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Letter to the editor

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Sir,

Given the continuing global health emergency conditions due to COVID-19 and the need to pay attention to all public health matters, the WHO Director General stressed the Organization's efforts to continue providing services in various areas of primary health care, including

vaccination (1). According to the UNICEF Regional Director for the Middle East and North Africa, while the fight against COVID-19 continues the vaccination programme for children has been problematic in some countries for a variety of reasons. Thus, in the recent past, one in five children (about 10 million people) under the age of five and about 4.5 million children under the age of 15 have not received polio and measles vaccinations, respectively (2). In addition, with the global spread of COVID-19 leading to the disruption of routine vaccination efforts, 80 million children under the age of one are at risk from diseases such as diphtheria, measles and polio (3). Recent reports of new polio outbreaks in some areas and their consequences have added to such concerns (4).

Global and regional attention to COVID-19 has meant the desire of health workers to implement routine vaccination programmes during this period, have been problematic. Limited health human resources, especially in low and middle-income countries due to their involvement with COVID-19, is one of the factors reducing immunization coverage in these countries (5). Despite UNICEF's efforts, it appears that restrictions on the transportation of vaccines to these countries, including restrictions on movement and items related to border crossings and airspace, are among the factors that could have contributed to this delay. Other contributing factors are the closure of schools in many parts of the world and the decline in vaccination coverage normally associated with routine deliveries in schools (6). Moreover, logistical obstacles (7) and the constraints created in relation to financial resources (8) have aggravated this situation. On top of this, many parents also express fear of being exposed to COVID-19 when their children want to be vaccinated (9).

In the context of the implementation of primary health care programmes for vaccination coverage in the Eastern Mediterranean Region, it was decided in 1997 to attempt to eradicate measles by 2010. In 1981, the incidence of measles in the Region was 193 per 100 000, and by 2001 it was 6.8 per 100 000 (10). Although specific programmes and solutions were proposed to achieve this goal (such as efforts to cover over 95% of the first stage of the measles vaccine), this was not achieved by 2010 and was re-planned for 2015. Meanwhile, several major outbreaks occurred with a high incidence of the disease due to civil war and population displacement in countries such as Djibouti, Iraq, Somalia and South Sudan (11–14).

Vaccination coverage in these areas rose to 82% for the first dose of measles-containing vaccine (MCV1) in 2018 (compared to 79% in 2013), and MCV2 coverage rose from 59% in 2013 to 74% in 2018. The incidence of measles has also dropped from 33.5 per million in 2013 to 23.3 per million in 2019. Despite this relative improvement, other major outbreaks of measles have occurred during this period. For example, in 2018, the incidence of measles increased to 91.2 per million people (15).

What is emerging today in the wake of vaccination problems in the Eastern Mediterranean Region is the concern that a new wave of measles outbreaks could occur, which could unfortunately be due to declining MCV1 and MCV2 vaccination coverage. Inevitably, important parts of recent primary health care activity, even in countries with a good track record in terms of primary health care (16), have shifted to COVID-19. Added to this, internal and international conflicts in the Region have meant that the lack of primary health care in areas such as mass immunization following the COVID-19 pandemic has raised serious concerns about the outbreak of controlled diseases.

In summary, it is important to inform populations about the need to conscientiously complete the vaccination process in the context of the COVID-19 pandemic. In addition, the needs of governments in the Region must be met in order to facilitate access to required vaccines for this goal. Finally, the effective provision of health service staff, and assistance from international health organizations in this regard, would be necessary and welcome.

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