Philippines

unicef

World Health Organization
Representative Office for the Philippines

Situation Report 15
Polio Outbreak

6 February 2020

# of samples confirmed	VDPV1	cVDPV1	iVDPV2	cVDPV2
Environmental		13		17
Human	1	1	1	13
Healthy children				5
Contacts				2

Vaccinating a missed child in Dana de Noche, Margosatubig, Zamboanga Sibugay WHO/G.Jennings

Highlights

- *Since 27 January 2020, no new confirmed human case.*
- *Currently, there are 13 cases of cVDPV2, one case with cVDPV1; one case with VDPV1; and one case with immunodeficiency-related VDPV type 2 (iVDPV2).*
- *Third round of Sabayang Patak Kontra Polio mOPV2 started in Mindanao on 20 January targeting 3,102,973 children under 5. In the first 14 days of the campaign, 3,057,875 children under 5 were vaccinated.*
- *NCR on 27 January started its first mOPV rounds, and targets 1,404,517 children under 5. In the first 4 days of the campaign, 1,126,979 children under 5 were vaccinated (80.2%). The second round is planned for 24 February-8 March 2020.*
- *The first poliovirus Outbreak Response Assessment (OBRA) is planned from 8-14 February.*
- *Current polio outbreak resulted from persistently low routine immunization coverage, poor sanitation, and hygiene.*
- ***Philippines is affected by both cVDPV1 and cVDPV2. cVDPV** is considered a public health emergency of international concern (PHEIC).*

Table 1: Details of recent, ongoing and upcoming vaccination campaigns

When	What	Where	Who	#
6-12 Jan 2020	bOPV	BaSulTa*/Zamboanga, Isabella/Lambayong	<10	*705,089*
17 Feb-1 Mar 2020	bOPV	BaSulTa/Zamboanga, Isabella/Lambayong	<10	739,640
	bOPV	Rest of Regions IX/XII/BARMM and rest of Mindanao	<5	3 million
23 Mar-4 Apr 2020	bOPV	BaSulTa/Zamboanga, Isabella/Lambayong	<10	739,640
	bOPV	Rest of Regions IX/XII/BARMM and rest of Mindanao	<5	3 million
20 Jan-2 Feb 2020	mOPV2	Mindanao	<5	*3,057,875*
27 Jan-7 Feb 2020	mOPV2	NCR	<5	1.4 million
24 Feb-8 Mar 2020	mOPV2	NCR	<5	1.4 million

* *Basilan, Sulu and Tawi-Tawi*

Current Situation

Table 2: Age and Gender per Type and Location of Polio Cases

Type	Age	Gender	Region
cVDPV2	3	F	BARMM
iVDPV2	5	M	IV-A
cVDPV2	4	F	BARMM
cVDPV2	3	F	XII
cVDPV2	2	F	BARMM
cVDPV2	2	M	XII
cVDPV2	4	F	XII
cVDPV2	2	M	BARMM
cVDPV1	9	F	BARMM
cVDPV2	<1	M	BARMM
cVDPV2	<½	M	BARMM
VDPV1	4	F	XII
cVDPV2	2	M	BARMM
cVDPV2	3	M	BARMM
cVDPV2	2	M	XII
cVDPV2	3	M	NCR

Circulating Vaccine Derived Polio Virus type 1 (cVDPV1)

So far only one cVDPV1 case confirmed in the Philippines, from the island province of Basilan. Three cVDPV1 cases from Sabah State, Malaysia were confirmed to be genetically linked to the Basilan case by the Victorian Infectious Diseases Reference Laboratory (VIDRL) in Australia.

All 13 cVDPV1 environmental samples found in Manila are all genetically linked.

The VDPV1 case from Lamboyang, Sultan Kudarat (Region XII) is not genetically linked to the Basilan and Malaysia cases and is therefore not categorised as circulating.

Circulating Vaccine Derived Polio Virus type 2 (cVDPV2)

Following the previous report dated 29 January with two - human cases - confirmed with cVDPV2: one 3-year old from Batasan Hills, Quezon City, and one 2-year old boy from Columbio, Sultan Kudarat (Region XII), there has been no new confirmed cases. The 17 confirmed environmental samples were found in NCR and Davao. The iVDPV case from Laguna is not linked to the cVDPV2 cases.

All samples were tested by the National Polio Laboratory at the Research Institute for Tropical Medicine (RITM), whereas sequencing and genetic analysis is done at the NIID in Japan and additional genetic characterization provided by the United States Centers for Disease Control and Prevention (CDC).

