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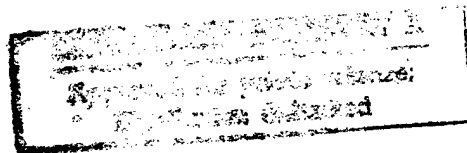
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Worldwide Report

EPIDEMIOLOGY

No. 292



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WORLDWIDE REPORT

EPIDEMIOLOGY

No. 292

CONTENTS

HUMAN DISEASES

AUSTRALIA

Import License Denied to Improved Rubella Vaccine
(Christine Herd; THE AUSTRALIAN, 21 Jun 72) 1

BAHRAIN

Briefs
No New Typhoid Cases 2

BRAZIL

Epidemics Decimate Indians in Amazon Region
(Rosane Garcia; CORREIO BRAZILIENSE, 18 Jul 82) 3

Briefs
Urban Yellow Fever Control 5
Meningitis in Santa Catarina 5

CHILE

Incidence of Sexuality Transmitted Diseases Increases
(EL MERCURIO, 10 Jul 82) 6

GHANA

Briefs
Cholera Infested Region 7

INDIA

Briefs
Malaria in North Bengal 8

INDONESIA

Briefs

Gastroenteritis in Banyumas District	9
Gastroenteritis in Cilacap District	9

JAMAICA

Briefs

Typhoid Report 'Correction'	10
-----------------------------	----

MALAWI

Briefs

Certified Rabid Beef	11
----------------------	----

MALAYSIA

Cholera Epidemic Abating in Some Areas of Sabah (BORNEO BULLETIN, 17 Jul 82)	12
---	----

Dengue Epidemic Declared in Kalantan (NEW STRAITS TIMES, 20 Jul 82)	13
--	----

NAMIBIA

Allegations of Hepatitis Epidemic Squashed (THE WINDHOEK ADVERTISER, 29 Jul 82)	14
--	----

NIGERIA

Briefs

Unfit Canned Food	15
-------------------	----

PEOPLE'S REPUBLIC OF CHINA

Improvements Urged in Communicable Disease Reporting (Huang Zemin; JIANKANG BAO, 24 Jun 82)	16
--	----

Early Detection, Treatment of Leprosy Described (JIANKANG BAO, 20 Jun 82)	18
--	----

Outpatient Treatment Center, by Huang Caigang
Recognition of Workers, by Zhang Zhongtian

Hepatitis Virus Hypocyte Asexually Reproduced (GUANGMING RIBAO, 14 Jun 82)	20
---	----

Hybrid Tumor Techniques Used To Diagnose Type B Hepatitis (WEN HUI BAO, 24 Jun 82)	22
---	----

Specialist on End to Smallpox Vaccination (XINHUA, 9 Aug 82)	23
---	----

Increase in Malaria Cases Reported (ZHEJIANG RIBAO, 21 Jun 82)	25
PERU	
Verruca Outbreak in Various Departments Reported (Xavier Ugarriza; CARETAS, 5 Jul 82)	26
SOUTH AFRICA	
Killer Diseases Again Taking Toll in SA (Ada Stuijt; SUNDAY TIMES, 27 Jul 82)	29
Briefs	
Eye Disease Rife	31
Typhoid Death	31
Polio Slows Down	31
ZIMBABWE	
Jackal-Poisoning Campaign Follows Farmer's Death From Rabies (Mike Overmeyer; THE HERALD, 26 Jul 82)	32
ANIMAL DISEASES	
NAMIBIA	
Briefs	
Sheep Scab Outbreak	33
SOUTH AFRICA	
High Cost of Fighting Ticks Reported (THE CITIZEN, 5 Aug 82)	34
ZAMBIA	
Briefs	
Anti-Rabies Campaign	35
PLANT DISEASES AND INSECT PESTS	
ISRAEL	
Briefs	
Rats Attacks West Bank Crops	36
PEOPLE'S REPUBLIC OF CHINA	
Serious Wheat Aphid Problem Discussed (HEBEI RIBAO, 22 May 82)	37

Measures To Control Serious Cotton Aphid Outbreaks Outlined (HEBEI RIBAO, 28 May 82)	39
Briefs	
Jiangsu Bacterial Insecticides	41
ZAMBIA	
Anti-Grain Borer Measures (TIMES OF ZAMBIA, 3 Aug 82)	42

IMPORT LICENSE DENIED TO IMPROVED RUBELLA VACCINE

Canberra THE AUSTRALIAN in English 21 Jun 82 p 3

[Article by Christine Herd]

[Text]

AUSTRALIAN women are being denied access to an improved rubella vaccine because the Federal Government will not grant an import licence to its manufacturers, according to a Victorian scientist.

Mrs Barbera Francis, the senior virologist at Melbourne's Mercy Maternity Hospital said yesterday the vaccine, almevax RA 27/3, had been proved to be more effective in immunising women against rubella - commonly known as german measles - and was used widely in America and England in preference to sendehill, the vaccine given to Australian women.

