PNEUMONIA THE FORGOTTEN KILLER OF CHILDREN





PNEUMONIA

THE FORGOTTEN KILLER OF CHILDREN

ACKNOWLEDGEMENTS

This report was prepared by

Tessa Wardlaw (UNICEF), Emily White Johansson (UNICEF) and Matthew Hodge, and produced by UNICEF's Division of Communication.

Many people provided valuable contributions to this report. Important overall guidance and advice were provided by

Robert Black, Cynthia Boschi-Pinto, Jennifer Bryce, Harry Campbell, Gareth Jones, Orin Levine, Elizabeth Mason, Kim Mulholland, Shamim Ahmad Qazi, Igor Rudan, Peter Salama, Eric Simoes, Nancy Terreri, Pascal Villeneuve and Neff Walker.

Key data, information and materials were contributed by

Kim Mulholland (pathogen-specific causes), Igor Rudan (incidence estimates), Kenji Shibuya with Doris Ma Fat (cause-specific mortality estimates) and Neff Walker (costing estimates), and WHO (country-level pneumonia mortality estimates).

Additional inputs were provided by Nyein Nyein Lwin and Diakhate Ngagne.

Pneumonia: The forgotten killer of children

© The United Nations Children's Fund (UNICEF)/World Health Organization (WHO), 2006.

All rights reserved.

UNICEF and the World Health Organization welcome requests for permission to reproduce or translate their publications – whether for sale or for non-commercial distribution. Applications and enquiries should be addressed to UNICEF, Division of Communication, 3 United Nations Plaza, New York 10017, USA (Fax: +1 212 303 7985; E-mail: nyhqdoc.permit@unicef.org) or to WHO Press, World Health Organization, Avenue Appia 20, 1211 Geneva 27, Switzerland (Tel.: +41 22 791 3264; Fax: +41 22 791 4857; E-mail: bookorders@who.int). Requests for permission to reproduce or translate WHO publications – whether for sale or for noncommercial distribution – should be addressed to WHO Press, at the above address (Fax: +41 22 791 4806; E-mail: permissions@who.int).

The designations employed and the presentation of the material in this publication do not imply the expression of any opinion whatsoever on the part of UNICEF or the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted lines on maps represent approximate border lines for which there may not yet be full agreement.

The mention of specific companies or of certain manufacturers' products does not imply that they are endorsed or recommended by UNICEF or the World Health Organization in preference to others of a similar nature that are not mentioned. Errors and omissions excepted, the names of proprietary products are distinguished by initial capital letters.

All reasonable precautions have been taken by UNICEF and the World Health Organization to verify the information contained in this publication. However, the published material is being distributed without warranty of any kind, either expressed or implied. The responsibility for the interpretation and use of the material lies with the reader. In no event shall UNICEF or the World Health Organization be liable for damages arising from its use.

UNICEF/WHO, Pneumonia: The forgotten killer of children, 2006

ISBN-13: 978-92-806-4048-9 ISBN-10: 92-806-4048-8

TABLE OF CONTENTS

Introduction	4
	0
Background on pneumonia	
What causes pneumonia?	
What are the symptoms of pneumonia?	
How is pneumonia diagnosed?	
How is pneumonia transmitted?	8
Why are children vulnerable?	8
How is pneumonia prevented?	9
How is pneumonia treated?	9
Pneumonia: Who suffers, Who dies?	10
Levels and trends in knowledge and treatment	
Recognition of pneumonia's danger signs	
Care-seeking behaviour	16
Antibiotic treatment for pneumonia	20
	00
Key actions needed to reduce pneumonia deaths	22
The cost of reducing pneumonia deaths	
Pneumonia: A forgotten pandemic	29
Appendix	30
References	31
	0.4
Statistical tables	34

 PNEUMONIA KILLS MORE

 CHILDREN THAN ANY OTHER

 ILNESS - MORE THAN AIDS,

 MALARIA AND MEASLES

 COMBINED. OVER 2 MILLION

 CHILDREN DIE FROM PNEUMO

 NIA EACH YEAR, ACCOUNTING

 FOR ALMOST 1 IN 5 UNDER

 FIVE DEATHS WORLDWIDE.

 YET, LITTLE ATTENTION IS PAID

 TO THIS DISEASE.