Figure 1: VDPV in Mindanao

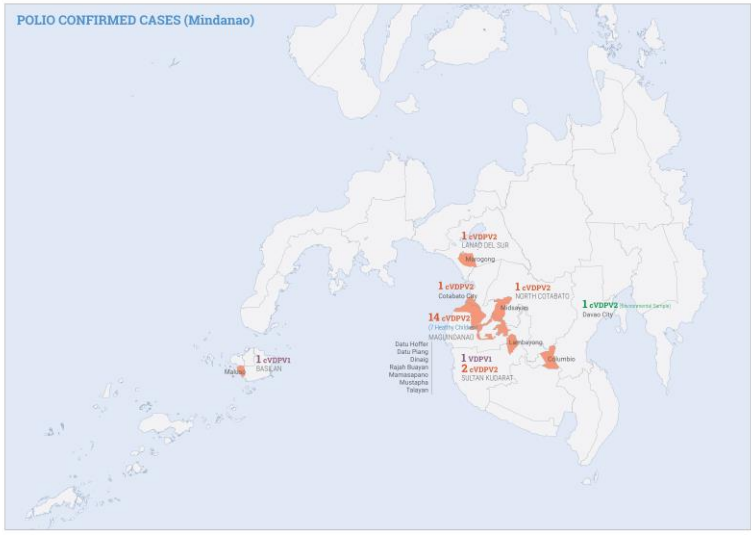


Figure 2: VDPV in NCR Mindanao

Maps courtesy of OCHA

Response

Overall risk		
National	Regional	Global
High	Moderate	Low

Risk assessment

The risk of further polio transmission continues to be assessed as high at the national level, with an increasing number of human cases and environmental samples testing positive for poliovirus type 1 and 2, because of chronically suboptimal immunisation coverage, sub-optimal performance of Acute Flaccid Paralysis (AFP) surveillance, poor sanitation and hygiene conditions.

With three cVDPV1 cases from Malaysia confirmed to be related to the one Philippine cVDPV1 case, the regional risk of potential spread across international borders remains moderate, especially considering the large number of Overseas Filipino Workers (OFW) and the ease of travel between islands without any form of control, especially by traders from Mindanao.

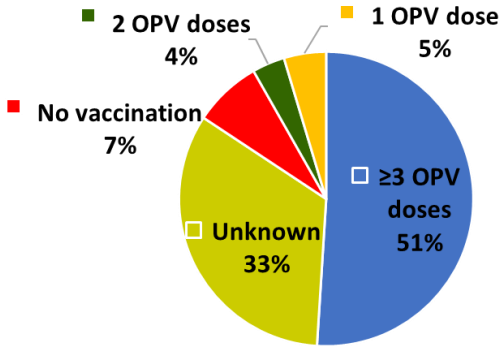
Coordination

DOH is coordinating the polio response through its Incident Command Structures (ICS) and Emergency Operation Centers (EOC) set up in each region, as well as the Mindanao and national levels. DOH issues daily bulletins with coverage data, Adverse Events Following Immunization (AEFI), AFP and environmental surveillance updates from the 7 regions.

- UNICEF mobilized 11 consultants on supply chain and vaccine management, immunization, communication for development (C4D) and information management.
- WHO mobilised 21 international and 7 national surge consultants who are supporting DOH with the implementation of the campaign. These includes the Stop Transmission of Polio (STOP) consultants. WHO is also supporting DOH with strengthening its ICS and EOCs at all levels.

Surveillance

Figure 3: OPV status of reported AFP cases
(N=949) 1 January-28 December 2019



The annualized Non-Polio AFP (NPAFP) rate from 1 January to 28 December 2019 is 1.52, with Regions IX and XI reaching the target of 3 as set for outbreak-affected regions. Adequacy of stool collection from 1 January to 28 December 2019 is 43%, with no region meeting the recommended 80%.

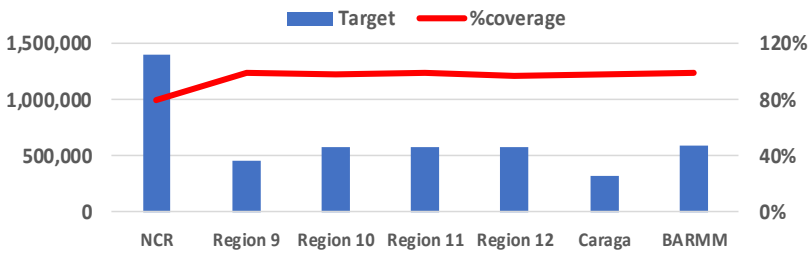
Of all AFP cases, 45% is female, and 55% is male, compared to 44% female and 56% male confirmed polio cases. Active enhanced surveillance has been extended beyond sentinel sites to include community surveillance, involving municipality volunteers.

Immunization response

The third round of mOPV2 campaign started in Mindanao on 20 January targeting 3,102,973 children under 5. Within the first 14 days of the campaign, 3,057,875 children under 5 were vaccinated (98.5%). (Figure 4).

In response to the increasing number of environmental samples testing positive for cVDPV2 in Manila, two rounds of vaccination campaigns using mOPV2 will be conducted in NCR. The first mOPV round targets 1,404,517 children under 5. In the first 4 days of the campaign, 1,126,979 children under 5 were vaccinated (80.2%). The second round is planned for 24 February-8 March 2020.

