

One Year without Polio

Continued from page 1

The task was made possible thanks to the joint backing of various collaborating agencies, at a cost of approximately 542 million dollars (US). The governments from the countries have provided around 430 million and the rest has come from the collaborating agencies that include the Agency for International Development from the Government of the United States (USAID), Rotary International, UNICEF, the Inter-American Development Bank (IDB) and the Canadian Public Health Agency (CPHA).

In addition to the national vaccination days, mass communication was used extensively to inform the public and mobilize the population. Also, a laboratory network was used for diagnostic support. PAHO has established an impressive surveillance system of acute flaccid paralysis that includes more than 20,000 health units that report cases on a weekly basis.

The challenge now is to maintain the impetus by increasing the vaccination coverage, consolidating the gains made in eradication and achieving control and elimination of other childhood diseases, PAHO has named a Poliomyelitis Eradication International Certification Commission that will verify the interruption of wild poliovirus transmission. It is estimated that the Commission will conclude its work in 1995. In the meantime, high levels of coverage and surveillance should be maintained and three years should pass by without confirmed cases of polio before the Region of the Americas can be certified as free of wild poliovirus. One of those three years has already passed; PAHO will continue the effort and write history!

Source: EPI newsletter, *Expanded Program on Immunization in the Americas*, Vol. XIV, No. 4, August, 1992.

Editor's Note: The last wild poliovirus detected in the Americas to date was on September 5, 1991, still over a year ago.

Polio Outbreak

In September 1992, the Netherlands reported an outbreak of polio among members of a religious group that refuses immunization services.

Since this religious group also exists throughout the Americas and its members frequently travel back and forth, countries of the Western Hemisphere are on alert for importations. Attempts to educate and immunize members of this religious group are being made. The 1979 outbreak in the United States and Canada clearly illustrated the risk for unvaccinated members

of religious groups who have direct or indirect contact with members of Dutch religious groups among whom poliovirus is circulating.

UPDATE. The outbreak in the Netherlands of poliomyelitis among unvaccinated persons who are members of religious groups that generally do not accept vaccination is continued (1). From September 17 through December 5, 1992, 54 cases of poliomyelitis were reported to the Netherlands' Office of the Chief Medical Officer of Health. All of the reported cases have occurred among unvaccinated (n=53) or inadequately vaccinated (n=1) persons belonging to a religious denomination that routinely does not accept vaccination. Patients range in age from <1 month to 56 years (mean age: 18.9 year). Of the 12 provinces in the Netherlands, seven have reported cases of poliomyelitis; the most severely affected provinces are South Holland and Gelderland.

The risk for acquiring poliomyelitis while in the Netherlands is considered small because of the excellent sanitation in the country and because transmission of the poliovirus has been limited primarily to unvaccinated religious groups. Nonetheless, the polio immunity of travelers to the Netherlands should be evaluated, and persons with inadequate protection should complete a primary vaccination series with three doses of poliovirus vaccine before departure, especially if extensive travel in the Netherlands or contact with persons in the affected religious groups is anticipated.

Source: *Morbidity and Mortality Weekly*, 1992; 41:775-8; 41:917-9.

Polio in the U.S.

No cases of suspected poliomyelitis have been reported in 1993. Four cases of suspected poliomyelitis have been reported in 1992; 6 of the 9 suspected cases with onset in 1991 were confirmed, and 5 of the 8 suspected cases with onset in 1990 were confirmed; all were vaccine associated.

THE U.S. VACCINE DISTRIBUTION DEBATE

Fewer than 60% of U.S. children are properly immunized by age two. Federal health objectives for the year 2,000 say 90% should be vaccinated.

Some blame rising vaccine costs and propose a national vaccine program with a single, government purchaser. It would reduce costs to private physicians. Currently, half the children who receive vaccination get them from private physicians who pay manufacturers' catalog prices, or get small discounts. The other half are vaccinated in public clinics that receive substantial discounts through a Centers for Disease

Control and Prevention grants program. (The oral polio price through the grant program is \$2.09 per dose; manufacturers' catalog price is \$9.91).

Physicians and child advocates argue that lower costs would improve access and boost immunization rates. The drug industry counters that forced discounts would curtail research and development and low costs do not always yield higher vaccination levels. The government is investigating.

Source: Extracted from *American Medical News*, January 18, 1993.

Accessible Worship

Elizabeth Reeves, Chicago, IL

Some people take going to church for granted. However, if you have a disability, this simple activity can be a luxury, sometimes impossible.

