



Driving progress towards rabies elimination:

Results of Gavi's Learning Agenda on rabies and new WHO position on rabies immunization

Meeting Report 1-3 May 2018 Kathmandu, Nepal



© World Health Organization 2019

Some rights reserved. This work is available under the Creative Commons Attribution-NonCommercial-ShareAlike 3.0 IGO licence (CC BY-NC-SA 3.0 IGO; https://creativecommons.org/licenses/by-nc-sa/3.0/igo).

Under the terms of this licence, you may copy, redistribute and adapt the work for non-commercial purposes, provided the work is appropriately cited, as indicated below. In any use of this work, there should be no suggestion that WHO endorses any specific organization, products or services. The use of the WHO logo is not permitted. If you adapt the work, then you must license your work under the same or equivalent Creative Commons licence. If you create a translation of this work, you should add the following disclaimer along with the suggested citation: "This translation was not created by the World Health Organization (WHO). WHO is not responsible for the content or accuracy of this translation. The original English edition shall be the binding and authentic edition".

Any mediation relating to disputes arising under the licence shall be conducted in accordance with the mediation rules of the World Intellectual Property Organization.

Suggested citation. Driving progress towards rabies elimination: Results of Gavi's Learning Agenda on rabies and new WHO position on rabies immunization, Meeting Report, 1-3 May 2018, Kathmandu, Nepal. Geneva: World Health Organization; 2019. Licence: CC BY-NC-SA 3.0 IGO.

Cataloguing-in-Publication (CIP) data. CIP data are available at http://apps.who.int/iris.

Sales, rights and licensing. To purchase WHO publications, see http://apps.who.int/bookorders. To submit requests for commercial use and queries on rights and licensing, see http://www.who.int/about/licensing.

Third-party materials. If you wish to reuse material from this work that is attributed to a third party, such as tables, figures or images, it is your responsibility to determine whether permission is needed for that reuse and to obtain permission from the copyright holder. The risk of claims resulting from infringement of any third-party-owned component in the work rests solely with the user.

General disclaimers. The designations employed and the presentation of the material in this publication do not imply the expression of any opinion whatsoever on the part of WHO concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement.

The mention of specific companies or of certain manufacturers' products does not imply that they are endorsed or recommended by WHO in preference to others of a similar nature that are not mentioned. Errors and omissions excepted, the names of proprietary products are distinguished by initial capital letters.

All reasonable precautions have been taken by WHO to verify the information contained in this publication. However, the published material is being distributed without warranty of any kind, either expressed or implied. The responsibility for the interpretation and use of the material lies with the reader. In no event shall WHO be liable for damages arising from its use.

CONTENTS

ACRONYMS & ABBREVIATIONS	V
SETTING THE SCENE	vi
SESSION 1: WORLD CAFÉ	1
SESSION 2: GLOBAL AND REGIONAL STRATEGIES	2
Global Strategic Plan to reach Zero by 30	2
Regional strategies to reach Zero by 30	2
SESSION 3: NATIONAL STRATEGIES FOR RABIES ELIMINATION	4
Animal and human health strategies in China	4
Recent changes to the national rabies strategy in Vietnam	4
National rabies elimination strategy in Kenya	5
Insights from the panel discussion	6
SESSION 4: THE NEW WHO POSITION ON RABIES IMMUNIZATION	7
From local innovation to policy change and large-scale implementation in India	9
National needs and feasibility for changing rabies immunization practices in Mongolia	9
The rabies situation and the way forward in Lao PDR	10
Insights from the panel discussion	11
SESSION 5: AWARENESS & HEALTH-SEEKING BEHAVIOUR	12
Bite prevention education	12
Sri Lanka: Community engagement, school education, a success story across the country?	12
Vietnam: PEP health seeking behaviour in pregnant women, role of traditional healers in rabies exposures	13
Pakistan: Toward a rabies free Karachi	
Insights from the panel discussion	
	15
Thailand: How did the implementation of OH change with progress of rabies control and elimination, how does OH work a decentralized level	
Introduction Chad and Cote d'Ivoire	
Chad: Setting up and scaling up OH collaboration	
Take home messages from Chad and Cote d'Ivoire	
Insights from the panel discussion	
SESSION 7: SURVEILLANCE AND DATA REPORTING	
Linking national rabies data to the global level	
Overcoming limited programme data in Nepal Programmatic data variability across settings in India	
Programmatic data variability across settings in India	เห

