Polio almost wiped out fealling

BY OUR STAFF REPORTER

LAHORE-Minister Health Punjab Dr Tahir Ali Javed has said that through polio eradication strategy we have almost wiped out this fatal disease from the province, and with the help of donor agencies we would clear the province from polio by 2005.

He expressed these views while presiding over a high level meeting of Health Department to review the arrangements of three days antipolio campaign commencing from September 2.

The Minister said that District Monitoring Teams (DMTs) would be set-up soon for the effectiveness of expanded programme of immunisation (EPI).

He said that in order to make the programme more effective the students and teachers of medical colleges were being involved in these projects.-

He said that the government assigned highest priority to EPI, as evident from the fact that Rs 97 million is being allocated from

its regular budgets annually in addition to support from the development funds.

A project worth Rs 940.047 million with the support of Global Alliance for Vaccine and Immunisation (GAVI) has been cleared. Polio eradication has been accorded highest priority by the government of the Punjab and all support from provincial and district government is mobilised to achieve the target. Efforts and support of WHO and UNICEF, who are contributing towards health promotion, disease presentations and control and especially eradicating polio from the province are greatly appreciated, he said.

The Minister said that the Punjab Government is spending Rs 94 million on the activities to control malaria in the province. Hepatitis-B has been included in routine EPI in all the districts of the Punjab whereas vitamin-A supplementation is being provided once a year, he added.

The government is effectively implementing the DOTS strategy for TB control and sizeable amount of budget has been allocated for this programme. He said a project "enhance AIDS Control Programme" at a total cost of Rs 636 million has been approved by CDWP. The prevention of HIV/AIDS and Hepatitis are being strengthened through raising public awareness, social mobilisation and strengthening blood screeing and promotion of safe blood transfusion services.

The Minister stressed the need of door-to-door and child-tochild coordination and involvement of lady health workers, for the success of immunisation programmes, he informed, the WHO would continue its assistance for the provision of basic health care facilities at grassroot level.

The Minister directed that effectiveness of monitoring system of health sector at district levels should be ensured and the launching of accountability campaign in this regard be undertaken.

Access to generic all 3 medicines

MEMBERS of the World Trade Organization (WTO) approved over the weekend changes in the Trade Related Intellectual Property Rights (TRIPS) agreement to allow poor countries to import cheap generic drugs. This decision will enable these countries, particularly those in Africa, to import cheaper medicines in their fight against a variety of epidemics which include HIV/Aids, tuberculosis and malaria, to name a few. The principle of allowing developing countries access to cheaper versions of key drugs was decided two years back, but talks had dragged on since then on implementing a deal. Keeping this in mind, the weekend's announcement has been described as one of the most important decisions ever taken by the organization's executive committee. The news will also come as a boost for the image of the WTO which has suffered as a result of delays in reaching an agreement on what is seen as a purely humanitarian issue. Existing world trade rules allow countries, both developed and developing, with their own domestic drugs industries to waive patents and issue compulsory licences to generic manufacturers when they face health emergencies. However, the regulations say nothing about states without their own drug industry. This vacuum will now be filled.

The main opponent of the agreement was the United States government, whose was the sole voice of dissent. America had objected on the grounds that there were fears that generic companies in developing countries, such as Brazil and India, would copy lifestyle drugs like Viagra for export under the guise of this agreement. The US government also said that it would allow too many drug patents to be ignored and that the deal would mean that illnesses that were not in epidemic form or infectious, such as diabetes and asthma, could also be treated with cheap, generic drugs. The final objection of the United States was to the possibility that these cheap drugs would be smuggled back to the developed countries. It is quite obvious that the US had the interests of the allpowerful American pharmaceutical lobby in mind when making these objections since all these are issues that will cut into the profits of the multinationals. That is why it was only after some additional conditions were imposed in the agreement that the US agreed to the deal going through. It is now understood that the WTO has pledged not to abuse the system and to only waive patents in "good faith."

What is now feared is that the system of checks and balances to be put in place to ensure that the US conditions are met will defeat the very purpose for which the initiative has been taken. Some governments have warned that the barriers that will be put in place will make generic drugs more expensive. This is a situation the WTO should do well to avoid. Otherwise it would be back to square one for all the parties involved. This is also a lesson for developing countries to promote their own generic medicine production capabilities which in the long term is the only solution to the issue of high pharmaceutical prices.