



Key Messages: World Pneumonia Day 2011

Core Messages

- Pneumonia is the world's leading killer of children age 5.¹ It takes the life of one child every 20 seconds² and is responsible for nearly 20% of deaths in young children.³
- Pneumonia is among the most solvable problems in global health, and yet it remains the leading infectious killer of young children on the planet. We have the tools to protect and prevent children from catching pneumonia and to treat those suffering with this illness.
- Investments in preventing, protecting against, and treating pneumonia have helped contribute to a 35% reduction in child mortality since 1990.⁴ To advance progress, we need to continue these investments.
- Together we call on country governments to meet their global health funding commitments and implement life-saving pneumonia interventions.

Core Messages and Supporting Facts

- **Pneumonia is the world's leading killer of children under age 5.¹ It takes the life of one child every 20 seconds² – more than AIDS, malaria and measles combined – and is responsible for nearly 20% of deaths in young children.³**
 - Pneumonia kills more children around the world than any other disease despite the fact that existing vaccines, medicines and treatments could save millions of children's lives.⁵

- Pneumonia takes a devastating toll in the developing world. An estimated 98% of children who die of pneumonia live in developing countries.⁶
- For those that survive, severe pneumonia can place extreme financial strain on families and communities, contributing to the cycle of poverty.
- **Pneumonia is among the most solvable problems in global health and yet it remains the leading infectious killer of young children on the planet. We have the tools to protect and prevent children from catching pneumonia and to treat those suffering with this illness.**
 - Exclusive breastfeeding during the first six months of life⁷, ensuring adequate child nutrition⁸, promoting regular hand-washing and reducing indoor air pollution all help protect children from pneumonia.⁹
 - Safe and effective vaccines exist to provide protection against the primary causes of pneumonia, *Streptococcus pneumoniae* (pneumococcal disease) and *Haemophilus influenzae* type b (Hib).¹⁰ Hib vaccines are already in widespread use, and thanks to the support of GAVI, pneumococcal vaccines are now being rolled out in the developing world.
 - Early diagnosis and treatment of pneumonia saves lives. Pneumonia can be treated effectively with antibiotics that cost less than one dollar¹¹, but less than 30% of children with pneumonia receive the antibiotics they need.¹²
 - The World Health Organization (WHO) recommends the implementation of Hib and pneumococcal conjugate vaccines for children in all countries. With the political will to prioritize their introduction and to ensure high levels of coverage, the use of these vaccines will help achieve United Nations Millennium Development Goal 4 – a two-thirds reduction in child deaths.¹³
- **Investments in fighting pneumonia have helped contribute to a 35% reduction in child mortality since 1990.** Error! Bookmark not defined. **To advance progress, we need to continue these investments.**
 - The fight against pneumonia can be won. Estimates indicate that more than one million children’s lives can be saved annually with widespread use of vaccines and antibiotics.

- As the result of collaborative efforts by WHO, UNICEF, the GAVI Alliance, academia, foundations, industry and donor and developing country governments, low-income countries can now access existing and future pneumococcal vaccines with a small self-financed contribution of as little as US \$0.15 per dose.¹⁴
- Investment in the development pneumonia vaccines tailored to meet the needs of developing world populations is essential to the long-term fight against this disease.
- **Together we call on country governments to meet their global health funding commitments and implement life-saving pneumonia interventions.**
 - Continuing to increase public investment in child and maternal health programs is not only the right thing to do, it's the smart thing to do. Helping countries fight preventable disease is the best way to ensure their economic growth.
 - Together, we urge donor governments, including the U.S., to fully fund their global health commitments in the coming year.
 - Together we can raise pneumonia to worldwide priority. On World Pneumonia Day, you can:
 - Tell the U.S. Congress that global health should be treated as a priority as they enter key budget negotiations – and urge them to support the administration's FY 2012 funding request for child survival and maternal health programs, including those that address pneumonia.
 - Tell your friends, family and colleagues about World Pneumonia Day by posting messages on your social networks
 - Organize a World Pneumonia Day event
 - Share your own story of pneumonia's impact
 - Give \$10 to GAVI to provide one child with a lifetime of protection.

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- ¹ World Health Organization. World health statistics 2009. Geneva: World Health Organization; 2008.
http://www.who.int/whosis/whostat/EN_WHS09_Full.pdf. Accessed September 23, 2011
- ² Black RE, Cousens S, Johnson HL, Lawn J, Rudan I, Bassani D, Jha P, Campbell H, Fischer-Walker C, Cibulskis R, Eisele T, Liu L, Mathers C (2010). Global, regional, and national causes of child mortality in 2008: a systematic analysis. *Lancet*, 2010; 375: 1969-1987.
- ³ World Lung Foundation, The Acute Respiratory Infections Atlas. Pneumonia.
http://www.ariatlas.org/understanding_aris/pneumonia. Accessed September 23, 2011
- ⁴ Neonatal, postneonatal, childhood, and under-5 mortality for 187 countries, 1970–2010: a systematic analysis of progress towards Millennium Development Goal 4 Julie Knoll Rajaratnam, Jake R Marcus, Abraham D Flaxman, et al. *The Lancet* 5 June 2010 (Volume 375 Issue 9730 Pages 1988-2008 DOI: 10.1016/S0140-6736(10)60703-9)
- ⁵ Niessen LW, Hove ten AC, Hilderink HH, Weber M, Mulholland K, Ezzati M. Comparative impact assessment of child pneumonia interventions. *Bull World Health Organ*. 2009;87(6):472-8
- ⁶ World Health Organization. World health statistics 2006. Geneva: World Health Organization; 2006.
- ⁷ Roth DE, Caulfield LE, Ezzati M, Black RE. Acute lower respiratory tract infections in childhood: opportunities for reducing the global burden through nutritional interventions. *Bull World Health Organ*. 2008;86: 356-64
- ⁸ Roth DE, Caulfield LE, Ezzati M, Black RE. Acute lower respiratory tract infections in childhood: opportunities for reducing the global burden through nutritional interventions. *Bull World Health Organ* 2008; 86: 356-64.
- ⁹ Niessen LW, Hove ten AC, Hilderink HH, Weber M, Mulholland K, Ezzati M. Comparative impact assessment of child pneumonia interventions. *Bull World Health Organ*. 2009;87(6):472-
- ¹⁰ O'Brien K, Wolfson L, Watt J, et al.. Burden of Disease caused by *Streptococcus pneumoniae* in children younger than 5 years: global estimates. *Lancet*. 2009; 374:893-902
- ¹¹ Sazawal S, Black RE, Pneumonia Case Management Trials Group. Effect of pneumonia case management on mortality in neonates, infants, and pre-school children: a meta-analysis of community based trials. *Lancet Infect Dis*. 2003;3:547-56.
- ¹² Figure based on multiple Demographic and Health Surveys (DHS), cited in: Wardlaw T, Johansson EW, Hodge M. Pneumonia: the forgotten killer of children. New York: UNICEF, The World Bank; 2006.
- ¹³ World Health Organization, Immunization, Vaccines and Biologicals. Introduction of new-generation pneumococcal vaccine will help save lives. 14 February 2011
http://www.who.int/immunization/newsroom/newsstory_new_gen_pneumo_vaccine_feb2011/en/index.html
- ¹⁴ GAVI Alliance, Pneumococcal AMC. AMC Annual Report 2011 <http://www.gavialliance.org/funding/pneumococcal-amc/>