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Dr. Mike Famulare \"Evolutionary epidemiology of vaccine-derived poliovirus transmission\" May10,2018

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Editorial from The New England Journal of Medicine —
Epidemiology of Poliomyelitis

Epidemiology of Poliomyelitis | NEJM

Abstract. Poliomyelitis has appeared in epidemic form, become endemic on a global scale, and been reduced to near-elimination, all within the span of documented medical history. Epidemics of the disease appeared in the late 19th century in many European countries and North America, following which polio became a global disease with annual

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epidemics.

From Emergence to Eradication: The Epidemiology of ...

From the point of view of public health the chief importance of poliomyelitis as a disease lies in its paralytic manifestations, and the main problem in the epidemiology of poliomyelitis concerns the cause or causes of the

THE EPIDEMIOLOGY OF POLIOMYELITIS: Problems at Home and ...

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EPIDEMIOLOGY OF POLIOMYELITIS - The Lancet

THE EPIDEMIOLOGY OF POLIOMYELITIS. Ward, Robert. Author Information. Section on Preventive Medicine, Yale University School of Medicine, New Haven. JBJS: October 1944 - Volume 26 - Issue 4 - p 829-832. Buy. Copyright © 1944 by The Journal of Bone and Joint Surgery, Incorporated. Source. THE EPIDEMIOLOGY OF POLIOMYELITIS.

THE EPIDEMIOLOGY OF POLIOMYELITIS : JBJS

Poliomyelitis has appeared in epidemic form, become endemic on a global scale, and been reduced to near-

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elimination, all within the span of documented medical history. Epidemics of the disease appeared in the late 19th century in many European countries and North America, following which polio became a global disease with annual epidemics.

From Emergence to Eradication: The Epidemiology of ...

A subgroup analysis among the paralytic polio patients showed that the increased mortality among respiratory polio patients was attributable to respiratory diseases (SMR = 3.57; CI = 1.61-7.96)), cardiovascular diseases (1.68; 1.01-2.78)) and unknown/ill defined causes (5.79; 2.76-12.15). Finally,

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a high percentage (29%) of this group of polio patients died of polio sequelae (data not shown).

Long-Term Mortality After Poliomyelitis : Epidemiology

the epidemiology of poliomyelitis: enigmas surrounding its appearance, epidemicity, and disappearance Indoor Tanning and the MC1R Genotype: Risk Prediction for Basal Cell Carcinoma Risk in Young People

Epidemiology of the Post-Polio Syndrome | American Journal ...

There is a wide range of disease presentations. The

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vast majority of people who are infected with the poliovirus don't become sick and have mild symptoms only, such as fever, malaise, headache, nausea and vomiting. Others experience severe muscle pain and stiffness in the neck and back. In the rare but most severe cases, paralysis and even death may occur.

Poliomyelitis (Polio, Infantile Paralysis) - Epidemiology

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Keywords: epidemiology, history of medicine, poliomyelitis, poliovirus, vaccines. From the viewpoint of medical history, the epidemiology of poliomyelitis provides an intriguing and instructive case study. Each new stage in the history of poliomyelitis was unpredicted at the time of its occurrence.

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3 to 6 days for nonparalytic poliomyelitis. 7 to 21 days for onset of paralysis in paralytic poliomyelitis. Paralysis is often permanent. Paralytic disease may be caused by wild-type polioviruses, attenuated polioviruses in oral vaccine, or by vaccine-derived polioviruses.

Pinkbook | Polio | Epidemiology of Vaccine

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Preventable ...

Serologic Epidemiology of Poliomyelitis Serologic Epidemiology of Poliomyelitis Joseph L. Melnick, John R. Paul, and Mary Walton 1955-04-01 00:00:00 the skin test surveys done with the tuberculin and Schick tests. By comparing sera from different areas we can learn objectively of the distribution and prevalence of infections in different parts of the globe.

Serologic Epidemiology of Poliomyelitis, American Journal ...

poliomyelitis include the continued transmission of wild polioviruses in endemic reservoirs, reinfection of polio-free areas, outbreaks due to circulating vaccine-

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derived polioviruses, and persistent excretion of vaccine-derived poliovirus by a few vaccinees with B-cell immunodeficiencies. Beyond the current efforts to eradicate

From Emergence to Eradication: The Epidemiology of ...

Vaccine-associated paralytic poliomyelitis: a review of the epidemiology and estimation of the global burden. Journal of Infectious Diseases 2014 ; 210 (Suppl. 1): S380 - 389 . 9.

Wild and vaccine-derived poliovirus circulation, and ...

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Fine PEM, Carneiro IAM. Transmissibility and Persistence of Oral Polio Vaccine Viruses: Implications for the Global Poliomyelitis Eradication Initiative. American Journal of Epidemiology. 1999;150(10):1001-1021. pmid:10568615 . View Article PubMed/NCBI Google Scholar 21.

Assessing the stability of polio eradication after the ...

