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Pneumonia: Indonesia's forgotten child killer

Sri Rezeki S. Hadinegoro , Jakarta | Thu, 07/03/2008 10:38 AM | Opinion

Indonesia is modernizing rapidly, yet there is one area in which we can still make vast improvements: child health. Several preventable and treatable diseases continue to collectively claim the lives of thousands of Indonesian children each year. But no illness here kills more than childhood pneumonia.

As a pediatrician and chairwoman of the Indonesian Technical Advisory Group (TAG) on Immunization, I am deeply concerned by the toll that childhood pneumonia exacts on our nation. Thanks to widely available vaccines, rates of pneumonia declined dramatically in industrialized nations over the last century.

Rates in developing countries, however, continue to soar. As the leading cause of child death worldwide, pneumonia kills more than two million children under five each year. Here in Indonesia, that translates to an estimated 25,000 annual deaths of our most vulnerable citizens.

In an effort to confront this problem, this week there will be the Fourth Asian Congress of Pediatric Infectious Diseases (ACPID), a meeting of leading child health experts in the Asian region, in Surabaya, East Java. As president of this congress, I am encouraging pediatricians throughout Asia to discuss ways that we can better improve child health. According to UNICEF, preventing childhood pneumonia is critical to reaching the Millennium Development Goal target of reducing child deaths. Consequently, addressing this neglected disease is high on the agenda.

The fight against childhood pneumonia has reached a crucial point in Asia. New research has emerged that indicates the disease's staggering impact on children here. Studies from Surabaya and Bali presented in June confirmed that Indonesian infants face significant risk of severe infection or death due to pneumococcal disease.

Considering that the main outcome of pneumococcal disease is pneumonia, the studies indicate the need for prevention strategies against respiratory disease. Another main cause of childhood pneumonia is *Haemophilus influenzae* type B (Hib), which together with pneumococcus is also a main cause of meningitis. A recent study proved the Hib vaccine to be a highly cost-effective option in Indonesia.

Vaccines against pneumococcus and Hib are part of routine immunization programs in many countries, as per the World Health Organization's recommendation. Although such vaccines are available on the private market in Indonesia, they rarely reach those at the highest risk of dying of these diseases.

Indonesia is planning to include Hib and pneumococcal vaccines in our National Immunization Program with the support of the GAVI Alliance, an international partnership devoted to funding child health initiatives. Such a step would likely trigger enormous gains in Indonesian child health.

We also already have available many simple, low-cost interventions for protecting children from pneumonia. If all mothers exclusively breast-fed their infants, minimized air pollution indoors, ensured that their children have enough food and wash their hands, they could reduce their children's risk of contracting these illnesses. Studies suggest that zinc supplementation may also help prevent pneumonia.

Not all episodes of pneumonia can be prevented. To reduce deaths from these conditions, all children must have access to high-quality care when they are sick, regardless of where they live and their parents' income. We can achieve this by paying special attention to the needs of disadvantaged children.

Finally, we must educate Indonesian parents and healthcare providers to recognize early symptoms of respiratory infections, and ensure timely access to inexpensive and effective treatments for sick children.

We can protect Indonesia's most vulnerable children from needless diseases, and we already have the resources and support required to do so. I hope the messages arising from the ACPID meeting this week raise awareness of pneumonia among government, health institutes, pediatricians and parents in this country.

And beyond increasing knowledge, I hope that those in power take urgent steps to reduce this disease's impact. Let's renew our focus on Indonesia's promising future by investing in those who will drive it -- our children.

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