

Feasibility Assessment of Measles and Rubella Eradication

SAGE Working Group on Measles and Rubella

Meeting of the Strategic Advisory Group of Experts
on Immunization

October 8, 2019

Motive for the Report

At the Seventieth World Health Assembly held on May 31, 2017, the Director- General was requested to report through the Executive Board to the Seventy-third WHA in 2020 “on the epidemiological aspects and feasibility of, and potential resource requirements for, measles and rubella eradication, taking into account the assessment of the Strategic Advisory Group of Experts on immunization.”

World Health Organization Executive Board - January 2020
World Health Assembly - May 2020

When to Set an Eradication Goal?



Aims and Structure of the Report

1. Highlight the importance of measles and rubella as global health priorities
2. Review the current global measles and rubella situation
3. Summarize prior assessments of the feasibility of measles and rubella eradication
4. Assess the progress and challenges in achieving regional measles and rubella elimination
5. Assess additional considerations for measles and rubella eradication, including the results of modelling and economic analyses
6. Assess the implications of establishing a measles and rubella eradication goal and the process for setting an eradication target date
7. Propose a framework for determining benchmarks for setting a target date for measles and rubella eradication and how these benchmarks should be understood and used
8. Propose recommendations to SAGE

Principles

The status quo is unacceptable and progress toward achieving and sustaining country and Regional measles and rubella elimination goals must be accelerated.

Measles and rubella remain global public health priorities and require increased global, regional and national commitment.

Stronger support and more coordinated strategies within Regions and across transmission blocks must be developed to complement individual country efforts to achieve elimination.

Principles

Accelerated progress should be based on:

- strengthening immunization, primary healthcare, and surveillance systems
- supplemented by targeted vaccination campaigns and other programme innovations to reach unvaccinated and undervaccinated populations
- and not on rely on repeated emergency responses or non-selective and wide-age range supplementary immunization activities to make up for weak immunization services

Principles

Reaffirmation of country and Regional elimination goals, and the aspirational vision of a world without measles and rubella:

- could foster increased political and public will to facilitate country efforts to achieve elimination goals
- would be aligned with the strategic priorities of the IA2030
- could foster strategic programme development and innovation for the endgame
 - including contingency planning for expected and unexpected obstacles and promotion of new strategies and technologies such as rapid diagnostic tests and microarray patches.

Principles

A measles and rubella eradication target date should only be set when substantial and measurable progress has been made, and the strategies, resources and commitment are likely to be in place to interrupt the final transmission pathways.

The endgame would comprise a time-limited (e.g. five years) intensification of efforts with a realistic chance of achieving eradication by the target date.

Recommendation 1

Reaffirm the importance of country and Regional measles and rubella elimination goals and stress the need for all countries to accelerate progress toward achieving and sustaining measles and rubella elimination.

Measles and rubella virus transmission in any country is a threat to elimination in all countries. Efforts to achieve and maintain measles and rubella elimination should strengthen immunization and primary health care systems, advance the IA2030 strategic priorities, and serve as an important marker for progress towards achieving equity in access to vaccination.

Recommendation 2

SAGE concluded in November 2010 that measles can and should be eradicated, and that a goal for measles eradication should be established with a proposed target date based on measurable progress towards existing goals and targets.

Reaffirm the vision of a world without measles and rubella but that an eradication target date should only be established when substantial and measurable progress has been made toward achieving country and Regional elimination goals.

Recommendation 3

Establish a measles and rubella eradication advisory group, working within the future governance structures of IA2030, to convene a consultative process to identify new benchmarks that should be achieved before setting an eradication goal.

The purpose of the benchmarks would be to gauge when it is appropriate to set a measles and rubella eradication target date by providing metrics toward achieving the necessary conditions for a successful eradication endgame within a defined time period (e.g. five years).

Recommendation 4

The advisory group should monitor progress towards achieving these benchmarks and recommend adjustments to the benchmarks in light of changing epidemiological conditions, innovations, updated analyses and models, the public, political and financial landscape, and other contextual factors that impact the feasibility of eradication.

The advisory group should provide a report every three years on progress toward achieving the benchmarks.

Recommendation 5

A measles and rubella eradication target date should be considered when recommended by the advisory group based on progress toward achieving the benchmarks.

A strategic plan for the measles and rubella eradication endgame should be in place at the time of setting a goal, including estimates of the cost of implementing the plan.