Pathogenesis of Poliomyelitis, American Journal of Public... Poliovirus (PV) is the causal agent of paralytic poliomyelitis, an acute disease of the central nervous system (CNS) resulting in flaccid paralysis. The development of new animal and cell models... (PDF)

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Poliovirus, Pathogenesis of Poliomyelitis, and Apoptosis

Pathogenesis Of Poliomyelitis Journal

Eradication of poliomyelitis: when can one be sure that polio virus transmission has been terminated?
American Journal of Epidemiology 1996 ; 143 : 816 - 822 . 13.

Childhood immunization is one of the major public health measures of the 20th century and is now receiving special attention from the Clinton

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administration. At the same time, some parents and health professionals are questioning the safety of vaccines because of the occurrence of rare adverse events after immunization. This volume provides the most thorough literature review available about links between common childhood vaccines--tetanus, diphtheria, measles, mumps, polio, Haemophilus influenzae b, and hepatitis B--and specific types of disorders or death. The authors discuss approaches to evidence and causality and examine the consequences--neurologic and immunologic disorders and death--linked with immunization. Discussion also includes background information on the development of the vaccines and details about the case reports,

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clinical trials, and other evidence associating each vaccine with specific disorders. This comprehensive volume will be an important resource to anyone concerned about the immunization controversy: public health officials, pediatricians, attorneys, researchers, and parents.

Post-polio syndrome (PPS) embodies the new neuromuscular symptoms that patients with prior paralytic poliomyelitis develop after a stable course from 20 to 40 years. These include new muscle weakness, fatigue, muscular atrophy, muscle pain

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and various secondary muscular complaints. Fundamental questions regarding the neurobiology of the motor neurones previously affected by the poliovirus, the ongoing changes of the reinnervating process, and the potential role of the poliovirus in generating a chronic immune stimulation or viral persistence are discussed in this volume. Data from the neurological, immunological, virological, electrophysiological and rehabilitational fields is presented, shedding light on the pathogenesis of post-polio syndrome, as well as that of other motor neurone diseases such as amyotrophic lateral sclerosis (ALS).

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Global program of polio eradication is facing an existential crisis. The COVID-19 pandemic has disrupted all health programs and the global economy; the portents are not good for polio eradication. Polio eradication must succeed, for the sake of children in low income countries - for which we have clear ideas how to go forward. You can help also. In 2020, there were 876 children paralysed by

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vaccine-lineage viruses, in 25 countries, mostly in Africa, as against 139 natural cases of polio in two South Asian countries. For every case of natural polio there were 6 cases of vaccine-polio. Vaccine-lineage virus polio outbreaks began in 2000 and have since then slowly but steadily increased. This is untenable under the eradication program. Swept under the carpet repeatedly, the bulge is showing. We want to discuss the risks imposed by the current form of global public health agenda. We tell you more about it in this book. Eradication program began in 1988 with the target year of 2000 for finishing line. We are now in 2020, facing the COVID-19 pandemic, and polio is almost forgotten by global academia and media.

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Since 2000, the program has been spending about one billion US dollars of donations every year, but yet there is no light at the end of the tunnel. This is unsustainable for a public health program needed only in low income countries. Failing to reach the finish line is one crisis. Creating polio and polio outbreaks in the name of eradication is a second crisis. The risks of financial crunch are an impending potential crisis. Are you concerned? If so, you should read this book. We must all say together, enough is enough; the program has to return to track. All those who have donated any funds to the program, dreamed about a polio-free world, spent any time for its success, taught about the program in academic

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and professional institutions, those who think about, believe and teach biomedical and public health ethics, health economics and disease epidemiology, the media as the conscience-keeper of the people and their governments, all of us are stakeholders. It is not enough to enumerate the symptoms of the malady, but we define its diagnosis and cause, presented with reasoning and evidence, and its remedy. All these and more, you will read in this book. Polio is eminently preventable - both natural polio and vaccine-virus polio: absolutely no doubt about it. Only when every polio case is prevented and all children protected from polio, by what rich countries do for assured polio prevention in their children, can we move ahead for

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completing global polio eradication. The world is already riddled with the myriad problems of the rich-poor divide. Public health programs, polio eradication being its most prominent long pending agenda, must not aggravate the inequity further. There is no polio in high income countries as it has been totally eliminated by the readily available intervention tools. Equity must be the synonym of public health. Double standard is not accepted in public health. Will you also lend your voice to our shouts? Please do let us know.

In the 20th century, poliomyelitis emerged to become a globalcrippler and killer. But, with the development

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of preventive vaccines in the 1950s, it looks set to be the first disease to be eliminated by direct human intervention. Divided into four parts, this book presents a world geography of poliomyelitis.

A history of the 1950s polio epidemic that caused panic in the United States examines the competition between Salk and Sabin to find the first vaccine and its implications for such issues as government testing of new drugs and manufacturers' liability.

Visually rich Netter artwork and detailed yet concise text provide you with an overview of general neurology and its intersection with internal medicine,

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neurosurgery, ophthalmology, psychiatry, and orthopedics.

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