



The Vital Drop: Communication for Polio Eradication in India. Gitanjali Chaturvedi. Sage Publications India Pvt Ltd, B1/I-1, Mohan Cooperative Industrial Area, Mathura Road, New Delhi 110 044. 2008. xviii + 319 pp. Price: Rs 750.

This book largely describes the global and national campaign efforts for pulse polio immunization programme in India. India was a signatory to 'Health for all by 2000 AD' to vaccinate world children against six childhood diseases, including polio at the 'Alma Ata' declaration in 1978. Though there were two vaccines against polio (injectable polio vaccine (IPV) and oral polio vaccine (OPV)) available at that time, the World Health Organisation (WHO) recommended its member countries to use OPV, as it is easy to administer, is cheaper, and is also claimed to provide herd immunity. No technology evaluation study was carried out (IPV, OPV, or its combination) at that time to exercise a technology choice that suits the Indian population the most. It is also strange that even before the Expanded Programme on Immunization was launched in 1978 in India, studies in Christian Medical College, Vellore in the early 1970s revealed that as many as 10–15 doses of OPV afford only around 50–60% of protection in the Indian population against polio, yet India adopted OPV for its polio eradication programme. Majority of the member countries adopted OPV, though some European countries adopted IPV and could eradicate polio in two decades. The polio eradication programme started as a global movement, with the involvement of around 20 United

Nations/international agencies, the respective national governments, and the large paraphernalia along with WHO to eradicate polio globally. This book is published at a time when India along with three other countries (Afghanistan, Pakistan and Nigeria) has been declared NOT polio-free, while the rest of the world is, and these four respective countries were asked to take the responsibility of stopping the spread of polio from endemic regions to polio-free zones. This opportune time compels anybody who is concerned with polio eradication in India to ask obvious questions such as: Why is India not free of polio? Why polio cases are on the rise even in the southern Indian states which were declared polio-free earlier? Why two states (Uttar Pradesh (UP) and Bihar) continue to maintain the same status of polio prevalence for the last 20 years? Why have all the efforts of the united agencies worth US\$ 25 billion, and national efforts for the last 20 years gone down the drain? Have there been any evaluation studies to check how many children achieved protection after vaccination? While poor vaccine coverage is one of the reasons given for India not achieving the polio-free status, this coverage rate is true for all other childhood vaccines under the universal immunization programme.

This book takes us through the journey of India's efforts along with international agencies to reach its destiny of becoming polio-free, only through OPV, with several doses, pulse polio immunization (PPI), through Global Polio Eradication Initiative (GPEI), advisory committee on polio eradication (ACPE), NPSP, etc. glorifying its exhaustive efforts to meet the means to achieve global polio eradication. This book describes the roadblocks in detail in almost all parts of India and mentions that inadequately trained manpower, inadequate floating health workers or vaccinators, lack of faith in the population to come for second or third doses of vaccination (largely attributed to the Muslim community), inadequate campaign, lack of good governance and negative media reporting are the factors responsible for the present scenario. However, the entire campaign for polio eradication efforts in this book underlies the assumption that it is the poor coverage for PPI that is mainly responsible for the failure of polio eradication in India, though various views of public health

critics have been documented. The Muslim community is blamed for not achieving full coverage of OPV in polio-endemic states. One needs to check whether similar observation is attributed to the poor immunization coverage that varies across regions of India for other UIP vaccines as well. In other words, is there a state/region in India where polio is under control despite the Muslim population? Or is it the OPV (whether trivalent or monovalent) that does not protect people/all communities of UP and Bihar? Similarly, this book ignores the fact that the definition of counting acute flaccid paralysis cases has changed thrice. As a result, one needs to check whether improvements in coverage rates after intensive efforts of UNICEF, social mobilization and campaigns are real or a coincidence! Also, recent evidence from Albania reveals that polio resurfaced two decades after the region was declared polio-free, indicating that polio transmits silently for long years and also raises doubts whether OPV affords herd immunity.

There are several factors that need to be noted besides only 'poor coverage', to understand the complexities of the polio eradication programme in India, which underscores the need for a scientific investigation and to gain the trust of people for a medicine/vaccine one prescribes. No matter how much money one spends, networking one builds, social mobilization one does, ultimately it is only winning the trust of people that can gain popularity for mission-mode programmes like the PPI. Overall this book is useful in understanding the meticulous efforts one can build to implement any mission-mode approach to achieve public health.

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