

ORDER SHEET  
IN THE HIGH COURT OF SINDH AT KARACHI  
C.P.No.D-2501 of 2014

ORDER WITH SIGNATURE OF JUDGE

1. For orders on Misc 12885/14
2. For katcha peshi

22.5.2014.

Mr. Zulfiqar Ali Langah, petitioner in person.  
Mr. Muhammad Vawda, advocate for Intervenor.  
Mr. Asim Iqbal, advocate Honrary Secretary of  
Sindh High Court Bar Association.  
Mr. Khalid Shah, advocate for Aga Khan University Hospital.  
Mr. Afaq A. Saeed, advocate for Dow Medical University  
of Health Sciences.  
Mr. Sarwar Khan, Addl. A.G a/w Dr. Mansoor, Special Sectrary Health  
& Dr. Mazhar Khausat, PDEPI, Health.  
Dr. Afia Zafar, Chairperson Infection Cell  
of Aga Khan University Hospital.  
Dr. Rumina Tabasum, Professor Obstetrics & Gynae,  
Dow Medical University of Health Sciences.  
Dr. Malik Tajuddin, Professor Dow Medical University  
of Health Sciences.

1. Through this application Pakistan Institute of Labour Education & Research seeks to join the proceedings. Mr. Muhammad Vawda, the learned counsel submits that PILER, an NGO engaged in social service, is deeply concerned with the health issues in this country and are perturbed over the spread of measles and rubella virus in the Province of Sindh, which has taken a high toll. He submits that PILER, if allowed, shall assist this Court in assessing and analyzing the situation with regard to the above, and if possible to present a viable solution for mitigation thereof. He submits that the incidents of measles is increasing in Pakistan and more so in the Province of Sindh, which can be easily prevented and contained. The learned counsel refers to a news report down loaded from the website of the daily "International News", being annexure B-1 to his present application, which spells out the various reasons ~~for~~ spread of the diseases. It is stated that insecurity is certainly one of the factors that has



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limited some of the Expanded Programme on Immunization (EPI) vaccination campaigns. It is further pointed out that disruption has been caused by heavy monsoon flooding in the recent years, another cause highlighted is that funds, medicines, vaccines provided free of cost by the Government are pilfered by people working here and sold to the private clinics or shops. The report says that in a study published earlier this year, researchers from the Quaid-e-Azam University in Islamabad have opined that corruption was the principal cause of the high number of measles infections, notably in Sindh and Punjab, leading to "ineffective healthcare system, shortage of vaccinators and low immunization coverage." On the next page, it is stated that the key impact of corruption, in the case of measles, is a reduced vaccination rate. The report quotes from a U.K. based Medical Journal that "The low national EPI coverage [across all EPI vaccine programmes], of 54 percent of children, according to the Pakistan Demographic Health Survey for 2012-13, with declining coverage trends over time in Sindh and Balochistan, coupled with increasing number of polio cases in the low transmission season, are the major challenges for Pakistan. The above has been attributed to an immunization specialist at the UN Children's Fund (UNICEF) Pakistan. It is further stated that most patients recover from measles without treatment, but complications can develop, particularly where victims are malnourished. Almost 40 percent of children in Pakistan are underweight, according to the UN Food and Agriculture Organization. Mr. Vawda then refers to an Editorial of January, 2013 published in Medical Journal, namely, Medical Forum Monthly, to point out that according to the WHO current outbreak of measles in different parts of our country has been caused due to insufficient immunization and that over 300 children and adults have died due to measles in the country, 210 children in Sindh alone, in 2012. It further discloses that Pakistan's routine immunization coverage is close to 65 percent with only some



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important cities of Punjab recording a better performance. In the end Editorial says that in 2011, 4000 cases were reported while only 64 deaths due to measles, while in 2012, 14000 cases were reported and number of deaths due to measles were 305, it shows an increase in the death rate occurring due to measles i.e. 1% in 2011 whereas in 2012 the rate was 45.7%. According to WHO up till January 2013, 345 cases were reported due to measles.

From the above it can be seen that the outbreak of measles and other such diseases are mainly for the reason that we lack appropriate immunization cover, such is mainly because of lack pilferage. Our children are particularly susceptible to measles because malnourishment. Corruption also is one of the main culprits, responsible for the spread of the diseases. The increase in the measles victim in Sindh is alarming. It is also unfortunate to note that out of over 300 children and adults, who have died due to measles in the country in the year 2012, 210 children were from Sindh alone. In view of the above and for the reasons that incidence/ spread of measles can be easily controlled, we have sought assistance from various professionals including Dr. Afia, Professor of Micro Biology and Chairperson of Infection Control Committee, Aga Khan University Hospital, Dr. Rumina Tabassum, Professor Gynea & Obstetrics, Dow Medical University of Health Sciences and Dr. Malik Tajuddin, Associate Professor, Department of Community Medicine, DMUHS.

