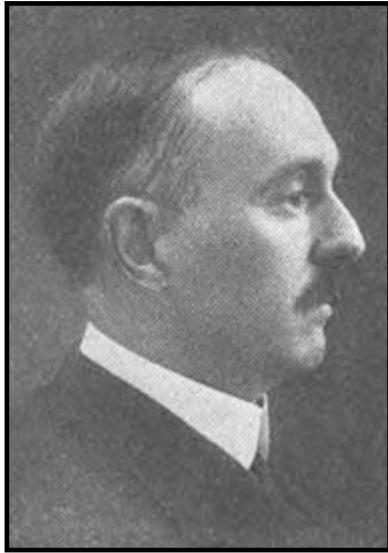


# Monitoring IHR implementation

## The Greek experience and public health in Greece

Vasilios Ath. Diamantopoulos  
Phd doctor public health, director NHS  
Chairman of the Panhellenic Union of NHS doctors of public health



CEA Winslow

“The science and art of preventing disease, prolonging life, and promoting health through the organized efforts and informed choices of society, organizations, public and private communities, and individuals.”

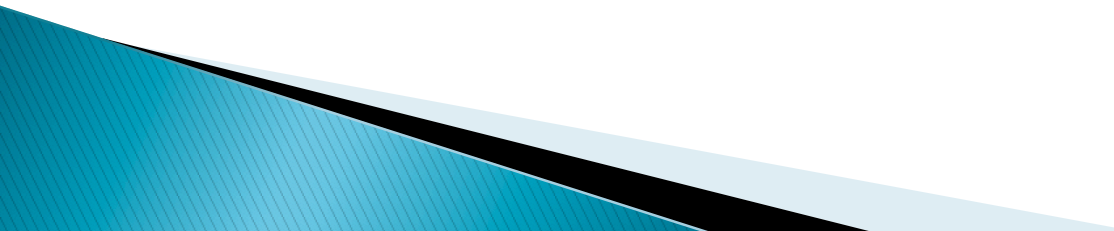
# Background

- ▶ **Increased need for international public health security and cooperation**

- New diseases
- More international travel
- More people

- ▶ Old IHR almost useless
  - Only cholera, plague and yellow fever
  - Dependent on official notification
  - No incentives for notifications
  - No formal cooperation mechanisms
  - No dynamics in international response

# Basic Outline of the IHR

- ▶ **Definitions and purpose**
  - ▶ **Surveillance and response**
  - ▶ **WHO recommendations concerning specific threats**
  - ▶ **Routine measures**
  - ▶ **Procedures**
  - ▶ **Reservations, disputes, etc**
- 

# Key contents of the IHR

- ▶ **A new international system for epidemic intelligence**
  - ▶ **A procedure for WHO's recommendations to guide the response to public health emergencies of international concern**
  - ▶ **A set of international rules on routine measures against international disease spread**
- 

