screening, care and treatment of hepatitis C last month and will be working with countries to introduce the guidelines as part of their national treatment programmes.

These guidelines advise countries on how they can increase the number of people screened for hepatitis C infection, mitigate liver damage in those already infected, and select and provide appropriate treatment for chronic hepatitis C infection.

The guidelines recommend a screening test for those considered at high risk of infection, followed by another test for those who screen positive, to establish whether they have chronic hepatitis C infection.

Since alcohol use can accelerate liver damage caused by hepatitis C, people with chronic hepatitis C infection are advised to have an alcohol assessment. Counselling is also recommended to help those with moderate-to-high alcohol intake to drink less. In addition, the guidelines provide advice for countries on how to select the most appropriate test to assess the degree of liver damage in those with chronic hepatitis C infection. The guidelines provide recommendations for all of the currently approved medicines for hepatitis C, including the new oral treatments.

The guidelines also summarize what policy-makers and health-care workers need to do to prevent the spread of hepatitis C, including infection control, harm reduction for persons who inject drugs, and other measures.

"The new guidance aims to help countries to improve treatment and care

Cover photo

This month marks 40 years of the Expanded Programme on Immunization and our cover shows a photograph of two community health workers travelling along the Atlantic estuary in Cross River State in Nigeria. They are delivering vaccines in cold-storage containers to remote villages that cannot be reached by road.



© GAVI/Adrian Brooks/Imagewise

for hepatitis and thereby reduce deaths from liver cancer and cirrhosis,” said Dr Stefan Wiktor, who leads WHO’s Global Hepatitis Programme.

Hepatitis C virus is most commonly transmitted through exposure to contaminated blood. People are most at risk of becoming infected when they have injections or other medical procedures in settings with poor infection control practices, or when they are exposed to contaminated injecting and skin piercing equipment, including through injecting drug use, tattooing and body piercing.

According to recent estimates, more than 185 million people globally have been infected with the hepatitis C virus while some 350 000 to 500 000 of these people die each year. One third of those with this chronic infection are expected to develop liver cirrhosis or hepatocellular carcinoma, the most common form of liver cancer, at some point in their lives.

<http://www.who.int/hiv/pub/hepatitis/hepatitis-c-guidelines>

Ebola virus disease in western Africa

WHO is providing support to Guinea in response to the first outbreak of Ebola virus disease in the country. As of 9 April, Guinea had reported 157 cases including 101 deaths.

Initially cases were tested and confirmed by the Pasteur Institute both in Lyon, France and in Dakar, Senegal, as well as the Bernhard Nocht Institute of Tropical Medicine in Hamburg, Germany, using a polymerase chain reaction test.

When the outbreak in Guinea continued, samples were tested by a team from the Pasteur Institute’s Dakar and Paris laboratories working in Conakry, the Guinean capital, and by staff at the European Union Mobile Laboratory in Guékédou prefecture in the south of the country.

About 515 people – both contacts of those who died of Ebola virus disease and people with a confirmed case of the disease – were under medical observation.

WHO, Guinea’s health ministry and partners, including Médecins Sans Frontières (MSF), were meeting on a daily basis last month to work on key aspects of the response: coordination, disease surveillance, clinical management, logistics and social mobilization.

Nongovernmental organization MSF set up Ebola treatment wards in Macenta and Guékédou, while also providing support to the hospital in Kissidougou province.

Other parts of western Africa were also affected. Neighbouring Liberia reported five confirmed cases – all fatal – and 21 suspected cases, five of which also proved fatal. Mali was awaiting test results for nine suspected cases.

The Ebola virus causes a severe acute viral illness often characterized by the sudden onset of fever, intense weakness, muscle pain, headache, diarrhoea and vomiting. Ebola virus disease outbreaks have a case fatality rate of up to 90%. As there is no treatment or vaccine available, prevention is the most effective way to stop the transmission.

By mid-April, WHO had deployed over 50 staff to support the countries that had been affected, including through the Global Outbreak Alert and Response Network (GOARN), a technical collaboration of institutions. WHO despatched more than 3.5 tons of infection control materials to Conakry on 30 March and distributed these to health facilities responding to the outbreak.

<http://www.who.int/csr/disease/ebola>

Billions lost to health-care fraud globally

The world is losing some US\$ 487 billion to health-care fraud and error annually according to a new report by BDO LLP, an accountancy and business advisory firm, in partnership with the Centre for Counter Fraud Studies at the University of Portsmouth in the United Kingdom.

The *Financial Cost of Health care Fraud 2014* found that global average losses in the health-care sector have, since 2008, increased by one quarter to 6.99% of the total estimated global health-care spending of US\$ 6.97 trillion.

Counter fraud exercises have shown that it is possible to significantly reduce such losses by 40% within 12 months, according to the report.

“Underlying research shows that most of these losses are high volume, low value – one off, large-scale frauds are unusual, but widespread low-value fraud is common,” writes Dr David Evans, director of WHO’s department of Health Systems Governance and Financing, in the report’s foreword.

“Fraud in any sector wastes scarce resources, but in respect of health-care it has a direct negative impact on human life – with people waiting longer for treatment, people not being able to afford the treatment that they need, and some people never receiving the quality of care that is possible,” he writes.

WHO cited fraud as one of the 10 leading causes of inefficiency in health-care in its 2010 World Health Report entitled, *Health systems financing: the path to universal coverage*.

<http://www.bdo.co.uk/services/forensic-accounting/fraud-and-financial-investigations/counter-fraud-services> ■

Looking ahead

19–24 May – Sixty-seventh World Health Assembly

31 May – World No Tobacco Day

14 June – World Blood Donor Day

28 July – World Hepatitis Day

27–29 August – WHO Conference on Health and Climate, Geneva

23 September – UN Climate Summit at the UN General Assembly, New York