Dr. Afia submits that rubella which in common parlance is called german measles, is not a fatal disease by itself but may cause harm to the fetus, if a pregnant woman is infected thereby. She submits that it is therefore absolutely necessary that all girls of the child bearing age be vaccinated against rubella. However, such is required only where the woman has not been vaccinated against the diseases earlier ~~and~~ <sup>not</sup> or have ~~already~~ <sup>already</sup> suffered the diseases ~~already~~ <sup>already</sup> *m*



Dr. Rumina Tabassum submits that a mother, who may breast feed her baby and who may not have been immunized against measles earlier, should also be immunized for the reason that she may be carrying the virus which may transmit to the baby. She proposed that like in the civilized countries all girls exceeding 13 years and upto the age of 23 years should be immunized and that such immunization is easier in the school going girls. She suggests that before the proposed immunization of female it should be ascertained that she has not suffered the disease earlier and blood testing should also be carried out to avoid unnecessary immunization.

Dr. Afia proposes that a package of immunization against measles, mumps and rubella be introduced, so that our children may be secured against these diseases in one go. She submits that a child has to be immunized against measles twice in his life once at the age of nine months and then at the age of fifteen months, at which age he can be immunized for mumps and rubella also. She emphasizes that for immunization to be effective it is absolutely necessary that a cold chain be maintained throughout i.e. from manufacturing units and upto the time of vaccination certain prescribed temperature should be maintained otherwise the vaccine may lose its efficacy.

Dr. Malik Tajuddin submits that though measles may prove fatal but rubella is not a fatal disease; he submits that in case, the pregnant woman is infected with rubella, there is 20% chances of the fetus being effected and harmed because of such infection.

Dr. Rumina Tabassum also points out that in our country 20% of the women of the child bearing age remain without immunization.

On the other hand Dr. Mansoor, Special Health Secretary, Govt. of Sindh submits that it is only after verification through Pathological test that cause of death can be ascertained and verified, whereas this year the sampling done by



NIH has revealed that there has been 24 cases of measles in Thatt and Sujawal this year; he submits that even then Govt. of Sindh has, on emergency basis, commenced a 12 days' Anti-Measles Campaign, which is called moping-off, to immunize children of the age of six months to ten years, throughout the Province, and by the end of the year, 13.3 lacs children shall stand immunize in the Province.

In response to the various allegations as contained in the report, referred by Mr. Vawda, Mr. Sarwar Khan, the learned Additional Advocate General Sindh submits that the report does not specify a single case of corruption or pilferage and in fact the disease may have spread on account of the recent flooding which not only created various other problems but also obstructed better health services to the people.

In view of the above discussions and keeping in view the scares national resources we would, for the time being, direct that an effective, wide spread awareness campaign be launched by Govt. of Sindh, making people aware of the adverse effect of the measles, rubella and other related diseases, their causes and the ways and means to prevent occurrence thereof. The campaign shall be so designed that every single person throughout the Province may become aware of what is being conveyed through such campaign. In doing so, the language employed should be such that each region in the Province may understand, the same including the technical aspect involved therein. Dr. Mansoor during his submissions has also informed this Court that apart from the various health units, lady health workers and vaccinators also carry out vaccination in various parts of the Province, such programme should be expanded and be made more effective under strict monitoring system, it should be ensured that every single health unit throughout the Province, of whatever level, or known by any name, should have adequate facilities for immunization



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and people should be made aware of such availability. Certainly, corruption, pilferage, inefficiency and irresponsible attitude has unfortunately become some of our main attributes, effective and strict measures should be adopted to eradicate the same. Such may be done by way of creating Vigilance Committees which may include local members of the Community. We would also request the media including print and electronic to give wide coverage to the awareness campaign whether they are paid for or not as this would be a great national service. School health service wherever available in private sector or in public sector may also include the immunization programme, as discussed above.

The petition alongwith the pending applications stands disposed of the in the foregoing terms.

Before parting we may express our deep appreciation for Dr. Afia Zafar, Chairperson Infection Cell of Aga Khan University Hospital, Dr. Rumina Tabasum, Professor Obstetrics & Gynae, Dow Medical University of Health Sciences, Dr. Malik Tajuddin, Professor Dow Medical University of Health Sciences, Dr. Mansoor, Special Sectrary Health, Govt. of Sindh & Dr. Mazhar Khausat, PDEPI, Health and all the learned counsel for providing valuable assistance to the Court in passing the above order.