How national reporting systems support the rabies programme in Thailand	18
Insights from the panel discussion	19
SESSION 8: OPERATIONAL PROGRAMME DELIVERY	20
Global overview: Rabies vaccine and immunoglobulin use monitoring, reporting and fored	asting20
Rabies post-exposure vaccine and immunoglobulin supply chain in Kenya	20
Scaling up the network of PEP providing clinics in Vietnam	21
Insights from the panel discussion	22
SESSION 9: SETTING CONDITIONS FOR SUCCESS	23
Bhutan: Dealing with cross-border rabies transmission and outbreaks in dog population	าร23
Breakout session: ASEAN+	23
Breakout session: SAARC	24
Breakout session: AFRO	24
SUMMARY OF MEETING OUTCOMES	25
What we have learned	25
What works	25
What is needed	25
Next steps	25
ANNEX 1. LIST OF PARTICIPANTS	26
ANNEX 2. KEY RABIES DATA INDICATORS TO BE REPORTED TO WHO	30
Human-related data elements	30
Animal-related data elements	31

ACRONYMS & ABBREVIATIONS

ADG Assistant Director General
ARACON Asian Rabies Control Network

ASEAN Association of South-East Asian Nations
CDC Centers for Disease Control and Prevention

eRIG equine rabies immunoglobulin

FAO Food and Agriculture Association of the United Nations

GARC Global Alliance for Rabies Control

HRH Her Royal Highness

hRIG human rabies immunoglobulin IBCM integrated bite case management

ID intradermal

IDSP Integrated Disease Surveillance Programme

IM intramuscular

MoA Ministry of Agriculture MoH Ministry of Health

NCDC National Centre for Disease Control

NTD neglected tropical disease
NTV nerve tissue vaccine

OH One Health

OIE World Organisation for Animal Health
PARACON Pan-African Rabies Control Network

PEP post-exposure prophylaxis
RIG rabies immunoglobulin

SAARC South Asian Association for Regional Coordination
SAGE Strategic Advisory Group of Experts on Immunization

SARE Stepwise Approach to Rabies Elimination

SIRVERA Regional Rabies Surveillance System in the Americas

VIS Vaccine Investment Strategy
WHO World Health Organization

SETTING THE SCENE

"Rabies is entirely preventable, and should not take lives... It is an enemy we can defeat. Let's work together for a rabies-free world" - Dr Ren Minghui (Assistant Director General (ADG), Communicable Diseases, WHO)

Rabies is one of the oldest and most terrifying diseases known to man and is still responsible for almost 60 000 deaths every year. Up to 99% of human cases are transmitted through dog bites. Most human deaths occur in Africa and Asia; approximately 80% of cases occur in rural areas, and around 40% of cases occur in children under the age of 15. Although it is fatal, rabies is preventable through three pillars:

- Awareness of rabies disease, and what to do in case of a bite;
- Access to timely, affordable post-exposure prophylaxis (PEP) for people; and
- Mass dog vaccination to prevent disease at its source.

The tools for prevention exist: we need to work with countries to show value in interventions, build ownership, and reach communities most at risk. Since 2016, the Gavi Learning Agenda has provided an opportunity for countries to gather programmatic experiences and necessary data to support consideration of rabies vaccines in the 2018 Gavi Vaccine Investment Strategy (VIS). In May 2018, participating countries gathered to:

- (i) Disseminate new SAGE recommendations on human rabies immunization;
- (ii) Discuss results of studies under the Gavi Learning Agenda on rabies; and
- (iii) Determine needs and next steps to reach zero human deaths by 2030, worldwide "Zero by 30".

Her Royal Highness (HRH) Princess Chulabhorn Mahidol of the Kingdom of Thailand opened the meeting, highlighting the high-level commitment for rabies elimination in the Asia region. "It is my hope that the work that has been undertaken... [in Thailand] will benefit not only the people and animals at risk of rabies in Thailand, but also other countries who need to implement control and preventive measures" -HRH Princess Chulabhorn.

HRH was supported by Dr Ren Minghui (WHO ADG, Communicable Diseases) and local officials and dignitaries, including the Secretary of the Ministry of Health and Population Dr Pushpa Chaudhary, the Secretary of the Ministry of Livestock Development Mr Prakash Mathema and the Minister of State for Health and Population the Honourable Ms Padma Kumari Aryal. Drs Naveen Gupta (India) and Wenwu Yin (China), and Drs Amila Gunesekera (Sri Lanka) and Kinley Penjor (Bhutan) accepted their nomination as co-chairs and co-rapporteurs, respectively.

"Rabies is not a statistic: it's about people. It's about suffering, about humanity, about public service and public good... and trying to reach equity and access for all" – Dr Bernadette Abela-Ridder (WHO-NZD)

预览已结束,完整报告链接和二

https://www.yunbaogao.cn/report/index/report?rej