

Professor Adam Finn presentation
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Esteemed colleagues

Good afternoon

I am a practising clinician. I qualified in 1983 and as a junior doctor I used to diagnose and treat serious infections in young children which my trainees today no longer see and might struggle to recognise. Measles, bacterial meningitis caused by *Haemophilus* and whooping cough, to name but a few.

These recent changes represent vast achievements in the prevention of human suffering and saving of financial resources. They are a testament to the success of governmental policies, the work of countless health professionals and the tireless efforts of my colleagues at the WHO Regional Office for Europe who have done so much to inform and encourage the development and implementation of effective vaccine programmes in member states throughout our region.

But these successes as well as the alarming spectre, in our region, of recent rises in vaccine-preventable infections, most notably measles, highlight the Achilles Heel of vaccination. The weak spot. The vulnerability.

Vaccines can be a victim of their own success. As a child I and maybe some of you had measles and whooping cough. As a young doctor I treated them. But the doctors and parents of today have never seen them. The politicians of today have other pressing problems and priorities. We forget these past plagues at our peril. They can, and do, return to kill our children if we drop our guard.

The current problems with measles control do not simply reflect today's immunisation rates. The cause goes back over many years. While vaccines enjoy levels of public support that elected politicians can only dream of – uptake rates of 60, 70, 80, more than 90% in places – this is simply not enough. Even if, every year, only 10% of children do not received their 2 doses of measles vaccine, the number of unprotected individuals steadily grows until outbreaks become inevitable as soon as the virus is reimported by a homecoming traveller.

People think they have their children vaccinated so that those same children will not get sick. But that is only half the story. Vaccines do not simply protect the individuals who receive them, but also, by halting the spread of infections, they protect many others as well. Those too sick to receive them. Those immunised many years before whose immunity has waned. Those who never showed up at the clinic. Those misled by scare stories and conspiracy theories.

We all must work to protect our children and our entire populations by securing and delivering effective universal vaccine programmes. We must protect everyone against the

harms of preventable infection and the harms of misinformation, misunderstanding and complacency.

Many of us in this room today would not be here were it not for vaccines. We would have died in childhood and our parents would have had more children to replace us. That was the reality of parenthood before vaccines. But we do not know that we were saved. Our parents' eyes never witnessed that disaster.

The challenges we now face in grasping our new reality - the reality of a freedom from children killed or maimed by polio, meningitis or measles and the infections that follow it, the reality of protection as adults against cancers of the liver and cervix caused by infections that we can prevent – these challenges are real and present.

So, today, let us congratulate ourselves on what has been achieved, but please, let us fully recognise how much remains to be done.

Thank you.