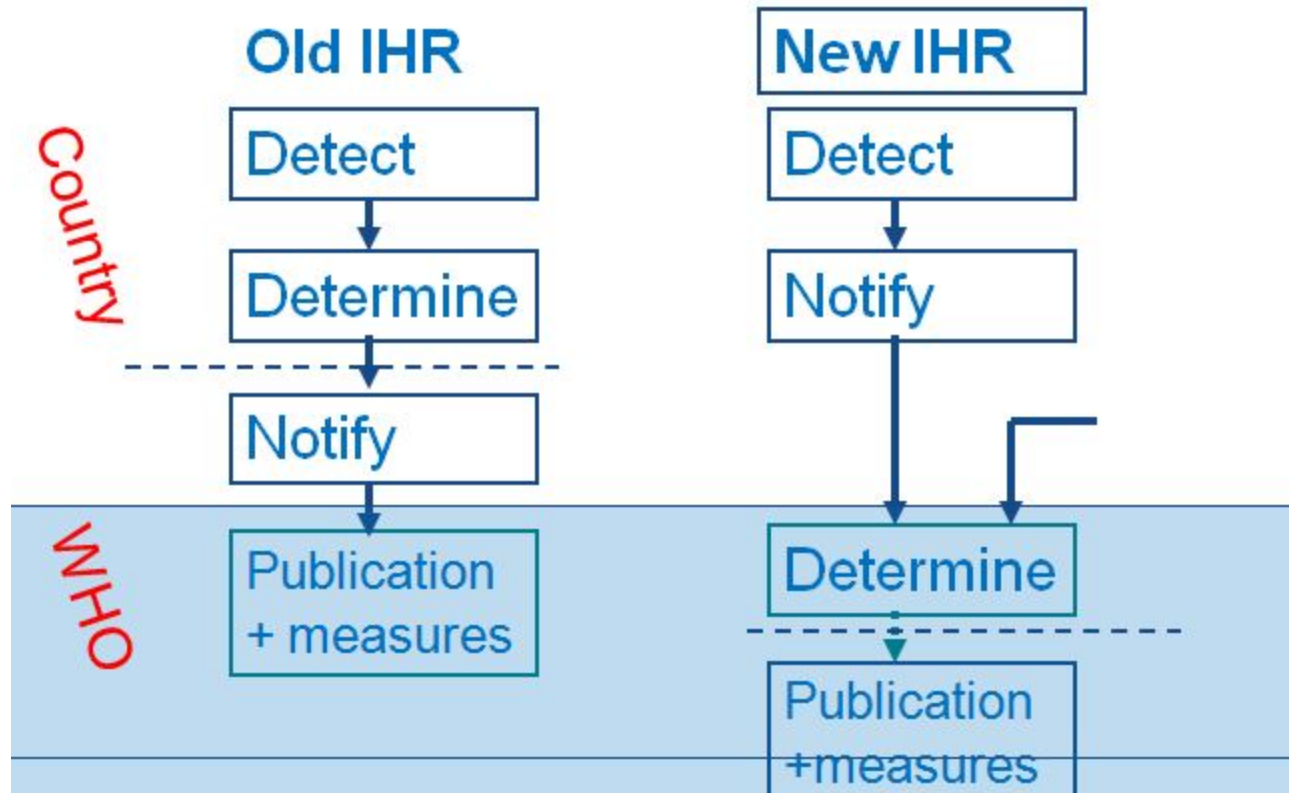
# Purpose of IHR

The purpose and scope of these Regulations are to **prevent**, protect against, **control** and provide a public health response to the international spread of disease in ways that are commensurate with and restricted to public health risks, and which avoid unnecessary interference with international traffic and trade.



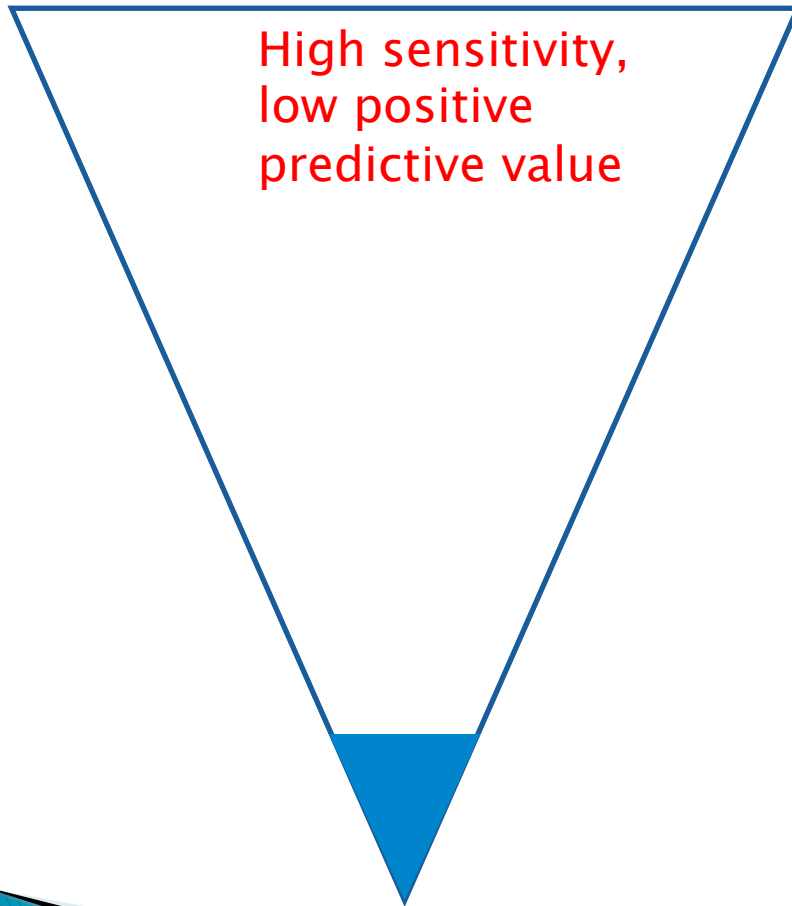
Decision instrument to determine whether an event may be a public health emergency of international concern (*pheic*)