INTRODUCTION

YET, LITTLE ATTENTION IS PAID TO THIS DISEASE. This report examines the epidemiological evidence on the burden and distribution of pneumonia and assesses current levels of treatment and prevention. The results are sobering: Only about 1 in 5 caregivers knows the danger signs of pneumonia; only about half of children sick with pneumonia receive appropriate medical care; and, according to the limited data available, less than 20 per cent of children with pneumonia received antibiotics, the recommended treatment.

Effective interventions to reduce pneumonia deaths are available, but reach too few children. Scaling up treatment coverage is possible, and at relatively low cost. Estimates suggest that if antibiotic treatment were universally delivered to children with pneumonia, around 600,000 lives could be saved each year, at a cost of \$600 million.¹ Furthermore, the number of lives saved could more than double to 1.3 million if both prevention and treatment interventions to reduce pneumonia deaths were universally delivered.

Our hope is that this report will raise awareness about this neglected disease and will serve as a call to action to reduce child deaths from pneumonia.

COUNTING UNDER-FIVE DEATHS FROM PNEUMONIA

Figure 1 presents the global distribution of the primary causes of all under-five deaths and shows that pneumonia kills more children than any other illness – accounting for 19 per cent of all under-five deaths (*see the Appendix for more detailed information on these estimates of cause-specific mortality*).

This figure, however, does not include deaths due to pneumonia during the first four weeks of life, the neonatal period. It has been estimated that 26 per cent of neonatal deaths, or 10 per cent of all under-five deaths, are caused by severe infections during the neonatal period. And a significant proportion of these infections is caused by pneumonia/sepsis (sepsis is a serious blood-borne bacterial infection that is also treated with antibiotics). If these deaths were included in the overall estimate, pneumonia would account for up to 3 million, or as many as one third (29 per cent), of under-five deaths each year.

FIGURE 1 PNEUMONIA IS THE LEADING KILLER OF CHILDREN WORLDWIDE

Global distribution of cause-specific mortality among children under five, 2004



Undernutrition is implicated in 53% of all deaths among children under five.

BOX1

GLOBAL GOALS AND TARGETS FOR REDUCING CHILD MORTALITY AND PNEUMONIA DEATHS

Reducing child mortality is one of the eight Millennium Development Goals (MDGs), which are the world's timebound targets for reducing poverty in its various dimensions by 2015. Specifically, Goal 4 calls for reducing underfive mortality by two thirds between 1990 and 2015. Achieving the MDG on child mortality will require urgent action to reduce childhood pneumonia deaths, which account for 19 per cent of all under-five deaths.

Millennium Development Goals

• Goal 4: Reduce child mortality Reduce by two thirds, between 1990 and 2015, the under-five mortality rate.

A World Fit for Children – Plan of Action: Goals, Strategies and Actions

• Reduce by one third deaths due to acute respiratory infection between 2000 and 2010 (section III.B.1, para. 37).

FIGURE 2 PNEUMONIA IS A MAJOR CAUSE OF CHILD DEATHS IN EVERY REGION

% under-five deaths due to pneumonia, by UNICEF region, 2004

% total under-five deaths					
0	20	40	60 80	100	
21%	13%	South Asia			
21%	7%	Sub-Saharan Africa	Pneumonia		
15%	11 %	Middle East and North Africa	Neonatal severe infections (mainly pneumonia/sepsis	s)	
15%	9%	East Asia and Pacific			
14%	8%	Latin America and Caribbean			
13%	8%	CEE/CIS (Central and Eastern Eu	rope and the Commonwealth of Independent States)		
20%	9%	Developing countries	Pneumonia		
<mark>2%</mark>		Industrialized world	Neonatal severe infections (mainly pneumonia/sepsis	;)	
19%	10%	World			

BACKGROUND

Acute respiratory infections can occur in any part of the respiratory system, from the middle ear to the nose to the lungs.² Pneumonia is a severe form of acute lower respiratory infection that specifically affects the lungs.

The lungs are composed of thousands of tubes (bronchi) that subdivide into smaller airways (bronchioles), which end in small sacs (alveoli). The alveoli contain capillaries where oxygen is added to the blood and carbon dioxide is removed. When a person has pneumonia, pus and fluid fill the alveoli in one or both lungs, which interferes with oxygen absorption, making breathing difficult.

Most acute respiratory infections result in mild illnesses, such as the common cold. But in vulnerable children, infections that begin with mild symptoms may sometimes lead to more severe illnesses, such as pneumonia – especially when they

预览已结束, 完整报告链接和二维码如下:

https://www.yunbaogao.cn/report/index/report?reportId=5 29751

