**Vaccines and public anxiety**

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The long history of vaccines dates back to the last years of the 18th century, when a young country doctor in England used material from cowpox sores on a dairymaid’s hands to provide the world’s first protection against smallpox. Though no one realized it at the time, that discovery set the world on a path that would eventually defeat an ancient and horrific disease.

At WHO, the Expanded Programme on Immunization (EPI) was born out of success at a time of tremendous optimism about the game-changing potential of immunization. EPI was established in 1974 as the world moved closer to smallpox eradication.

Confidence was high that, with international commitment and cooperation, other vaccine-preventable diseases could be conquered. The 1979 certification of smallpox eradication was taken as proof of the power of vaccines to permanently improve the world. At that time, only 5% of the world’s children were protected from the six killer diseases targeted by vaccines. Today, that figure is 83%.

New vaccines that protect against cancer of the liver and cervix, two of the most common cancers in the developing world, have opened a whole new frontier with massive preventive potential.

This lecture contrasts the proven impact and remarkable record of vaccines with the recent rise of public anxiety and misgivings worldwide. For example, for vaccines against epidemic meningitis, measles, and polio, attitudes vary from eager acceptance to serious doubts and outright refusals.

Public anxiety has three main sources. First, as the killing and crippling diseases of childhood became less common, parents began to have misgivings about the need to protect their children from diseases that seemed to belong to the past. Second, these misgivings were reinforced by occasional reports of adverse reactions and unfounded rumours of a link between common vaccines and autism for example. Third, scandals relating to unethical practices in clinical trials and the commercial practices of pharmaceutical companies have fed a level of mistrust that extends to clinical trials of new vaccines, a case in point being the Ebola trials in Ghana. Finally, the lecture explores how a country like Ghana can free the potential of vaccines to do great good from public suspicions of harm.