



Summary of the Thirtieth Meeting of the International Task Force for Disease Eradication (ITFDE) October 22, 2019

The 30th Meeting of the International Task Force for Disease Eradication (ITFDE) was convened at The Carter Center in Atlanta, GA, USA from 8:30 am to 5:00 pm on October 22, 2019 to discuss the potential for eradication of measles and rubella. The Task Force members are Dr. Stephen Blount, The Carter Center (Chair); Dr. Peter Figueroa, The University of the West Indies, Jamaica; Dr. Donald Hopkins, The Carter Center; Dr. Fernando Lavadenz, The World Bank; Dr. Mwelecele Malecela, World Health Organization (WHO); Professor David Molyneux, Liverpool School of Tropical Medicine; Dr. Ana Morice, Independent Consultant; Dr. Stefan Peterson, UNICEF; Dr. David Ross, The Task Force for Global Health; Dr. William Schluter, Centers for Disease Control and Prevention (CDC); Dr. Nilanthi de Silva, University of Kelaniya, Sri Lanka/WHO Strategic and Technical Advisory Group for Neglected Tropical Diseases (STAG-NTDs); Dr. Dean Sienko, The Carter Center; Dr. Laurence Slutsker, PATH; Dr. Jordan Tappero, Bill & Melinda Gates Foundation; Dr. Sahlemariam for Peterson). Presenters included Dr. WHO SEARO; Amanda Cohn, CDC; Matthew Hanson, Bill & Melinda Gates Foundation; Alan Hinman, The Task Force for Global Health; Mark Jit, London School of Tropical Medicine & Hygiene; Ann Lindstrand, WHO/Geneva; Balcha Masresha, WHO/AFRO; Patrick O'Connor, WHO/Europe; and Desiree Pastor, Pan American Health Organization (c Mfrom insufficient resources and

commitment.”

¹ The ITFDE also concluded that “The impending completion of polio eradication opens a window of opportunity to devote greater attention to measles and rubella eradication.” The ITFDE reviewed the current status of global and regional elimination of measles and rubella at this meeting, with emphasis on the potential advantages of pursuing measles and

¹ Meeting of the International Task Force for Disease Eradication, November 2015. *Wkly Epidemiol Rec* 91(6): 61–71.

rubella eradication simultaneously, and the constraints of insufficient resources and political commitment.

Current Status

Measles remains a major cause of child mortality, and rubella is the leading cause of birth defects among all infectious diseases globally, even though both are vaccine-preventable.^{2,3,4} In 2010, an expert advisory panel convened by the World Health Organization (WHO) concluded that measles can and should be eradicated.⁵

current approach of maintaining high control, currently costing governments and donors US\$2.3 billion per year, will continue.^{2,17,18,19,20}

At the end of 2019, only 21 countries (18 of which are Gavi-eligible) still need to introduce rubella-

6. A lesson learned from polio eradication is the need to closely link measles-rubella activities with improvement of immunization programs and national health systems performance. Because measles is so infectious, each village/ settlement must