

# Americas approach African disease level

by Gretchen Small

The collapse of the physical economy of Central and South America has transformed many of these nations into gigantic petrie dishes of disease. In addition to cholera, also malaria, tuberculosis, leprosy, AIDS, and even measles are now at epidemic proportions in several countries.

The advance of cholera remains unchecked. Health officials reported the first cases of cholera in Bolivia on Aug. 26, and one week later, announced that the disease had claimed its first victim. Argentine authorities immediately ordered stricter controls on the border with Bolivia, because of the amount of fresh food, and numbers of migrants, which enter into Argentina.

So far, in Brazil, 99% of the cholera cases have been limited to the Alto Solimoes River region, near the Peruvian border. The numbers of infected have risen steadily. In April, when the disease first appeared in Brazil, there were only 1.3 new cases identified each week; by mid-August, that number had risen to 19 new cases per week. Health Minister Alenci Guerra requested on Sept. 3 that the government allocate another 10 billion cruzeros to finance anti-cholera programs there and in other parts of the country, which he has warned could face outbreaks at any time. As Baldur Schubert, a member of the National Commission to Combat Cholera, pointed out, for every person infected with the disease there are another 8-10 carriers who are asymptomatic but who can infect others. With an official count of 103 cases so far, that means there are an estimated 700 asymptomatic carriers capable of spreading the disease, who cannot be subjected to any type of control, Schubert noted.

In Colombia, "cholera has already . . . become a calamity," *El Tiempo* warned Aug. 27. Chastising the Health Ministry for inaction, the paper noted that the disease "has already been detected in 13 departments. . . . Cholera has been affecting the continent and the country for months, sufficient time for a good campaign—both curative and preventive—to have been mounted. Perhaps it is already under way, but if it is, it must be intensified, because the disease has already begun to get the upper hand."

Colombia's health system is so collapsed from the past decade of underinvestment that hospital workers in the Cauca region went on strike at the end of August over the lack of equipment. *El Tiempo* cited as an example Aug. 28, the fact that a shortage of disposable syringes has forced hospital employees to reuse needles, creating conditions for an explosion of diseases such as AIDS.

## Summer holocaust

All this is minor compared to the expansion of cholera expected in the Southern Hemisphere once warmer weather arrives. Peruvian Health Minister Victor Yamamoto reported Sept. 6 that there is already a new severe outbreak in the Amazon River region, caused by heat and the lack of drinking water, which has killed 400 people so far. The outbreak is particularly intense in the Amazonian city of Iquitos, and in indigenous communities near the Brazilian and Colombian borders, Yamamoto said.

More than 2,500 people have died from cholera in Peru since the epidemic began at the end of January. But the epidemic could worsen with the imminent arrival of the "El Niño" current, the Pacific Ocean's warm water flow which makes an appearance every six or seven years, Yamamoto stated. The warm water current kills cold-water marine mammals and causes droughts and floods throughout the continent. Combined with the onset of summer in December, he said, the El Niño current could cause a resurgence of the disease in coastal areas where it had been previously brought under control.

Argentine health officials have privately warned that the summer will bring cholera into their country as well. The collapsing health system is already strained by a measles epidemic and severe outbreaks of leprosy and tuberculosis. Forty-one children have died from measles so far this year, because they were not vaccinated. As an emergency measure, the government had to import 236,000 vaccine doses from Chile and Brazil.

Peru, the hardest hit by cholera, faces a myriad of epidemics. Four people have died thus far from malaria in the northern city of Piura, according to *La República*, the first time that disease has struck this area of the country. The primary cause of the population's increasing vulnerability to multiple diseases is the collapse of nutrition levels and sanitation resulting from the economic "shock therapy" of the government's International Monetary Fund program which has driven the population down to African levels of consumption.

What no government has been willing to face, however, is that the AIDS epidemic may reach African levels of infection within the decade. Opening the Fourth Brazilian Congress on Infectious Diseases on Aug. 28, U.S. Dr. Warren Johnson warned that, by the year 2000, Brazil could have the largest number of AIDS carriers in the world. Johnson, considered one of the world's leading experts on infectious disease, reviewed the poor conditions in Brazilian hospitals where the risk of contracting any disease is so high that 20-25% of Brazilian patients die of infections contracted while hospitalized. As another U.S. doctor, Richard Roberts from Cornell University, reminded the conference, the rapid propagation of AIDS and rate of hospital infection in Brazil will only be resolved through a political decision on the part of the Brazilian government.