Diseases know no borders, so CDC is ready to protect the U.S. by rapidly detecting and containing emerging health threats—whether infectious or chronic—anywhere in the world. We support strong, effective public health systems, and we train health professionals to rapidly detect outbreaks in their own countries to prevent threats from crossing borders. We also work to make sure people have access to safe water and sanitation around the world, which is a critical step to preventing disease and other health threats.

148 Cases
Assisted partners to reduce the number of Guinea worm cases to a record low in 2013—148 cases in countries where the infection is common.

750
CDC-supported field programs conducted more than 750 investigations in the past 2 years in 35 countries.

$50 Billion Saved
Polio eradication could save the world up to $50 billion by 2053.

KEY ACCOMPLISHMENTS

- Responded to more than 288 global disease outbreaks through CDC’s Global Disease Detection Centers.
- Strengthened public health systems in 47 countries through the Field Epidemiology Training Program (FETP), which has graduated more than 3,000 highly trained disease detectives since 1980, approximately 80% of whom remain in their countries.
- Collaborated with partners to eradicate polio from the world, now with a 99% decline. Since 1988, the number of countries reporting polio cases has declined from 125 countries with 350,000 cases to only 3 countries with 406 cases.
- Provided more than 1,800 CDC staff to more than 44 countries by 2013, through the President’s Emergency Plan for AIDS Relief (PEPFAR), to identify, treat and prevent HIV infections. So far, the PEPFAR program has treated 6.7 million men, women, and children and prevented more than 1 million babies from being infected with HIV.

Nearly 14 Million Lives Saved
The measles vaccine has saved 13.8 million lives from 2000–2012.

THE HUMAN FACE OF DISEASE

I spent a year in Bangladesh with CDC’s Global Disease Detection Center figuring out what puts people at risk for Nipah virus, which causes inflammation of the brain and severe respiratory problems. More than 75% of Bangladeshi patients with the virus die. Visiting a remote hospital, we found a boy unconscious in his mother’s arms, whimpering in agony from inflammation of his brain. His test results for Nipah fever would take days, so I used the investigative tools I had to better understand his condition.

Experiences like this helped me see both the human face of the disease I was investigating and the value of scientific study in preventing human suffering. I looked at this boy not as research, but as a child in misery. To alleviate his pain is the greatest need in the world, and that is what we, the scientific community, are working to do.

—Sonia Hegde, MPH-ASPH Fellow, CDC

A boy with Nipah virus receives basic care. Currently, no drug or vaccine can treat Nipah virus infection.

A child suffers from inflammation of the brain caused by Nipah virus.