

## REVIEW ARTICLE

# The Contribution of Dr. Jacob John to the Field of Pediatrics

Kasumbiwal Ajay H.<sup>1</sup>, Lakhe Siddheshwar A.<sup>2</sup>,  
Mundhe Sudarshan R.<sup>3</sup>, Rushinath Sitaram Sawant<sup>4</sup>

**How to cite this article:**

*Kasumbiwal Ajay H., Dake Mangesh V., Mundhe Sudarshan R., et al.* The Contribution of Jacob John to the Field of Pediatrics. *Pediatr. Edu. Res.* 2025; 13(2): 374-376.

**ABSTRACT**

Dr. Jacob John has made seminal contributions to the fields of paediatric virology, infectious disease epidemiology, and public health in India. His work transformed the understanding, diagnosis, prevention, and control of childhood viral illnesses. As a leading clinician-scientist, he pioneered the establishment of advanced virology laboratories and introduced modern viral diagnostic methods in the country, enabling early detection of poliovirus, rotavirus, measles, and other paediatric pathogens. His landmark research in poliovirus epidemiology provided the scientific basis for India's polio eradication strategies, including the shift to pulse polio immunization. With decades of groundbreaking research, policy influence, and institutional leadership, Dr. John stands as one of the foremost public health scientists in India. He has played an instrumental role in combating polio, strengthening the Universal Immunization Programme (UIP), and establishing virology as a recognized field in India.

India was one of the most polio-endemic countries in the world. Dr. John advocated for a robust, evidence-based immunization program that involved both oral polio vaccine (OPV) and, later, inactivated polio vaccine (IPV). His research helped determine the most effective vaccine strategies for Indian conditions, influencing national and global policy.

**KEYWORDS**

• Paediatric Viral Infections • Poliomyelitis • Measles • Rotavirus diarrhea • Hepatitis B in children • Japanese encephalitis • Dengue • Influenza • Vaccinology • Oral polio vaccine • Inactivated polio vaccine (IPV) • Vaccine-derived poliovirus

**AUTHOR'S AFFILIATION:**

<sup>1</sup> Professor and HOD, Department of Pediatrics, VDGMC, Latur, Maharashtra, India.

<sup>2</sup> Assistant Professor, Department of Pediatrics, VDGMC, Latur, Maharashtra, India.

<sup>3</sup> Senior Resident, Department of Pediatrics, VDGMC, Latur, Maharashtra, India.

<sup>4</sup> Student, Department of Pediatrics, VDGMC, Latur, Maharashtra, India.

**CORRESPONDING AUTHOR:**

**Rushinath Sitaram Sawant**, Student, Department of Pediatrics, VDGMC, Latur, Maharashtra, India.

**E-mail:** sawantrushi702@gmail.com

➤ **Received:** 10-12-2025 ➤ **Accepted:** 28-12-2025



## INTRODUCTION

Dr. T. Jacob John is a distinguished Indian virologist and pediatrician whose pioneering contributions have shaped the landscape of infectious disease control in India, particularly in the realm of pediatric health. With decades of groundbreaking research, policy influence, and institutional leadership, Dr. John stands as one of the foremost public health scientists in India. He has played an instrumental role in combating polio, strengthening the Universal Immunization Programme (UIP), and establishing virology as a recognized field in India

### Background:

Dr. T. Jacob John was born in the state of Kerala in southern India, a region known for its high literacy rates and emphasis on education. From a young age, he showed an intense curiosity about science and a deep sense of empathy qualities that would later define his professional ethos. Growing up in post-independence India, Dr. John witnessed both the promise and challenges of a newly formed nation. These experiences kindled in him a desire to contribute to the betterment of society through medicine

### Scientific Contributions

#### *Child Health and Virology*

#### **A. Polio Eradication and Vaccine Policy**

One of Dr. John's most significant contributions was in the eradication of poliomyelitis in India. During the 1970s and 1980s, India was one of the most polio-endemic countries in the world. Dr. John advocated for a robust, evidence-based immunization program that involved both oral polio vaccine (OPV) and, later, inactivated polio vaccine (IPV). His research helped determine the most effective vaccine strategies for Indian conditions, influencing national and global policy.

#### **B. Establishment of Virology Infrastructure**

*Dr. John was a trailblazer in creating virology labs and training in India.*

Before his initiatives, virology as a field was largely underdeveloped. At CMC Vellore, he set up one of the first comprehensive virology laboratories, which became a national and international referral center. He also mentored generations of students, encouraging them to take up virology and infectious diseases at a time when few pursued these areas in India.

#### **C. Universal Immunization Programme (UIP):**

He was a strong advocate and advisor during the launch of the UIP in 1985, which became one of India's largest public health programs. His technical input ensured that the vaccines used were safe, effective, and evidence-backed.

