RESOLUTION

CD43.R1

VACCINES AND IMMUNIZATION

THE 43rd DIRECTING COUNCIL,

Having considered the report of the Director on vaccines and immunization (Document CD43/7) and taking note of the progress being made by all countries in the control of vaccine-preventable diseases;

Acknowledging the commitment shown by all Member States to reaching the goal of stopping indigenous measles transmission in the Americas;

Cognizant of the implications brought about by the recent Sabin type 1 vaccine–derived poliomyelitis outbreak on the island of Hispaniola;

Considering the high activity in yellow fever transmission in the Region in the last two years in the enzootic areas, causing extensive outbreaks in several countries;

Cognizant that neonatal tetanus is now confined to less than 1% of all districts in the Americas and that the epidemiological characteristics of remaining cases indicate that there are infants of women lacking prenatal care who are unvaccinated and deliver predominantly at home; and

Recognizing the significant progress made by the Region of the Americas in sustainable vaccine introduction,
RESOLVES:

1. To urge Member States to:
   (a) keep a high-level commitment to maintaining polio eradication and achieving measles eradication by means of maintaining vaccination coverage at 95% or higher for polio and a measles-containing vaccine in each municipality and local community;
   (b) allocate sufficient resources to sustain national immunization programs and to undertake the advance planning for the provision of vaccines and to ensure safe injections by putting in place mechanisms to prevent the re-use of syringes and needles or by the use of auto-destruct syringes;
   (c) maintain high vaccination coverage with yellow fever vaccine in enzootic areas and all areas infected by Aedes aegypti and at risk of urban transmission, enforcing vaccination of travelers to enzootic areas, and implementing highly sensitive surveillance in enzootic areas;
   (d) strengthen efforts to reduce the number of rubella-susceptible women of childbearing age and prevent cases of congenital rubella syndrome (CRS) through the implementation of accelerated rubella vaccination strategies and enhanced surveillance for rubella and CRS;
   (e) target special vaccination services and surveillance efforts in those areas and population groups at highest risk within municipalities and underserved pockets that still report isolated neonatal tetanus cases;
   (f) support the development of an epidemiological infrastructure to generate information for evaluating the introduction and potential impact of new vaccines;
   (g) strengthen national regulatory authorities and national control laboratories to ensure that only vaccines of quality, either imported or locally produced and approved by the competent authorities, are used in national immunization programs and the private sector.

2. To request the Director to:
   (a) maintain a constant dialogue with vaccine suppliers to minimize the impact of the global vaccine shortages on the Region of the Americas;
(b) stress the importance that national governments prioritize resources for vaccines in their national budgets and promote the coordination of all partners that support national immunization programs to make maximum use of the flow of resources from the international level to complement national resources as appropriate;

c) promote the periodic national review and evaluation of national immunization programs to monitor progress and sustainability and adjust the strategies for the control and/or eradication of vaccine-preventable diseases;

d) promote greater cooperation among researchers for the development of vaccines and related products;

e) work in close collaboration with all partners of the Global Alliance for Vaccines and Immunization (GAVI) to maximize the support to the design, implementation, and evaluation of national immunization programs.

(Second meeting, 24 September 2001)