

Variant type 2 poliovirus in Gaza - Situation Report

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Situation Highlights



- On 16 July 2024, the Global Polio Laboratory Network (GPLN) notified the detection of six circulating variant poliovirus type 2 (cVDPV2) isolates in environmental samples from Deir al-Balah and Khan Younis in Gaza.
- Seven samples were collected and six of these tested positive for cVDPV2.
- Further genomic sequencing of these isolates by the US Centers for Disease Control and Prevention (CDC) in Atlanta indicates that these isolates have close genetic linkage with each other and are also related to the cVDPV2 that was circulating in Egypt during the second half of 2023 – which was last detected in Egypt in samples collected in December 2023.
- Based on the analysis of genetic changes in the isolates, the variant poliovirus could have been introduced in Gaza as early as September 2023.
- A socio-epidemiological field investigation and risk assessment conducted jointly by the Ministry of Health (MOH), WHO, UNRWA and UNICEF has been concluded. Assessment findings are guiding response planning and efforts, which include implementing two vaccination campaigns, strengthening surveillance for poliovirus in Gaza and strengthening routine immunization in the current complex situation in Gaza.
- Due to immediate acute flaccid paralysis (AFP) surveillance strengthening efforts put in place in Gaza, three cases of AFP were reported between 22-29 July 2024 by the MOH. The cases were promptly investigated and samples collected and sent to the laboratory in Jordan with support of WHO. The results are awaited.
- Currently, only 16 out of 36 hospitals are partially functional and 48 out of 107 primary health care facilities are operational. The impact on the health system, insecurity, inaccessibility, population displacement, and shortages of medical supplies have contributed to reduced immunization rates. Coupled with poor quality of water and destruction of sanitation, there is a heightened risk of vaccine-preventable diseases, including polio and other outbreaks.
- WHO considers there to be a high risk of cVDPV2 spread within Gaza, and internationally, in the absence of urgent response.

Response

- WHO and UNICEF are working closely with the MOH, and UNRWA to mobilize support for the response from within the region and partners in the Global Polio Eradication Initiative (GPEI).
- The WHO Director-General has approved the release of 1.23 million doses of novel oral polio vaccine type 2 (nOPV2) for use in Gaza as part of efforts to shut down transmission of the variant poliovirus in the current context in Gaza.
- In coordination with the MOH, WHO, UNRWA and UNICEF will support vaccination campaigns aiming to vaccinate over 640,500 children under ten years of age across Gaza.
- AFP surveillance has been operational in Gaza since 1995, supported by WHO. However, given the dire situation, it has not been functioning adequately, and environmental surveillance has been suspended since 7 October 2023. WHO, partners and the MOH have jointly developed a Polio Surveillance Recovery and Strengthening Plan, expected to be finalized soon.
- As part of early efforts, in coordination with MOH, WHO conducted a training of trainers (TOT) on 4 August 2024 to sensitize key health officials and health staff on the detection and immediate reporting of suspected AFP cases. Trained participants will cascade the AFP surveillance sensitization training for health workers in relevant health facilities across Gaza.
- WHO is also supporting the MOH to resume and bolster environmental surveillance. Planning is underway. WHO is coordinating delivery of sample collection kits to Gaza, following which environmental surveillance could commence as soon as possible.
- UNICEF, Coastal Municipalities Water Utility (CMWU), WHO and the MOH are planning field-level assessments of potential environmental surveillance sampling. The assessment will guide the use of epidemiologically relevant and operationally feasible environmental surveillance sites suitable for sewage sampling to detect poliovirus.
- In coordination with the MOH, WHO is developing microplans for the upcoming nOPV2 campaigns. Partners including UNICEF, UNRWA, and the Eastern Mediterranean Public Health Network (EMPHNET), which is supported by the US Centers for Disease Control and Prevention (CDC), are also supporting these efforts.
- WHO will support in managing an Emergency Operation Centre (EOC) in Gaza, aiming to provide close oversight on polio campaign operations to ensure a coordinated and timely response.



Surveillance

- The three AFP cases that were recently reported are linked to children in north Gaza, Deir al-Balah and Khan Younis (displaced from Rafah). Of them, two children aged 10 years, and 5 years are vaccinated against polio and have not missed any doses in the past. Another child below one year of age has not received any vaccination due disruption to routine immunization in Gaza, given the catastrophic situation.
- WHO has coordinated transportation of six stool samples from Gaza to the Jordan National Polio Laboratory (NPL) for testing.

Vaccine management

- Gaza has historically had a high level of vaccination coverage across the population. However, due to the impact of the conflict, routine immunization coverage has dropped from 99% in 2022 to less than 90% in first quarter of 2024, increasing the risk of vaccine-preventable diseases to children, including polio.
- At least two rounds of nOPV2 vaccination campaigns will be necessary to shut down transmission.
- UNICEF is coordinating the delivery of vaccine doses to Gaza for the upcoming vaccination campaign.
- In view of a subsequent update to the response plan, to cover children under ten years of age from an initial plan to cover children aged under eight years, another request for additional vaccines will be made later.
- MOH will issue vaccination certificates for every traveler out of Gaza, following IHR recommendations.

Risk Communication and Community Engagement (RCCE)

- An RCCE committee (UNICEF, WHO, MOH and UNRWA) has developed a comprehensive plan to engage and inform communities before and during the upcoming campaign. The plan will be finalized and rolled out soon.

Needs and Challenges

- Given the current complex regional situation, possible flight cancellations could delay delivery of the vaccine and cold chain equipment.
- The ongoing insecurity in Gaza will be a challenge in vaccine distribution to health facilities that might be inaccessible due to close proximity to hostilities. Insecurity could also hinder community outreach teams' safe movement and accessibility to target population, compromising the coverage of the vaccination campaign. Planning is underway to address these challenges to ensure effective delivery of vaccines across Gaza.
- Urgent need for interventions to improve water and sanitation in Gaza, including hygiene and provision of hygiene kits. Ensuring access to clean water, proper waste disposal, and promoting regular handwashing are essential to reducing the risk of poliovirus spread.
- All stakeholders must support an enabling environment to ensure effective delivery of the vaccination campaign and strengthening of AFP and environmental surveillance.
- Humanitarian pause or days of tranquility need to be in place to vaccinate children to mitigate the risk of transmission. In addition, safe and sustained access and protection of health workers is required for the preparation and execution of the polio campaign.
- Ultimately, a ceasefire is needed to ensure scale-up of routine immunization, including for polio and to restore the damaged health system in Gaza.

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