



Media release

Monday 18 October 2010

World Polio Day 2010: we can never be complacent about childhood vaccination

Polio Australia is marking World Polio Day, Sunday 24 October 2010, with a call to all Australians to make childhood vaccination a priority – and not to forget those for whom vaccination came too late.

According to Polio Australia President, Ms Gillian Thomas, “Vaccines came too late for us. We missed out. As polio survivors, we’ve made much of our lives but just think what we could have done if only we had received the vaccine...” she said.

Polio Australia would like to mark World Polio Day as significant for those people who were not able to avoid polio. Why not **“Wear Orange on World Polio Day”** and take a photo and upload the image to www.polioaustralia.org.au.

Despite the WHO declaration in 2000 that Australia was ‘polio free’ⁱ, Australia experienced a new case of acute polio infection imported from overseas in 2007.ⁱⁱ

“Australians can never be complacent about childhood vaccination,” Ms Thomas said. “Until polio is eradicated from the rest of the world, there is an ongoing risk of the disease being imported into Australia from other countries,” Ms Thomas said.

Since 1912, more than 30,000 cases of paralytic poliomyelitis have been reported in Australia (largely through the epidemics of the ‘30s, ‘40s, ‘50s and ‘60s).ⁱⁱⁱ However, according to the WHO, this figure represents less than 1% of the total number of people who contract the disease.^{iv}

Polio specialist, and Director of Pain Services at the Epworth Hospital in Melbourne, Dr Steve de Graaff, describes how those who survived the ravages of the disease as children, and who probably went on to live very active lives, are now being diagnosed with what are known as ‘the late effects of polio’ (LEOP).

“For these dynamic individuals, who’ve taken all before them in life, this can be very distressing,” he said. “The symptoms commonly include new muscle weakness, muscle and joint pain, debilitating fatigue levels, swallowing and breathing problems, sleep disturbance, and an inability to regulate body temperature.”

According to Dr de Graaff, the management of the LEOP is largely non-medical. “It’s about recognising that things have changed and slowing down the pace of activity so as to be more efficient in your movements in light of the new limitations,” he said.

<More>



“Without a doubt, anyone who finds that they are failing physically without explanation should always consult their doctor to ensure that there’s nothing sinister going on and for advice as to how to manage what’s happening,” he said.

As Gillian Thomas explains, “There are no silver bullets with the LEOP but information and support can play a vital role. There are so many people out there that we still haven’t reached.”

“At the same time, we’re working with health care professionals to establish nationally consistent guidelines for the treatment of the LEOP and with governments to lobby for more polio-specific services,” she said.

Anyone interested in finding out more about Polio Australia or the late effects of polio can visit www.polioaustralia.org.au or phone 03 9016 7678.

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Polio Australia would like to mark World Polio Day as significant for those people who were not able to avoid polio. Why not **“Wear Orange on World Polio Day”** and show your true colours? Tell your family and friends to wear something **Orange** (*t-shirt, scarf, socks, flower, anything!*), take a photo and upload the image to our website at http://www.polioaustralia.org.au/?page_id=1176.

Polio Australia Inc – representing polio survivors throughout Australia

ⁱ Australia declared polio free, *Communicable Diseases Intelligence*, Volume 26, Issue number 2 - June 2002, available at <http://www.health.gov.au/internet/main/publishing.nsf/content/cda-pubs-cdi-2002-cdi2602-cdi2602i.htm>

ⁱⁱ Andrew J. Stewardson, et al, Imported Case of Poliomyelitis, Melbourne, Australia, 2007; *Emerging Infectious Diseases*, Vol. 15, No. 1, January 2009, available at <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2660702/>

ⁱⁱⁱ DoHA Strategic Planning Workshop, Polio Eradication in Australia, 13 February 2001, available at <http://www.health.gov.au/internet/main/publishing.nsf/Content/health-mediarel-yr2001-dept-sp01003.htm>

^{iv} WHO fact sheet on Poliomyelitis, available at <http://www.who.int/mediacentre/factsheets/fs114/en/index.html>



Media backgrounder

Polio and its symptoms

Polio is a highly infectious disease caused by a virus. It invades the nervous system, and can cause total paralysis in a matter of hours. The virus enters the body through the mouth and multiplies in the intestine. Initial symptoms are fever, fatigue, headache, vomiting, stiffness in the neck and pain in the limbs. One in 200 infections leads to irreversible paralysis (usually in the legs). Among those paralysed, 5% to 10% die when their breathing muscles become immobilized.

Key facts

- There is no cure for polio, it can only be prevented. Polio vaccine, given multiple times, can protect a child for life.
- Polio cases have decreased by over 99% since 1988, from an estimated 350 000 cases then, to 1997 reported cases in 2006. The reduction is the result of the global effort to eradicate the disease.
- In 2008, only four countries in the world remain polio-endemic, down from more than 125 in 1988. The remaining countries are Afghanistan, India, Nigeria and Pakistan.
- Persistent pockets of polio transmission in northern India, northern Nigeria and the border between Afghanistan and Pakistan are the current focus of the polio eradication initiative.
- As long as a single child remains infected, children in all countries are at risk of contracting polio. Between 2003 and 2005, 25 previously polio-free countries were re-infected due to imports of the virus.

From the WHO global fact sheet for Poliomyelitis (at <http://www.who.int/mediacentre/factsheets/fs114/en/index.html>)

Polio in Australia

- The first recorded epidemic case of "acute anterior poliomyelitis" occurred in Port Lincoln, South Australia, in 1895.
- Since 1912, more than 30,000 cases of paralytic poliomyelitis have been reported in Australia with a minimum of 40 cases reported every year from 1917 to 1963.
- The peak incidence of notified cases (39.1 per 100,000 population) occurred in 1938 when over 4500 cases were reported.
- To comprehend fully the extent of polio infection in Australia during the last century, it is important to remember that these reported cases of polio were paralytic cases and it is estimated that there may be as many as 100 - 1,000 cases of inapparent infection for each paralytic case.
- Cases did not begin to decline until the introduction of the inactivated Salk vaccine in 1956-57.
- The Sabin oral polio vaccine was introduced to Australia in 1966. After the introduction of the mass immunisation campaign the number of reported cases of polio in Australia rapidly declined although small outbreaks occurred in the early 1960's.
- Australia returned to the injected form of the vaccine (IPV/Salk) in 2005.

Speech by Australian Chief Medical Officer, Professor Richard Smallwood, at the Strategic Planning Workshop Dinner on Polio Eradication in Australia, 15 February 2001 (at <http://www.health.gov.au/internet/main/publishing.nsf/Content/health-mediarel-yr2001-dept-sp01002.htm>)

World Polio Day – Sunday 24 October

- World Polio Day aims to increase awareness about polio virus and to encourage further actions to reduce it from spreading.
- However, it is also a time for us to reflect on those people who contracted polio during the epidemics and are now living with the late effects of polio. For many tens of thousands of Australians, polio's reprise is a cruel twist of fate that impacts on all aspects of their daily lives. Currently, there is no Federal Government funding for polio survivors.