In 1989, the 42nd World Health Assembly called for elimination of neonatal tetanus by 1995. In 1990, the World Summit for Children listed neonatal tetanus elimination as one of its goals, and the goal was again endorsed by the 44th World Health Assembly in 1991.

Due to slow implementation of the recommended maternal and neonatal tetanus elimination strategies, the target date for maternal and neonatal tetanus elimination was postponed to 2000. In 2000, when the global elimination goal had still not been reached, the elimination of maternal tetanus was added to the goal with a 2005 target date.

To prevent maternal and neonatal tetanus, tetanus toxoid needs to be given to the mother before or during pregnancy, and clean delivery and cord care needs to be ensured. The immunized mother passes antitoxin via the placenta to her fetus, thereby preventing neonatal tetanus.

In 2010, 1007 neonatal tetanus case were reported from the Region. More than three quarters (76.3%) of the total tetanus cases were reported in Pakistan and Sudan; 508 and 260, respectively. The rest of the cases were reported in Afghanistan, Egypt, Islamic Republic of Iran, Iraq, Morocco, Somalia, Sudan, Saudi Arabia, Syrian Arab Republic and Yemen. WHO estimated that 18 511 deaths from tetanus occurred in 2008 in the Eastern Mediterranean Region.

Progress continues to be made in this area. Many of the high risk countries undertook supplemental immunization activities for TT in recent years. By February 2012, seven countries in the Region, namely Afghanistan, Iraq, Pakistan, South Sudan, Sudan, Somalia and Yemen had yet to reach maternal and neonatal tetanus elimination. It is expected that Iraq will achieve maternal and neonatal tetanus elimination status in 2012 after undergoing the maternal and neonatal tetanus elimination validation process planned for 2012.

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