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WORLD PNEUMONIA DAY: TIME FOR RENEWED GLOBAL ACTION AGAINST THIS FORGOTTEN KILLER OF CHILDREN

A [Comment](#) in this week's edition of The Lancet highlights the first ever World Pneumonia day, and the forthcoming strategy of WHO and UNICEF to tackle this forgotten killer of children. The [Comment](#) is written by Dr Bill Frist, Vanderbilt University, Nashville, TN, USA, and Dr Richard Sezibera, Minister of Health for Rwanda. Dr Frist is the former US Senate Majority Leader, a trustee of Save the Children, and chairs the Survive to 5 Campaign and Hope Through Healing Hands.

Of the 9 million children aged under-5 who die each year, 2 million die from pneumonia. The authors say that nearly half and these deaths could be prevented with existing vaccines, and the majority of cases could be treated with inexpensive antibiotics.

There are signs that the global community is ready to take on childhood pneumonia. The recently formed Global Coalition against Pneumonia, nearly 100 members strong and counting, is an international network dedicated to fighting this disease. Advocates hope that the first ever World Pneumonia Day (November 2) will help focus attention on the condition.

The authors discuss the forthcoming 6-year plan from WHO and UNICEF- the Global Action Plan for Prevention and Control of Pneumonia (GAPP). The plan, which will be released on World Pneumonia day, aims to place children in an environment where they are at low risk of pneumonia, prevent them developing it, and treating those who contract it. Key interventions include exclusive breastfeeding in the first six months of life, use of vaccines, and management of the condition in clinics and, importantly, at the community level. The authors predict that successful implementation of GAPP could substantially reduce child pneumonia mortality.

The authors conclude: "We live in a world with infinite possibilities. Hearts are transplanted, DNA is decoded, and new medical discoveries are made every day. Yet we continue to be stymied by how best to reach those in resource-poor settings with the most basic care and medicines that we take for granted. What could break through this conundrum? The answer is a committed community in both donor and developing countries to make the health of children a priority, combined with a simple package of

interventions that address the greatest challenges to survival. Resources and political will are standing between children and their futures. With the right tools, we should not fail the next generation of leaders and doctors.”

See also [Seminar](#) on pneumonia.

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For full [Comment](#) see: <http://press.thelancet.com/pneumcomm.pdf>

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