This was made very clear to me recently, as leader of the Northwestern University Polio Support Group. One of our members revealed her frustrations with this problem. She requires a scooter, just as I do, and explained that during the past year she has not been able to attend her family's church of 30 years. Her legs and arms have gotten progressively weaker, and she can no longer "struggle" up and down her church's many steps. She shared her sadness over losing her human-powered mobility, as well as her church experience which had been an important source of comfort in the past.

Listening to my friend I suddenly realized that I too had given up life in my protestant church — the place where my daughter was married, my granddaughter christened.

At first I wrote letters to my church, almost begging them to provide even the most minimal accessibility. The responses were always polite, assuring me that within the next five years changes would be made.

Sec. 307 of the Americans with Disabilities Act exempts "religious organizations or entities controlled by religious organizations, including places of worship," except for the employment provisions.

Following my dream to find accessible church services for myself and the support group, I found an answer until we can comfortably enjoy our own churches.

I discovered that Sunday Catholic mass was held at Chicago's North Pier entertainment complex. I also learned that the Rehabilitation Institute of Chicago (RIC) offers Interdenominational Sunday services.

Continued on page 8



LIFECARE®
International, Inc.

Geoffrey Waters

655 Aspen Ridge Drive ♦ Lafayette, CO 80026-9341
303/666-9234 ♦ FAX 303/666-0415

LIFECARE Europe GmbH, Downey Wright, RRT
Postfach 20, Hauptstrasse 60, D-8031 Seefeld 2,
Germany
49/8152-70728 ♦ FAX 49/8152-78199

U.S. DISTRICT OFFICES Phone: 800/669-9234

Atlanta, Kathy Westerman, CRRT
2220 Northwest Pkwy., #125
Marietta, GA 30067
Tel: 404/952-5559
FAX: 404/952-5899

Baltimore, Joe Golden, RRT
7048F Golden Ring Rd.
Baltimore, MD 21237
Tel: 410/574-2880
FAX: 410/391-4407

Boston
267 Boston Rd., #16
North Billerica, MA 01862
Tel: 508/670-5759
FAX: 508/670-5764

Chicago, Joy Mannella, RRT
318 St. Paul Blvd.
Carol Stream, IL 60188
Tel: 708/653-4477
FAX: 708/653-5265

Cleveland, Bob Miller, RRT
925-C Basset Rd.
Westlake, OH 44145
Tel: 216/892-1480
FAX: 216/892-3984

Denver, Scott St. John, RRT
4301 S. Federal Blvd, #114
Englewood, CO 80110
Tel: 303/797-8418
FAX: 303/730-7808

Detroit, Gary Kopczyk, RRT
11902-B Farmington Rd.
Livonia, MI 48150
Tel: 313/458-5170
FAX: 313/458-5175

Houston, Robert Garcia, RRT
8058 El Rio
Houston, TX 77054
Tel: 713/747-8006
FAX: 713/741-5448

Kansas City, Jeff Davis, RRT
108 N.W. Parkway
Riverside, MO 64150
Tel: 816/741-7667
FAX: 816/741-4853

Los Angeles, Mark Hicks, RRT
8210 Katella Ave., #B
Stanton, CA 90680
Tel: 714/895-1781
FAX: 714/897-6293

Minneapolis, Barb Platten, CRRT
1230 Eagan Industrial Rd., #175
Eagan, MN 55121
Tel: 612/452-5229
FAX: 612/452-5314

New Orleans,
Coy Marshall, CRRT
1525 River Oaks Rd. East, #E
Harahan, LA 70123
Tel: 504/733-1911
FAX: 504/736-9231

New York, Steve Savino, RRT
22 Distribution Blvd.
Edison, NJ 08817
Tel: 908/248-0863
FAX: 908/248-0866

Oakland, Jay Nash, RCP
4861 Sunrise Drive, #106
Martinez, CA 94553
Tel: 510/370-0500
FAX: 510/370-1575

Phoenix, Tony Rodela, RRT
3822 E. University Dr., #4
Phoenix, AZ 85304
Tel: 602/470-1288
FAX: 602/470-1292

San Diego, Kelly Smith, CRRT
8837 Production Ave.
San Diego, CA 92121
Tel: 619/549-7871
FAX: 619/549-3579

Seattle, Al Letterer, RRT
11915 124th Ave., N.E.
Kirkland, WA 98034
Tel: 206/823-5677
FAX: 206/823-8430

Tampa, Peg Warren, CRRT
5808 Breckenridge Pkwy., #F
Tampa, FL 33610
Tel: 813/621-0114
FAX: 816/623-6935