Nearly every adult today knows that a child with rash, red eyes, a cough and fever may most likely have measles. They would even suggest “the child has measles” when presenting such a child to a clinician. If however a 20 year old presented with similar symptoms, not many would suspect measles, or will they? That is how rare the disease is in adults, easily recognizable in the most affected age groups, is effectively preventable and can therefore be eliminated.

Measles is a highly infectious respiratory viral disease easily prevented by vaccination, even though it is still an important cause of morbidity and mortality globally (1). Like many countries, measles vaccination remains the mainstay of the agenda for control and eliminate of measles in Zambia. The vaccine has been used in Zambia since the inception of the expanded programme on immunisation (EPI) in 1975 with very high efficacy and a good safety record. As a result, in 1982 the first attempt at global eradication was made(2). Measles had been long been earmarked for addition to the very short list of eradicated diseases with smallpox being the only disease eradicated. A more realistic elimination goals, however, is being pursued globally. Unlike control and elimination, eradication refers to attaining zero new transmission of a particular disease by bringing to zero the incidence of that disease and the associated agent (2).

Global measles eradication goals are supported by regional plans on which country measles elimination plans are hinged. In 2011, the 46 World Health Organization (WHO) African Region member states agreed and endorsed a goal to eliminate measles by 2020. The 65th World Health Assembly held in 2012 endorsed the Global Vaccine Action Plan (GVAP) with, amongst other objectives, included to eliminate measles in all five WHO regions by 2020 and all countries have since adopted goals related to this target (3). In 2017, African ministers of Health (and Finance, for some countries) met in Addis Ababa. They endorsed the Addis Ababa Immunisation Declaration to eliminate measles and other vaccine preventable diseases by 2020. Meeting at the Namibia Institute of Public Administration Management (NIPAM), Southern African Development Community (SADC) Ministers of Health, on the 8th November 2018 in Windhoek, Namibia urged member states to accelerate efforts to eliminate measles in the region.

After a steady rise in coverage following Gavi support from the early 2000s, measles containing vaccine dose 1 (MCV1) coverage has remained relatively constant in the African Region of the WHO (69%–70%) since 2013(3). Zambia’s coverage for MCV1 has moved from 80% in 2013 to 96% in 2017 while that of MCV2 has moved from 38% in 2013 to 64% in 2017(4). Zambia in particular has worked to strengthen routine immunisation (which includes two doses of measles), carried out seven supplementary immunisation activities (SIAs) in the past 17 years and enhanced surveillance and response activities countrywide.

The global 1982 measles eradication plans were abandoned having learnt more about the technical nuances of measles. In the last decade, focus has been on elimination. A lot of progress has been made especially with the commitments at the highest levels of governments globally to attain measles elimination. While 2020 may be too close, the road to measles elimination is well paved. A more realistic target will most likely follow the 2020 target.

After a steady rise in coverage following Gavi support from the early 2000s, measles containing vaccine dose 1 (MCV1) coverage has remained relatively constant in the African Region of the WHO (69%–70%) since 2013(3). Zambia’s coverage for MCV1 has moved from 80% in 2013 to 96% in 2017 while that of MCV2 has moved from 38% in 2013 to 64% in 2017(4). Zambia in particular has worked to strengthen routine immunisation (which includes two doses of measles), carried out seven supplementary immunisation activities (SIAs) in the past 17 years and enhanced surveillance and response activities countrywide.

The global 1982 measles eradication plans were abandoned having learnt more about the technical nuances of measles. In the last decade, focus has been on elimination. A lot of progress has been made especially with the commitments at the highest levels of governments globally to attain measles elimination. While 2020 may be too close, the road to measles elimination is well paved. A more realistic target will most likely follow the 2020 target.
LIST OF REFERENCES


