

世界街生大會 失雄 RESOLUTION OF THE WORLD HEALTH ASSEMBLY RÉSOLUTION DE L'ASSEMBLÉE MONDIALE DE LA SANTÉ РЕЗОЛЮЦИЯ ВСЕМИРНОЙ АССАМБЛЕЙ ЗДРАВООХРАНЕНИЯ RESOLUCION DE LA ASAMBLANTÉ

THIRTY-THIRD WORLD HEALTH ASSEMBLY



WHA33.4

14 May 1980

GLOBAL SMALLPOX ERADICATION

The Thirty-third World Health Assembly,

Having reviewed the report of the Global Commission for the Certification of Smallpox Eradication prepared in December 1979;

Mindful that smallpox was a most devastating disease, sweeping in epidemic form through many countries since earliest times, and leaving death, blindness and disfigurement in its wake; that despite the existence of a vaccine since the beginning of the last century, the disease had persisted in many parts of the world; and that only a decade ago the disease was rampant in Africa, Asia and South America;

Affirming that the commitment of the Health Assembly to the worldwide eradication of smallpox, first initiated, in accordance with resolution WHA11.54, in 1958, and intensified, in accordance with resolution WHA20.15, in 1967, has now been met;

Expressing appreciation of the efforts made by all nations to achieve global smallpox eradication, either through their national programmes or through the assistance which they provided, with the wholehearted support of multilateral, bilateral and voluntary agencies and with the constant encouragement of the world's news media;

1. ENDORSES the conclusions of the Global Commission that smallpox eradication has been achieved throughout the world, as proclaimed in resolution WHA33.3, and that there is no evidence that smallpox will return as an endemic disease;

2. FURTHER ENDORSES the recommendations of the Global Commission on the policy for the post-eradication era, annexed to this resolution;

3. REQUESTS Member States to cooperate fully in the implementation of the Commission's recommendations;

4. URGES, in particular, the immediate implementation of the recommendations on the discontinuation of smallpox vaccination except for investigators at special risk and the termination of the requirement for international certificates of vaccination against smallpox in Member States which have not already taken this measure; the continued epidemiological surveillance of suspected smallpox cases; the monitoring of safety measures in laboratories retaining variola virus and further reduction in the number of such laboratories; and the promotion of research on orthopoxviruses;

5. REQUESTS the Director-General to ensure the production, within a reasonable period of time, of appropriate publications describing smallpox and its eradication, in order to preserve the unique historical experience of eradication and thereby contribute to the development of other health programmes;

6. INVITES all Member States, as well as multilateral, bilateral and voluntary agencies, to ensure that the cooperation and support which has brought about the global eradication of smallpox is continued in other fields, and to invest the resources saved as a result of smallpox eradication in other priority health programmes, so as to maintain the struggle towards better health for all mankind;

7. CALLS ON the Director-General to promote and coordinate the implementation of the Global Commission's recommendations on policy for the post-eradication era, so that the world may remain permanently free of this disease and to report on this matter to future Health Assemblies as necessary. ANNEX

RECOMMENDATIONS OF THE GLOBAL COMMISSION FOR THE CERTIFICATION OF SMALLPOX ERADICATION REGARDING POLICY FOR THE POST-ERADICATION ERA

Vaccination policy

<u>Recommendation 1</u>. Smallpox vaccination should be discontinued in every country except for investigators at special risk.

<u>Recommendation 2</u>. An international certificate of vaccination against smallpox should no longer be required of any traveller.

Reserve stocks of vaccine

<u>Recommendation 3</u>. Sufficient freeze-dried smallpox vaccine to vaccinate 200 million people should be maintained by WHO in refrigerated depots in two countries, together with stocks of bifurcated needles.

Recommendation 4. The stored vaccine should be periodically tested for potency.

<u>Recommendation 5</u>. Seed lots of vaccinia virus suitable for the preparation of smallpox vaccine should be maintained in designated WHO collaborating centres.

<u>Recommendation 6</u>. National health authorities that have vaccine stocks should be asked to inform WHO of the amount of vaccine maintained.

Investigation of suspected smallpox cases

<u>Recommendation 7.</u> In order to maintain public confidence in the fact of global eradication, it is important that rumours of suspected smallpox, which can be expected to occur in many countries, should be thoroughly investigated. Information should be provided to WHO, if requested, so that it can be made available to the world community.

<u>Recommendation 8</u>. WHO should maintain an effective system to coordinate and participate in the investigation of suspected smallpox cases throughout the world. The international smallpox-rumour register should be maintained.

Laboratories retaining variola virus stocks

<u>Recommendation 9</u>. No more than four WHO collaborating centres should be approved as suitable to hold, and handle, stocks of variola virus. A collaborating centre would be approved only if it had adequate containment facilities. Each such centre should provide WHO annually with relevant information on its safety measures and should be inspected periodically by WHO.

<u>Recommendation 10</u>. Other laboratories should be asked to destroy any stocks of variola virus that they hold, or transfer them to an approved WHO collaborating centre.

Human monkeypox

<u>Recommendation 11</u>. In collaboration with country health services WHO should organize and assist a special surveillance programme on human monkeypox, its epidemiology, and its ecology in areas where it is known to have occurred. The programme should continue until 1985, when a further assessment of the situation should be made.

Laboratory investigations

<u>Recommendation 12</u>. WHO should continue to encourage and coordinate research on orthopoxviruses.

Recommendation 13. WHO should maintain the system of WHO collaborating centres for carrying out diagnostic work and research on orthopoxviruses.

<u>Recommendation 14</u>. Research workers who do not work in a WHO collaborating centre and who wish to carry out experiments with variola or whitepox virus that are approved by the appropriate WHO committee should be offered the use of the special facilities in a WHO collaborating centre.

<u>Recommendation 15</u>. Research on poxviruses other than variola or whitepox viruses should not be performed under circumstances where there is any possibility of cross-contamination with these two agents.

Documentation of the smallpox eradication programme

<u>Recommendation 16</u>. WHO should ensure that appropriate publications are produced describing smallpox and its eradication and the principles and methods that are applicable to other programmes.

<u>Recommendation 17</u>. All relevant scientific, operational and administrative data should be catalogued and retained for archival purposes in WHO headquarters and perhaps also in several centres interested in the history of medicine.

WHO headquarters staff

<u>Recommendation 18</u>. An interregional team consisting of not less than two epidemiologists with past experience in the smallpox eradication campaign, plus supporting staff, should be maintained at WHO headquarters until at least the end of 1985. At least one additional field officer should be assigned to cover areas where human monkeypox is under investigation.

Recommendation 19. WHO should set up a committee on orthopoxvirus infections.

Eleventh Plenary Meeting, 14 May 1980 A33/VR/11

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