# Determining whether event is *pheic*

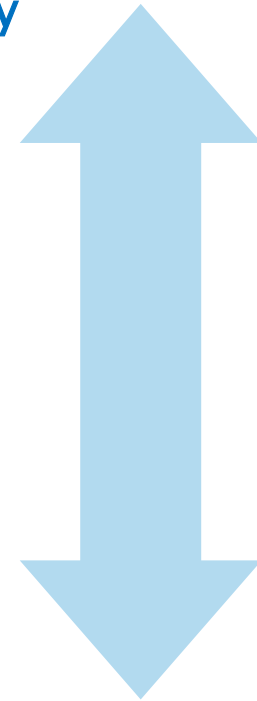




# Notification is a start of a dialogue

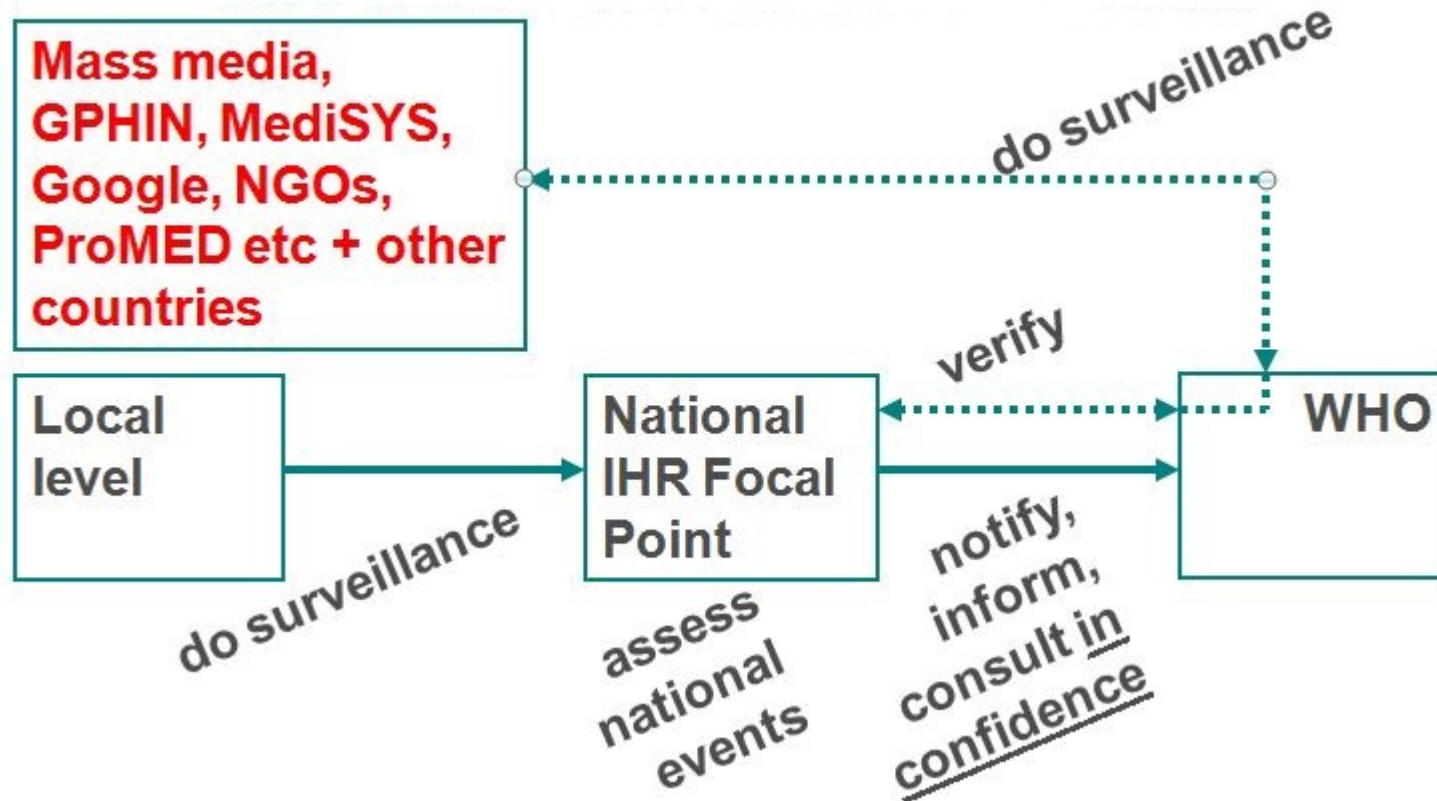


Potential *pheic* notified by  
country

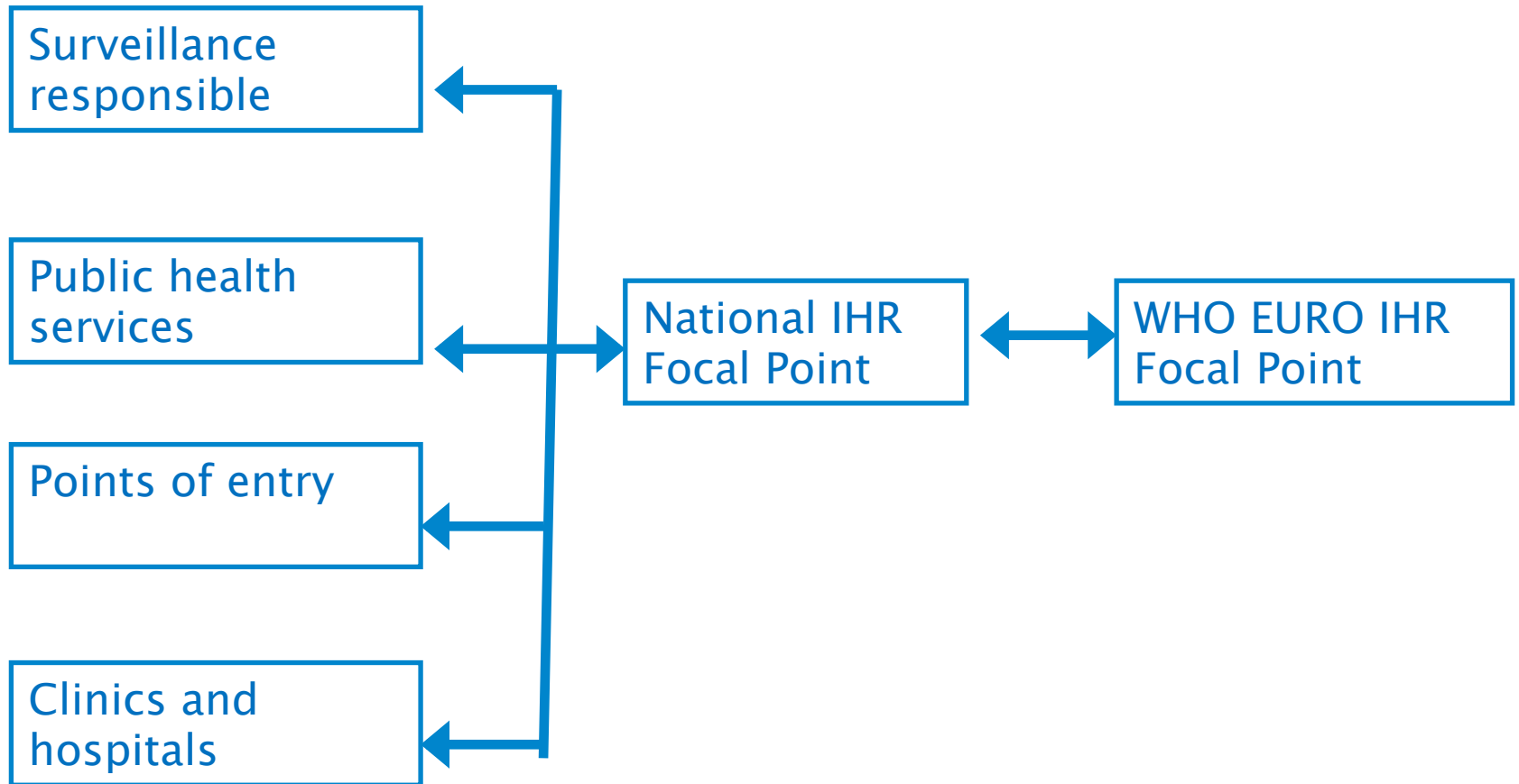


*Pheic* declared by WHO

# The IHR surveillance system



# Communications



# Local level Capacities

## Surveillance

- ▶ Detect outbreaks of disease or death
- ▶ Report immediately to higher level

## Response

- ▶ To implement preliminary control measures immediately

# Regional level Capacities

## Surveillance

- Confirm status of events
- Assess events immediately
- Report to national level

