13. Conclusions and Recommendations

The spread of dengue and chikungunya fever in the world is a serious public health concern. The frequent outbreaks are burdening the health systems and resources. Hence, implementation of Asia-Pacific Strategic Plan for Dengue Prevention and Control is imperative in all member countries. Chikungunya fever control should be integrated in the strategic plan, as appropriate. In this background, the regional meeting on Dengue and Chikungunya fever was held with participation from SEAR member countries and wide range of experts and staff from the WHO headquarters, SEA Regional Office and country offices. There was broad consensus on forward steps and road map for integrated approaches and improved implementation of the national Strategic Plan for effective control dengue and chikungunya fever; and research priorities.

Key recommendations made were as follows:

For the member countries—

- Dengue has emerged as a major public health threat across the world with serious health and socio-economic consequences; hence, concerted advocacy is necessary to specifically mention the disease in the Millennium Development Goals (MDGs) towards strengthening of response.
- Rapid spread of chikungunya fever in several countries of the world particularly in the Asia-Pacific Region is alarming; and appropriate control strategy should be integrated within the Asia-Pacific Dengue Strategic Plan (2008-2015).
- 3) All member countries should develop/ further strengthen the national Dengue Strategic Plan in line with the Asia-Pacific Dengue Strategic Plan 2008-2015 and ensure harmonized implementation and close review. Chikungunya fever control needs to be integrated in the plan.
- 4) Sensitization of member countries on dengue and chikungunya fever is imperative within the respective WHO Country Cooperation Strategy. Implementation of the strategies in line with the Asia-Pacific Strategic Plan should be facilitated by the WHO.
- Dengue and Chikungunya fever re-emerging with frequent outbreaks are of major public health concern. The diseases are now under purview of IHR

- 2005; and all countries are mandated to develop core capacities to detect, respond and notify new events of epidemics.
- 6) Primary Health Care approach should be revitalized to ensure sustained community involvement and inter-sectoral collaboration for prevention and control of dengue and chikungunya fever.
- 7) Communication for behavioural impact (COMBI) and social mobilization together with political commitment are crucial for dengue and chikungunya fever prevention and control and hence, the member countries should be encouraged for sustained implementation. The successful experiences need to be shared for replication, as locally appropriate.
- 8) Prevention and control of dengue and chikungunya fever is everyone's' responsibility and an environmental approach is imperative and sustainable. Country capacity for Integrated Vector Management (IVM) and entomology should be strengthened.

• For the WHO—

- 9) The revised Comprehensive Guidelines on Prevention and Control of Dengue should be harmonized with the new WHO-TDR/HQ guidelines, as contextually appropriate. The guidelines to be updated in respect of epidemic preparedness, outbreak alert and response.
- 10) Case definition for both dengue and chikungunya fever need to be harmonized across member countries and case management should be strengthened to preclude fatality.
- 11) Research priorities should be in the areas of estimation of disease burden, economic burden on health systems, insecticide resistance.