

# कोरोना महामारी में भी हम हैं तैयार दो बूंद पिलाएं हर पोलियो रविवार

**PULSE POLIO DAY**  
**17<sup>th</sup> January 2021**  
**POLIO RAVIVAR**

**IN VIEW OF ONGOING COVID-19 PANDEMIC, PRACTICES OF SOCIAL DISTANCING, HAND WASHING & RESPIRATORY HYGIENE WILL BE ENSURED DURING BOOTH AS WELL AS HOUSE TO HOUSE ACTIVITIES.**

**INTRODUCTORY NOTE ON PULSE POLIO PROGRAMME  
WITH PROPOSED NEWER INITIATIVES-AN APPRAISAL**

## **What is Polio Eradication & its Strategy**

Humans are the only reservoir / Carrier of Polio Virus called Wild Polio Virus. It has three types 1, 2, 3. It is type 2, which is the first one to get eliminated, followed by type 3 & then type 1 Polio Virus from the human environment. Elimination of type 2 virus generally indicates a good / Satisfactory Routine Immunization System / Coverage in an area. The country has already eliminated Type-2 virus sixteen years ago.

The Strategy for elimination / Eradication is by having an equally strong system of 4 components. These are: Strong Routine Immunization, well Conducted Pulse Polio Rounds, Selective /Focal Mop-up rounds & a Sensitive & Responsive AFP System.

1. **Delhi initiated Pulse Polio Programme in the year 1994** and set the ball rolling for the Eradication of Polio from our country. In 1994 and 1995, children up to 3 yrs of age were covered. From 1996-97 onwards all children up to 5 years of age are being covered under this program. **Since the year 2000-01, house to house component has been added on a full scale in the State as a part of intensification of Pulse Polio Programme with the aim of reaching each and every child in addition to booth strategy of Polio vaccination alone which existed in earlier year.** The state of Delhi is able to immunize around **22-24 lac children** in each phase of the Pulse Polio Immunization Programme. **Four (3) rounds of Intensified Pulse Polio Immunization during the year 2019 and three (03) round in year 2019 and three (03) round during 2020** had been conducted in the State with more than **7500 booths** created for conducting Booth Activity and about **9400 teams** (Each team comprising of 2 members) deployed for carrying out House to House Activity, during each round for vaccinating all children under five years of age. **More than 46 lac household** on an average are visited during each round to cover all eligible children which clearly reflects the mammothness of the entire exercise undertaken during each phase.

## **2. Achievements of Pulse Polio Programme;**

### **National level :**

**India has been declared polio free along with countries of South East Asian Region of WHO on 27<sup>th</sup> March 2014.**

- I. Polio free for >6 Years,
- II. 35000 in 1994 to 1 in 2011 (Last Polio Case – 13<sup>th</sup> Jan 2011)
- III. India Removed from List of Endemic Countries on 25<sup>th</sup> Feb, 2012

## **Delhi :**

- I. Polio free for >10 Years
- II. 500 Cases in 1994-95 to No Case since 2010 (Last case in June 2009)

### **3. Risks/Challenges to Polio Eradication Strategy:**

- a) International Importation of wild polio virus. Neighboring countries like Afghanistan, Pakistan and China has had a major outbreak of Wild Polio Virus in the recent past who pose a major threat to Polio Eradication.
- b) Complacency both for public & system.
- c) Gaps in AFP Surveillance or delays in detection of wild polio virus
- d) Delayed and or inadequate response to importation.
- e) Areas with low population immunity.
- f) Gaps in Routine Immunization & SIA especially in High Risk Areas.
- g) Various resident societies in Delhi are not allowing vaccinators to enter their premises and immunize children in these societies.

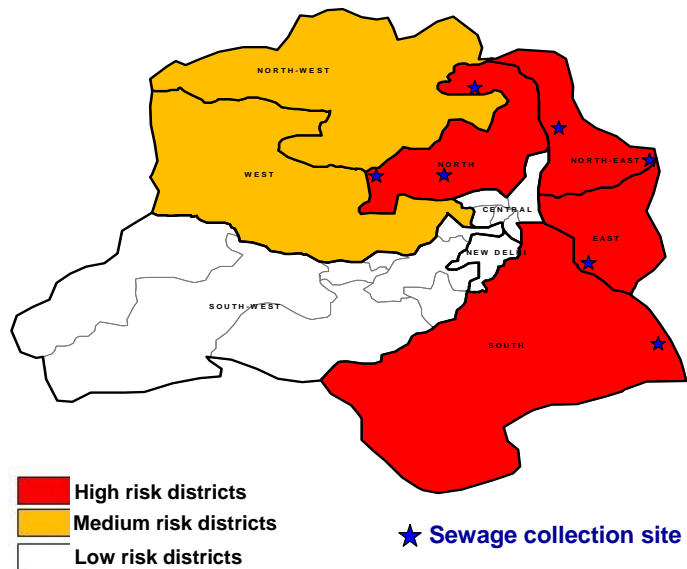
### **4. Current Program Priorities in Delhi**

