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# Polio: Public Health Emergency of International Concern

## An update on the polio Public Health Emergency of International Concern (PHEIC)

The twenty-third meeting of the Emergency Committee (EC) under International Health Regulations (IHR) 2005 was convened on 11 December 2019 to review the data on wild polio virus (WPV) and circulating vaccine derived polio viruses (cVDPV) and progress made towards stopping transmission since the last report (6 September 2019) [1].

The number of cases of Wild Polio Virus (type 1) (WPV1) has increased globally with 113 cases reported in 2019 up to 11 December compared to 28 during the same period in 2018. In Pakistan transmission continues to be widespread [1]. In Afghanistan, the security situation remains challenging, with inaccessible and missed children remaining susceptible to infection, particularly in the Southern Region. The committee noted that there were recent instances of the international spread of viruses between these two countries [1].

There are serious concerns too about the multiple outbreaks of circulating vaccine derived polio virus (cVDPV), with seven new countries in Africa and parts of Asia reporting outbreaks since the last meeting [1].

The EC agreed that the risk of international spread of poliovirus continues to constitute a Public Health Emergency of International Concern (PHEIC). Temporary Recommendations (IHR 2005) to reduce the risk of international spread of poliovirus were extended for a further three months [1].

The statement from the EC, which provides the background to the emergency and detail on the current situation, is available here: [Statement of the Twenty-Third IHR Emergency Committee Regarding the International Spread of Poliovirus](#).

## IHR Temporary Recommendation Categories

**(Countries with a change in status since the last EC meeting are in bold. Please refer to Country Information pages for further information).**

States infected with WPV1, cVDPV1 or cVDPV3 with the potential risk of international spread; these countries have a certificate requirement for polio vaccination under IHR (2005):

- Afghanistan
- Pakistan
- Indonesia
- **Malaysia**
- Myanmar
- Nigeria
- **Philippines**

See recommendations on the individual [Country Information](#) pages for those who plan to travel to these countries.

States infected with cVDPV2, with potential or demonstrated risk of international spread:

- Angola\*
- Benin\*
- Cameroon\*
- CAR\*
- **Chad\***
- China\*
- DR Congo\*
- Ethiopia\*
- Ghana\*
- **Ivory Coast (Cote d'Ivoire)\***
- Mozambique\*
- Niger\*
- Nigeria
- Philippines
- **Somalia\***
- **Togo\***
- **Zambia\***

\*There is no certificate requirement under IHR (2005) for these countries. Travellers are, however, encouraged to carry proof of polio vaccination.

States no longer infected by WPV1 or cVDPV, but which remain vulnerable to re-infection by WPV or cVDPV:

- Kenya
- **Papua New Guinea**

## Other

In addition to the countries detailed in this report, the Global Polio Eradication Initiative highlight the following countries to be no longer polio-virus infected, but at high risk of outbreaks [2]:

- Equatorial Guinea
- Guinea
- **Iran**
- Iraq
- Laos
- Liberia
- Madagascar
- Sierra Leone
- South Sudan
- **Syria**
- Ukraine

For these countries, NaTHNaC recommends a booster dose of a polio-containing vaccine for those who have not received a dose within the previous 10 years travelling to these countries see our [Country Information](#) pages.

The polio status of countries is reviewed by WHO on a regular basis and polio vaccination recommendations are subject to change.

## Advice for travellers

You can become infected with the [polio](#) virus through contact with the infected human faeces and/or respiratory secretions of an infected person. The virus can also be found in food or water contaminated with infected faeces. You should practise strict [food, water and personal hygiene](#).

Wherever you are travelling to, you should make sure you have completed a primary vaccination course for polio according to the [UK schedule](#). Vaccines used in the UK schedule contain inactivated polio vaccine (IPV) and provide protection against types 1, 2 and 3 polioviruses. The bivalent oral polio vaccine (bOPV) used in some other countries, does not protect against type 2 poliovirus. You should check with your doctor or nurse that you are protected against all types of poliovirus.

You are encouraged to carry documentary evidence of your polio vaccinations. An International Certificate of Vaccination or Prophylaxis is required by some countries. See our [Country Information](#) pages for country specific information.

## Advice for health professionals

All travellers regardless of destination should be up to date with routine vaccination courses and boosters as [recommended in the UK](#). See our [Country Information](#) pages for country specific recommendations and certificate requirements.

For specific outbreak information, check our [Outbreak Surveillance](#). The polio status of countries is reviewed by WHO on a regular basis and polio vaccination recommendations are subject to change.

## Resources

- [Global Polio Eradication Initiative](#)
- [Global Polio Eradication Initiative. Vaccine-Derived Polioviruses](#)
- [Poliomyelitis factsheet](#)
- [Public Health England: Polio – guidance, data and analysis](#)
- [World Health Organization: Polio](#)
- [World Health Organization. Statement on the Twenty-second IHR Emergency Committee Regarding the International Spread of poliovirus. 16 September 2019](#)

## References

1. [World Health Organization. Statement on the Twenty-Third IHR Emergency Committee regarding the International Spread of Poliovirus 11 December 2019 \[Accessed 09 January 2020\]](#)
2. [Global Polio Eradication Initiative. Where we work. \[Accessed 9 January 2020\]](#)