## Response

- Support or implement additional control measures

# National level Capacities

## Surveillance

- Assess all events within 48 hours
- Notify WHO

## Response

- Determine control measures
- Provide lab support
- Provide on-site assistance
- Provide operational links with officials, ministries, hospitals, entry points
- Have emergency plan

## Main challenges for countries

1 . WHO's power to define an event

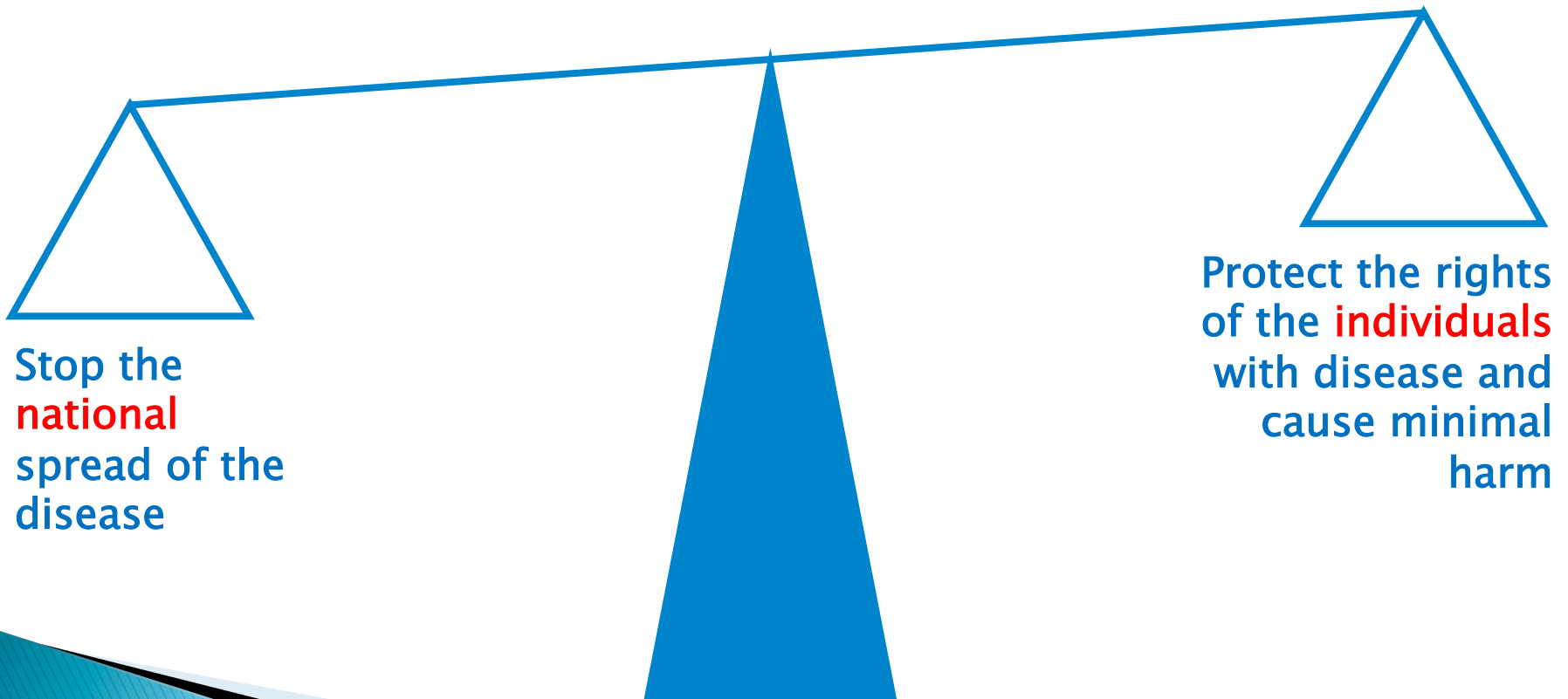
2. No political interference

3. Build capacities worldwide

4. No withholding of information

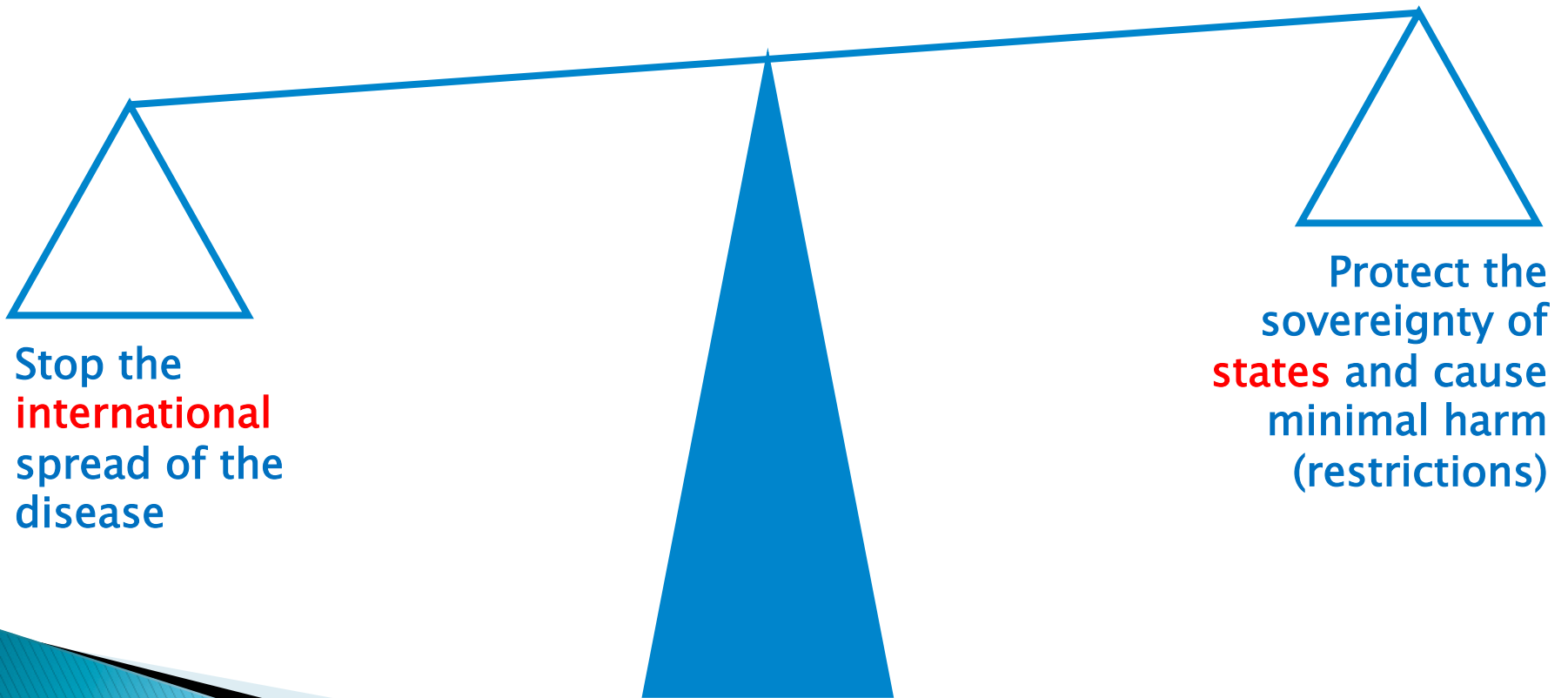
5. No excessive response

# National laws on communicable diseases

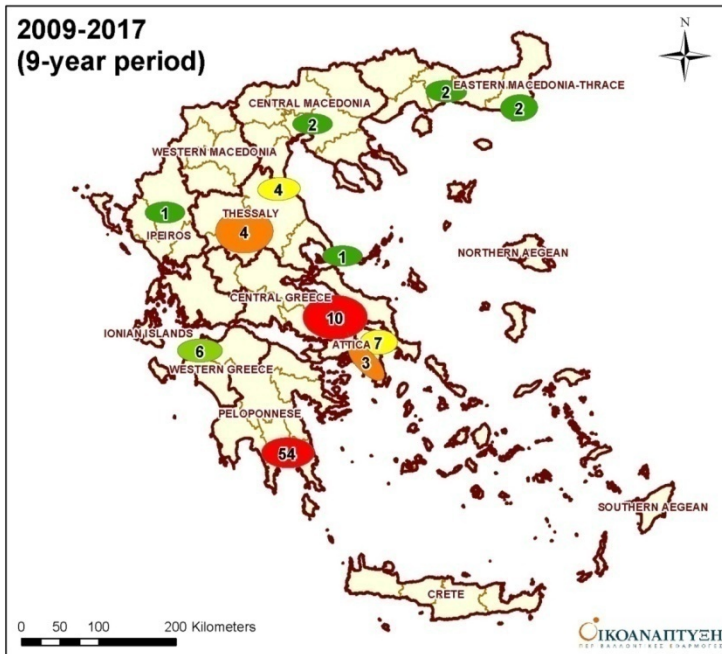




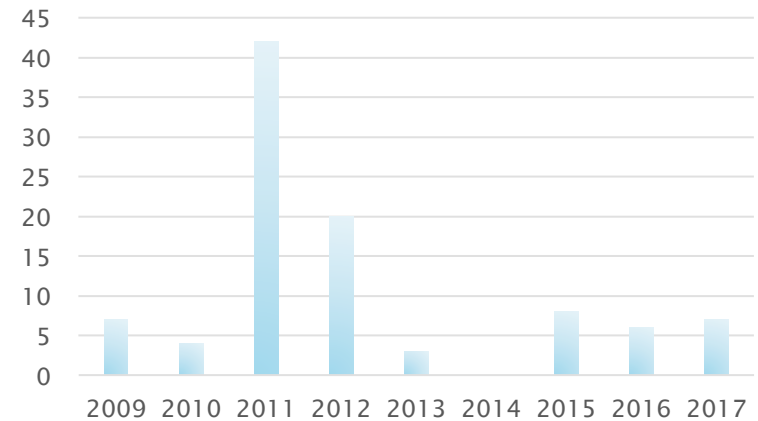
# International law on communicable diseases (=IHR)



# The Greek experience as a paradigm of Malaria cases in Greece (2009–2017)



Autochthonous malaria cases – Greece



- Almost every year sporadic autochthonous malaria cases in different regions in Greece
