

Efforts to combat pneumonia among 15 highburdened countries fall short of recommended targets

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A Pneumonia Report Card released today by the International Vaccine Access Center (IVAC) on behalf of the Global Coalition against Child Pneumonia reveals where urgent efforts are needed to reach target levels of coverage for the life-saving interventions that can prevent, protect against and treat pneumonia in children.

Pneumonia is the world's leading infectious killer of young children, taking the lives of nearly 1.6 million children under age five every year - more than AIDS, malaria and measles combined. The Pneumonia Report Card evaluates the pneumonia prevention, protection and treatment efforts of the 15 countries with the most child pneumonia deaths against the pneumonia intervention targets established in the Global Action Plan for the Prevention and Control of Pneumonia (GAPP), issued by WHO and UNICEF in 2009. According to GAPP, up to two-thirds of child pneumonia deaths could be prevented if at least 90 percent of children had access to a few simple, effective pneumonia interventions.

The 15 countries evaluated in the Report Card - including Afghanistan, Angola, Bangladesh, Burkina Faso, China, Democratic Republic of the Congo, Ethiopia, India, Indonesia, Kenya, Niger, Nigeria, Pakistan, Tanzania and Uganda - are responsible for nearly three-quarters of all pneumonia deaths. Children in these countries are anywhere from 17 to 400 times more likely to die of pneumonia than a child living in the United States.

The Report Card provides a total score for each country by evaluating data on seven key interventions identified by GAPP: Prevention measures, including the use of measles, pertussis, pneumococcal and Hib vaccines, respectively; protection measures, including rates of exclusive breastfeeding in the first six months of life; and

treatment, namely the rates of children with suspected pneumonia being taken to a health facility and of children with pneumonia receiving treatment with antibiotics. While the GAPP recommended that all countries reach 90 percent coverage on these interventions by 2015 in order to reach Millennium Development Goals targets for child survival, the Report Card finds that country scores range from a high of 61 percent to a low of 23 percent on these measures combined - all well below GAPP targets.

"For the first time ever, we have a report tracking global progress against pneumonia, the leading killer of children worldwide. I'm optimistic that the report will help focus efforts on improving coverage and saving millions of lives," said Orin Levine, Executive Director of the International Vaccine Access Center (IVAC) at the Johns Hopkins Bloomberg School of Public Health. "Many of the most affected countries plan to introduce new pneumonia vaccines, are expanding community-based case management and have ambitious plans for strengthening health systems. Going from planning to implementation requires funding and continued public attention to pneumonia. Our children deserve nothing less."

Safe and effective vaccines exist to provide protection against the primary causes of pneumonia deaths. The Report Card shows that while some pneumonia vaccines like measles and pertussis are already in widespread use, new pneumonia vaccines against Hib and pneumococcal infections have not yet been adopted in all countries. With support from the GAVI Alliance, nearly all of these countries are expected to increase coverage of existing vaccines, as well as introduce Hib and pneumococcal vaccines, in the next five years. For measles and pertussis vaccines, coverage is generally between



60-90 percent, which lends promise to the expectation that coverage can rapidly rise to these levels for the Hib and pneumococcal conjugate vaccines.

"Every 20 seconds, a child dies from pneumonia. That's 4,300 young lives lost every day, and nearly all of those are children from developing countries. We can prevent this tragedy," said Helen Evans, acting CEO of the GAVI Alliance. "Safe, effective vaccines exist that can save lives and also set up millions more children in the world's poorest countries for a healthy start to life. With the political will, we can fund those vaccines and other measures to turn the tide against pneumonia."

Generally, coverage levels for protection and treatment interventions - including breastfeeding and treatment with antibiotics - tend to be lower than coverage with immunizations, demonstrating that renewed efforts to raise these levels are urgently needed. Exclusive breastfeeding - the key intervention to protecting against pneumonia in the GAPP - is characterized by sub-optimal coverage levels ranging from

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