Figure 4: Coverage mOPV2 polio outbreak immunization campaign
20 January-02 February 2020



In response to first human 9-year old cVDPV1 case from the island province of Basilan, outbreak immunization was conducted in Zamboanga and Isabella (Region IX), Lambayong (Region XII), and Basilan, Sulu and Tawi-Tawi (BARMM) for 705,089 children under 10 (95.33% of the target 739,639) on 6-15 January 2020. Two more rounds are planned to target the same areas and number of children on 17 February-1 March and 23 March-4 April 2020.

Coverage data collected through ODK is available at https://philippines.onalabs.org.

Vaccine logistics

UNICEF consultants deployed in NCR and Mindanao continue to provide support on vaccine management and logistics. Two more consultants joined the team recently, one as a Polio Outbreak Manager and the other consultant is deployed to Region 12 to provide support on vaccine management and logistics. An intra-campaign monitoring activity were conducted in the field and issues/concerns with regards to proper utilization and retrieval of vaccines were discussed to the concerned health workers and supervisors for immediate action. Similarly, the same findings were shared and feedback to EOC meetings.

UNICEF has also assisted DoH in consolidation and submission of vaccine and logistics documents and preparation of materials for the OBRA visit on February 8-14, 2020. Assistance is extended to DoH in following up the required documents for the application of certificate of product registration for the incoming shipment of 324,000 doses of mOPV2 which is expected to arrive in the country on February 10, 2020.

Social mobilization and partners' engagement

The polio communication team at the national level has initiated preparations for the conduct of a training on interpersonal communication and social mobilization to support the upcoming polio immunization campaigns, particularly in NCR. The training, supported by UNICEF, is expected to build the capacity of health promotion officers and frontline workers in community engagement and addressing refusals.

In Davao City where there are pockets of refusals, specific actions are being done by CHD 11 and UNICEF communication for development consultant to unpack the issues and engage parents to have their children immunized.

Planning for the conduct of child-friendly activities for the upcoming polio immunization campaign in NCR is also ongoing. Organized by UNICEF, these activities are intended to complement social mobilization activities led by local government units. These will be implemented in areas with low coverage and high number of refusals.

Planning for the upcoming immunization campaigns is based on assessment reports and the qualitative research conducted in Mindanao and NCR. Some of the findings from the qualitative research were:

- What people know and recall about the campaign is only insofar as the campaign has covered: out-break of polio, can cause paralysis or death, that children below 5 y/o are most vulnerable & that it is contagious. Awareness varies depending on various factors including proximity to centers of infor-mation and who influences them in their decision making (mothers, private doc-tors/pediatricians)
- Fear factor, social pressure, positive relations between the communities & the local health workers, as well as minimal reported cases of adverse effects from the first round of the campaign, have been instrumental to caregivers' participation in the subsequent rounds of the campaign.
- Trauma from the dengue vaccine controversy remains
- Fear of overdose when taken in multiple doses
- Confusion about routine immunization and the current campaign
- Resistance of parents, especially from upper- and middle-income communities in HUCs, stem from the lack of recommendation or mediocre attitude of their private pediatricians towards the vac-cine being given in the campaign
- Questions from parents: How polio is acquired? Is it inherited? How many doses does a child need to be fully protected against polio? How about children 5 years old and above, how can they be pro-tected against polio?

Risk communication

Addressing vaccine hesitancy and adverse events following immunization (AEFI) remain an im-portant part of risk communication activities. Based on a qualitative study done on 16-22 December following the round of campaign, low awareness and low risk perception of polio, fear of adverse reaction, distrust of public health system following Dengvaxia controversy, are factors that needs to be addressed.

- Global Polio Eradication Initiative: http://polioeradication.org/where-we-work/philippines/
- DOH Advisory: Polio Vaccination tor Travelers Coming to the Philippines 10 October 2019 https://www.doh.gov.ph/advisories/Polio-Vaccination-for-Travelers-coming-to-the-Philippines
- DOH approved risk communication messages for different audiences available at https://poliofreeph.wixsite.com/poliofreeph

All relevant information including previous situation reports, can be found here:

- https://www.who.int/westernpacific/emergencies/polio-outbreak-in-the-philippines

Funding allocation and budget

(US$)	Budget		Allocation
	1st	*2nd*	
Government*	6,772,249	5.839,221	6,772,249
GPEI	6,422,063	9,189,726**	9,200,000
WHO	*3,176,858*	*802,063*	1,500,000
UNICEF	*3,245,205*	*1,101,962*	2,890,019
Other partners			
Philippine Red Cross			297,143***
IFRC			345,983****

** Government has pledged US$ 9 million*

*** Includes vaccine replenishment from routine stock*

*** Equivalent to PHP 15,000,000*

**** Equivalent to CHF 336,302*