

# FREQUENTLY ASKED QUESTIONS: POLIOMYELITIS



## 1. What is poliomyelitis?

Poliomyelitis, or polio, is a highly infectious, crippling disease caused by the poliovirus. It can strike at any age but affects mainly children under three (over 50% of all cases).

## 2. What are the symptoms of polio disease?

In up to 95% of cases, infection with polio virus is sub-clinical. Clinical symptoms typical of infection with polio are:

- Fever
- Headache
- Sore throat
- Vomiting
- Muscle weakness
- Muscle paralysis
- Difficulty swallowing
- Difficulty breathing, which can lead to death.

## 3. Why is polio a health problem in South Africa and the world?

- Before the introduction of polio immunisation in the 1950's, polio was common worldwide, leaving thousands of children crippled each year. However, with strong national immunisation programmes coupled with a decision by the WHO to eradicate polio globally by 2005, circulation of wild polio virus is now limited to a decreasing number of countries.
- Since the [Global Polio Eradication Initiative](#) was launched, the number of cases has fallen from an estimated 350 000 cases from 125 countries in 1988, to 349 cases from 14 countries for the period 1 January 2010 to 15 June 2010.
- In Africa, polio is still endemic in Nigeria, with reported importations in Sudan, Senegal, Angola, Niger, Chad, Sierra Leone, Mauritania, Mali and Liberia. In August 2003 the northern states of Nigeria stopped polio vaccinations amid allegations by Islamic clerics that the polio vaccine had been contaminated as part of an American plan to make Muslim women infertile. Before the ban there were less than 50 cases of polio occurring per year and this led to renewed polio outbreaks which in 2009 resulted in 384 polio cases.
- Even though the last confirmed case of polio in South Africa was in 1989, the threat of imported polio remains a possibility as has been demonstrated by polio outbreaks in formerly polio-free countries in the African continent. It is for this reason that South Africa is intensifying its [polio eradication strategy](#), which is based on the WHO polio eradication initiative.

## 4. How is polio transmitted?

Polio is transmitted via the faecal-oral route. The virus is spread from person to person by contaminated hands and food where sanitation is poor. It is sometimes spread in airborne droplets through close contact with persons who are carrying the infection and are sneezing or coughing, or through exposure to throat and nose secretions in other ways.

## 5. Who is at risk?

Everyone is at risk but more so children under five, and unimmunised individuals living in areas with poor sanitation.

## 6. What is the treatment following polio infection?

Treatment is supportive as no treatment exists to cure polio paralysis.

## 7. How is polio prevented?

Polio can be prevented through immunisation with the oral polio vaccine (OPV), or the inactivated polio vaccine (IPV), which is administered by injection.

## 8. Who should get polio vaccine?

All children from birth to the age of five.

## 9. How and when is the polio vaccine given?

- In South Africa, polio vaccine is given orally at birth and six weeks of age
- The IPV as part of [pentaxim](#) is administered at 6, 10 and 14 weeks, as well as 18 months of age.

## 10. Should HIV positive individuals be vaccinated against polio?

Both the OPV and IPV can be administered to infants with HIV infection. However, the risk of vaccine-associated paralytic polio is high, and as such, OPV is not recommended in infants with symptomatic HIV infection.

## 11. What are the side effects of polio vaccine?

- OPV causes almost no side-effects. Less than 1% of the people who receive the vaccine develop a headache, diarrhoea, or muscle pain.
- There is a small risk of vaccine-associated paralytic polio (VAPP), with approximately two to four cases having been reported for every one million children vaccinated with OPV.
- IPV results in soreness at site of injection and a mild fever.

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