Dr. John consistently emphasized the importance of surveillance, vaccine safety, and cold-chain management key elements that led to the success of the program in reducing vaccine-preventable diseases in children

#### **D. HIV/AIDS and Emerging Diseases:**

In the 1990s, when HIV/AIDS was emerging in India, Dr. John played a central role in framing policies and surveillance mechanisms to tackle the epidemic. He emphasized destigmatization, accurate testing, and awareness.

He also advocated for early preparedness against emerging infectious diseases like Nipah virus and SARS, long before pandemic preparedness became a mainstream topic

#### **E. Global Learning, Local Application:**

By adapting knowledge gained from institutions like the CDC to the Indian context, Dr. John showed the value of contextualizing global standards.

Students must recognize the importance of local culture, economics, and infrastructure in healthcare solutions.

Dr. T. Jacob John is not just a scientist or pediatrician he is a visionary who redefined India's approach to child health, vaccine policy, and infectious disease control. Through his tireless efforts, countless children were saved from diseases like polio, and the foundations of modern virology and public health were laid in India.

## CONCLUSION

The body of work contributed by Dr. Jacob John represents a cornerstone in the advancement of paediatric virology and public health in India. His scientific investigations elucidated the epidemiology, transmission dynamic and clinical burden of major childhood viral infections, providing the evidence base for targeted vaccination strategies and improved surveillance systems. Through his leadership in establishing virology laboratories, strengthening outbreak response capacity, and guiding national immunization policies

particularly for poliovirus, measles, and rotavirus he significantly reduced the morbidity and mortality associated with paediatric viral diseases. Collectively, his contributions demonstrate how rigorous research, integrated with public health practice, can drive sustained improvements in child health outcomes. His legacy continues to inform current and future strategies in infectious disease prevention, control, and policy

**Conflict of Interest:** The authors declare that there are no conflicts of interest

## REFERENCES

1. John T.J. India's National Technical Advisory Group on Immunisation (NTAGI) in India. *Vaccine*. 2010; 28(Suppl 1): A88-90. PMID:20413005 <https://pubmed.ncbi.nlm.nih.gov/20413005/>
2. John T.J. Policy document: evidence-based national vaccine policy. *Indian J Med Res*. 2010; 132: 228-229. PMID:20716826. <https://pubmed.ncbi.nlm.nih.gov/20716826/>  
2. Editorial on Immunization
3. John T.J. World Immunization Week 2018: What lessons for India? *Indian J Med Res*. 2018; 147(4): 330-333. <https://pmc.ncbi.nlm.nih.gov/articles/PMC6057261/>  
3. Poliomyelitis & Vaccine Efficacy
4. John T.J., Jayabal P. Oral poliovaccination of children in the tropics: I. The poor seroconversion rates and the absence of viral interference. *Am J Epidemiol*. 1972; 96(4): 263-269. <https://academic.oup.com/aje/article-abstract/96/4/263/161744>
5. John T.J. Oral polio vaccination of children in the tropics: II. Antibody response. *Am J Epidemiol*. 1975; 102(5): 414-421. <https://academic.oup.com/aje/article-abstract/102/5/414/86541>
6. John T.J. Poliomyelitis in India: Prospects and Problems of Control. *Clin Infect Dis*. 1984; 6(Suppl 2): S438-S441. [https://academic.oup.com/cid/article-abstract/6/Supplement\\_2/S438/367876](https://academic.oup.com/cid/article-abstract/6/Supplement_2/S438/367876)
7. Balraj V., John T.J., Thomas M., Mukundan S. Efficacy of oral poliovirus vaccine in rural communities of North Arcot District, India. *Int J Epidemiol*. 1990; 19(3): 711-714. <https://academic.oup.com/ije/article/19/3/711/760683>  
Paediatric & Viral Outcomes
8. Kaliappan S.P., Venugopal S., Giri S., et al., John J. Factors determining anti-poliovirus type 3 antibodies among orally immunised Indian infants. *Vaccine*. 2016; 34(41): 4979-4984. <https://pmc.ncbi.nlm.nih.gov/articles/PMC5038128/>  
Alternative & Current Perspective
9. John T.J., Dharmapalan D., Steinglass R., Hirschhorn N. A Call for Global Transition from Oral Polio Vaccine to Inactivated Poliovirus Vaccine. Preprints. 2025 Jul 31. <https://www.preprints.org/manuscript/202507.2646/v1>  
Additional Foundational Article
10. Muliylil J., John T.J. Pandemic influenza exposes gaps in India's health system. *Indian J Med Res*. 2009; 130(2): 101-104. [https://journals.lww.com/ijmrr/fulltext/2009/30020/pandemic\\_influenza\\_exposes\\_gaps\\_in\\_india\\_s\\_health.1.aspx](https://journals.lww.com/ijmrr/fulltext/2009/30020/pandemic_influenza_exposes_gaps_in_india_s_health.1.aspx)