

Status of Poliomyelitis After Pulse Polio Immunization

I read with interest the recent publication(1) on this subject. Since Kalawati Saran Childrens Hospital is a sentinel centre for surveillance of Poliomyelitis, covering the states of Delhi, UP, MP and HP, the figures are reliable and informative. It is heartening to note that the occurrence of poliomyelitis in these states has reduced to 369 cases in 1996 from 1062 cases in 1994. Does this figure apply to stool culture positive cases of polio or to all AFP cases? It is important to note that there are a significant number of cases in the months of December 1994, 1995 and 1996, disproving our belief that December month, like January, is a low transmission period for wild polio virus. Since the timing of Pulse Polio Immunization Programme (PIIP) in December and January is dependent on the assumption that these two months of a year constitute low transmission period, do we need to change the timing of PIIP to say, March-April each year, which have reported the lowest number of cases in 1994, 1995 and 1996? And also, these two months form the rain free period and off season for farmers.

The second point is that, though there is drastic decrease in the incidence of polio-

myelitis during the last three years, our aim of PIIP is not just the control of polio but its eradication from the country. So, we should not be complacent on this issue, but try harder to achieve eradication by attaining Zero-Polio status with better coverage during PIIP and by effective AFP surveillance.

The third point to be noted is that 50% of the poliomyelitis cases had received 2 doses of OPV (no scope for suspecting the potency of the vaccine supplied during National Immunization Days!). This shows that only PIIP cannot prevent polio in an individual child. The importance of routine immunisation should not be overlooked. The goals of the two programmes are clear cut. Routine immunization is for prevention of poliomyelitis in an individual child where as PIIP is for its eradication from the globe.

Ramesh Yelsangikar,
*Dhanavantari Hospital,
Station Bazaar,
Gulbarga 585 102,
Karnataka.*

REFERENCE

1. Ahuja B, Gupta VK, Arora S. Status of poliomyelitis-1996 after Pulse Polio Immunization Programme-Sentinal center experience. *Indian Pediatr* 1997; 34:1049-1050.

Reply

The figures mentioned in our article apply to the cases line listed every month, which means children who had onset of poliomyelitis during the year of reporting, and not stool culture positive cases. Now from 1997 onwards as required, we are reporting all cases of AFP. This is a very

good observation that minimum number of cases came during the months of February to April, a similar situation had been observed during the year 1997 also. If a similar observation exists all over the country, we may have to rethink regarding the timings of PIIP.

The other two points raised by Dr. Yelsangikar are self explanatory. We