- a) Intensify AFP Surveillance including environmental surveillance
- b) Maintain Intensified program in High Risk Areas
- c) Fully and consistently cover Migrant and Mobile populations
- d) Strengthening Routine Immunization especially in North East, North & South East district.
- e) Prepare for Emergency: rapid and effective response to any wild polio virus

### **5. Initiatives and Preparedness of State**

- **Emergency Preparedness and Response Group** has been constituted under chairmanship of Principal Secretary (Health and Family Welfare), Govt. of Delhi to respond rapidly to wild polio virus importations.
- In Delhi, **environmental sewage sampling** has been initiated in May, 2010 to isolate wild polio virus. Initially 5 sewage sites were identified and these sites were catering to the sewage predominantly from migratory communities. Sewage samples had shown both types of wild P1 & P3 polio virus till August 2010. **After August 2010, sewage samples have not shown any wild polio virus in the Delhi environment. Now the number of sites for taking sewage samples has been increased from 5 to 7.**

# Sewage sample collection sites: Delhi



- **Acute Flaccid Paralysis (AFP) Surveillance** is a key strategy or monitoring the progress of polio eradication and is a sensitive instrument for detecting potential polio virus infection. **AFP Surveillance** has become more sensitive and the number of AFP reporting sites have **increased from 184 in the year 2010 to 615 in the year 2016**. All major Govt. & Private hospitals are part of surveillance network.
- **Risk Analysis of the State** has been completed from Polio Program prospective and all high risk areas and migrant sites and a highly focused strategy is in place to cover all these children
- **Population in transit** covered in the State in each phase at Railway Stations, Moving Trains, ISBTs, border areas, Mc Donald's, Dominos Pizza outlets, IGI Airport, Millenium park, Japanese park and at Metro Stations, Religious congregations like Nirankari Sant Samagam, Urs Mela, Haj Pilgrimage etc. and places of Tourist Interest. Additional transit booths have been created at Akshardham Temple, Birla Mandir, Kalkaji Temple, Jhandewalan Temple.
- In view of massive construction activity as part of infrastructure development activities in the State, all **construction sites tracked and listed** to ensure these highly vulnerable children of these workers are covered in each & every polio phase.
- Each vaccine is also having a Vaccine Vial Monitor (VVM) which helps in identifying the loss of efficacy of vaccine due to heat.

**Frequently asked questions (FAQs) :**

- Q) How the wild Poliovirus is commonly transmitted from one child to another?**  
A) Wild Poliovirus is commonly transmitted from the infected child to the non vaccinated child. Faecal-oral transmission is most common especially where sanitation is poor.
- Q) Is the Polio vaccine safe when given in repeated doses?**  
A) Yes, the vaccine can be safely given in repeated doses.
- Q) Can Polio vaccine be given with other vaccines?**  
A) Polio vaccine may be given simultaneously with any other childhood immunization and there is no limit to the number of doses, which may be safely given.
- Q) Is it possible for me to check the quality of vaccine being given to my child?**  
A) The potency of vaccine can be gauged by looking at and interpreting the Vaccine Vial Monitor (VVM) that is affixed on all OPV vials. (See VVM). The label of the vaccine vial darkens if the potency of vaccine is not up to mark.
- Q) Should a child having high grade fever and loose motions for the last 3 days be given Polio drops on PPI days?**  
A) Yes, all children below 5 years of age even if sick or hospitalized should be given Polio drops on Pulse Polio days.
- Q) Can a newborn child be given Pulse Polio vaccine?**  
A) Yes, a newborn child can be given Pulse Polio vaccine very safely.
- Q) A child has received booster dose of DPT/OPV 2 days before the National Immunization day. Should the child be taken to Polio Kendra for Pulse Polio drops after 2 days?**  
A) Yes, the child should be taken to the Polio Kendra and given Polio drops. It is safe for the child and is necessary for Polio eradication.
- Q) Can routine Immunization with DPT, OPV, and Measles etc. be continued after giving the child Pulse Polio drops?**  
A) Yes, routine immunization should be continued even after the child has received Pulse Polio drops. Routine Immunization increases the child's defense against diseases like Tuberculosis, Diphtheria, Tetanus, Pertussis, Measles and Poliomyelitis. Both are complimentary to each other but not a substitute to one another.
- Q) Is this the last year of Pulse Polio Immunization?**  
A) No, this is not the last year of Pulse Polio Immunization. The rounds will continue in India, for at least the next few years even after the last case is seen to ensure that polio is really gone from India and till it is certified that polio has been eradicated from the whole world.