- Greece is receptive to malaria

# Actions against malaria in South Peloponnese (2011 –2016)

In **collaboration** with the Hellenic CDC and other involved parties, the following complementary actions against malaria were undertaken:

- Malaria **surveillance**: screening of 5516 asymptomatic immigrants for malaria during 2011–2016
- Malaria **treatment**: chemoprophylaxis in 1309 immigrants, during 2013–2015
- Increase of awareness amongst health professionals for the diagnosis of malaria
- Sensitization of the public and personal protection measures against mosquitoes
- Intensified vector control activities

# Concluding remarks

- The Evrotas program is the first antimalaria project applied in Europe after the end of the DDT era
- The annihilation of autochthonous malaria cases in S. Peloponnese was the result of strong political and financial commitment
- The protection of at risk populations was made possible with the combined actions of the health care system of Greece and the appropriate vector control applications
- There was intense sensitization and community engagement
- The ultimate goal was fulfilled: the protection of the people at risk, the prevention of the re-establishment of malaria in Greece and the protection of tourist industry.

# Conclusions

- ▶ IHR is a major step forward in global epidemic intelligence
  - Not perfect, for the moment in Greece but as good as was possible
- ▶ Shifting power from countries to WHO (which works on behalf of all countries)
  - Multilateral solutions
- ▶ Actual use more important than when wording
  - We can all make the IHR work by respecting the spirit of IHR: **early sharing of information + the correct and non-excessive health measures**
- ▶ National capacity building is important

ΕΥΧΑΡΙΣΤΩ TÄNAN HVALA DZIĘKUJĘ  
GRAZIE ありがとう GRACIAS MERCI TACK

**THANK YOU** DIAKUIU  
PALDIES

ACIU TACK DANKE DANK U WEL ДЗЯКУЮ  
СПАСИБО 谢谢 OBRIGADO KIITOS  
TESEKKUR EDERIM diolch