On 5 May 2013, based on the advice of the International Health Regulations Emergency Committee and its expert advisors, the World Health Organization (WHO) declared that the situation related to the international spread of wild poliovirus constitutes a Public Health Emergency of International Concern (PHEIC) [1].

The declaration followed an assessment of the poliovirus situation in 2014 as of 26 April and included updates from countries affected, namely Afghanistan, Cameroon, Equatorial Guinea, Ethiopia, Israel, Nigeria, Pakistan, Somalia and the Syrian Arab Republic. It concluded that the current situation required coordinated international response because this situation could result in failure to eradicate polio globally.

Currently 10 countries worldwide are affected by active transmission of polio: Afghanistan, Equatorial Guinea, Ethiopia, Iraq, Israel, Somalia and Nigeria, with three of them Cameroon, Pakistan and Syria and Cameroon, having exported polio cases in 2014.

Based on advice from the Emergency Committee, the WHO issued temporary recommendations under the International Health Regulations (IHR 2005) to reduce the international spread of wild poliovirus, effective from 5 May 2014, for ‘States infected with wild poliovirus but not currently exporting’ and ‘States currently exporting wild polioviruses’.

For the exporting countries WHO’s temporary recommendation is to ensure that residents and long-term visitors receive a dose of oral poliovirus vaccine (OPV) or inactivated poliovirus vaccine (IPV) four weeks to 12 months before international travel.

The European Centre for Disease Prevention and Control has assessed the risk of polio importation for Europe and published regularly updated risk assessments on its website [2].

References