**Number of Polio Cases :**

<b>Year</b>	<b>India</b>	<b>Delhi</b>
1998	1934	47
1999	1126	73
2000	265	3
2001	268	3
2002	1600	24
2003	225	3
2004	134	2
2005	66	1
2006	676	7
2007	874	2
2008	559	5
2009	741	4
2010	42	0
<b>2011</b>	<b>01</b>	<b>0</b>
<b>2012</b>	<b>0</b>	<b>0</b>
<b>2013</b>	<b>0</b>	<b>0</b>
<b>2014</b>	<b>0</b>	<b>0</b>
<b>2015</b>	<b>0</b>	<b>0</b>
<b>2016</b>	<b>0</b>	<b>0</b>
<b>2017</b>	<b>0</b>	<b>0</b>
<b>2018</b>	<b>0</b>	<b>0</b>
<b>2019</b>	<b>0</b>	<b>0</b>
<b>2020</b>	<b>0</b>	<b>0</b>
<b>2021 till 18.01.2021</b>	<b>0</b>	<b>0</b>

**Q) How can I help in Polio eradication?**

**A)** You can be part of this program by participating in National Immunization Day activities and House-to-House Search and Immunization Program. You can motivate parents of young children to bring their children to the Polio Kendra's for vaccination. You can be a local guide or helper for the teams of workers who go from House to House to look for children who missed the Pulse Polio dose on the National Immunization days.

**RWA being the coordinator of all activities that are held in the residential locality can play an important role in ensuring the proper implementation of Pulse Polio Immunization Programme by:**

- 1. Motivating the parents of young children to bring them to the nearest Polio Kendra for vaccination.**
- 2. Educating the RWA members regarding the importance of immunizing their children with Pulse Polio drops on Pulse Polio Days.**
- 3. Actively publicizing the pulse polio programme by displaying banners, posters, and stickers, in your locality.**
- 4. Removing the doubts, misbelieve, taboos' of the members of the association by actively sharing the information provided to you regarding pulse polio programme.**
- 5. Opening of Polio Kendra in your locality if the existing pulse polio Kendra is at relatively inaccessible place.**
- 6. You can be a guide to the house-to-house teams visiting your locality by ensuring that they are able to cover the whole locality and immunize all the left out children.**

**The voluntary effort made by our citizens may be a vital factor in ensuring the success of the program. If we commit ourselves to reach every child, Polio will soon be history.**

**Why see a crippled child afflicted with poliovirus when we can root out the disease by simply giving the polio drops to all children under 5 years of age.**

## **MESSAGE TO PUBLIC**

Parents are requested to get their children less than five years of age protected with oral polio vaccine drops on the given dates from any polio booth near your house.

**31<sup>st</sup> January 2021**

- Even sick and newborn children are to be given **Polio drops**.
- These drops are in addition to routine immunization doses.
- These drops are completely safe and are of highest quality.
- Repeated doses provide additional protection.
- Routine polio vaccination at birth, 6weeks, 10 weeks and 14 weeks of age is also essential.
- Polio Eradication efforts will continue till polio is globally eradicated.

**Socially spirited individuals & organizations are invited to actively participate in this programme.**

For any clarification / query, please contact **Dr. Anil Jagrat, Officer on Special Duty(OSD), Pulse Polio Programme, Pulse Polio cell, Directorate of family welfare, Govt. of Delhi, 7<sup>th</sup> Floor, C-Wing, Vikas Bhawan-2, Near Metcalf House, Upper Bela Road, Civil Lines, Delhi –110054. Tel: 23813210. Email; poliocelldelhi1@gmail.com**