She said: "The manufacturers of almevax gave our research team and researchers in Sydney samples of the vaccine, which proved to be very impressive.

"But we later discovered that the Government would not grant an import licence for almevax and that if we wanted

to use it more broadly we would have to import it privately and pay for it ourselves.

Mrs Francis has just completed a five-year study of the rubella prevention program.

The findings show some women do not develop immunity to rubella at the time of vaccination.

A further group lost immunity to the disease after two to three years.

The research team studied 7000 women over the five years. Of 122 women re-tested, two were found to have no antibodies present after six weeks and 19 had only very low levels.

Mrs Francis said: "When we decided to re-vaccinate again with sendehill there was only a limited benefit. However, we had very encouraging results when we used almevax. In one instance, there was an eight-fold boost in the number of anti-bodies present."

CSO: 5400/7573

BRIEFS

NO NEW TYPHOID CASES--Bahrain's anti-typhoid measures are paying off. No new cases of typhoid have been reported on the island for a week. The disease is now well under control says Dr Ibrahim Yacoub, assistant under-secretary for preventive and primary health care. Only four or five people are now being treated for the disease and they will be discharged from hospital in a couple of days. "We are now convinced that the outbreak started with a carrier from abroad," said Dr Yacoub. Water, food or ice cream are just "vehicles" for the disease, according to Dr Yacoub. "He or she who carried the disease should have been effectively treated by now. That's why the outbreak has been checked," he said. Health officials are still continuing their mass immunisation programme. "Any food handler who catches the disease will be isolated." [Text] [Manama GULF DAILY NEWS in English 19 Jul 82 p 5]

CSO: 5400/4737

EPIDEMICS DECIMATE INDIANS IN AMAZON REGION

Brasilia CORREIO BRAZILIENSE in Portuguese 18 Jul 82 p 7

[Article by Rosane Garcia]

[Text] Only 15 days after the National Indian Foundation (FUNAI) contradicted a report by the Native Missionary Council [CIMI] about the death of 30 percent of the Matis Indian population from a flu epidemic, Kazuto Kavamoto, the organization's representative in Manaus, declared that not only those natives but also the Jurubos, Marubos and Maiorunas "are being afflicted with flu, malaria and diarrhea. Those diseases are being caused by the present low level of the Javari River and its tributaries, principally the Itui River."

According to Kazuto Kavamoto, "the situation in Javari Valley, in the municipality of Atalaia do Norte, is critical." Therefore, the CIMI insists on reasserting that the situation in Javari Valley is quite serious and that the FUNAI in Brasilia is aware of this, despite its contradiction.

Individuals who work in the FUNAI and reside in the area in question have advised the Ecumenical Center of Documents and Information (CEDI) that, from July 1981 to May 1982, there were two outbreaks of flu among the Matis, reducing their population from 138 to approximately 85 persons.

The FUNAI in Brasilia denies the facts, confirmed by its own employees. That strategy is regularly used by the organization to divert attention when the victims are Indians and when the facts threaten the adopted health policy. A similar situation occurred with the recent death of seven Araras, in Para State, considered "inevitable" by the protective organization.

In May, Paulo Moreira Leal, president of the organization, was in Sao Paulo at a meeting with the directors of the Sao Paulo School of Medicine (EPM). At that meeting, according to information released by the organization, it was decided that the Xingu National Park will be looked after by EPM students, with inspection of their work being the responsibility of FUNAI's health division.

The measure is also aimed at deactivating the Mobile Health Units (EVS), leaving the health control of those Xingu natives under the responsibility of the 3d and 4th year EPM medical students. If, in fact, this idea works out, the Xingus will be the "guinea pigs" of the Sao Paulo students.

FUNAI's affirmations and denials vary according to the circumstances. A typical example occurred this week when a Cayabi Indian, Evorum, mother of triplets on 10 July, was subjected to tubal ligation (tying of the tubes) without prior authorization by the organization.

Contradictions involving the mutilation of Indian women in labor are many. When the president of the organization asserted that he had not given his consent, obstetrician Raimundo Cavalcante declared that the FUNAI had given its authorization, "since, officially, the signature of Indians has no legal value."

Another contradiction, in Evorum's case, concerns the length of time the Indian woman was confined and the mortal risk she ran during surgery, thus motivating the tying of the tubes. Confined since March when she came from Xingu, the only problem Evorum had was a tooth infection, according to Dr Raimundo Cavalcante. It was not until the Caesarean section that the doctors perceived that Evorum's health would not permit another pregnancy.

This situation is evidence of a certain amount of neglect by the organization's health division which, according to the facts, is not taking proper care of ailing Indians when they come to Brasilia to receive medical treatment. And the situation is made worse by the fact that the health division doctors were not even interested in determining the possible causes which led the doctors of the Brasilia base hospital to tie Evorum's tubes.

In summing up all those recent developments, the CIMI emphasized this week that it is not enough for the FUNAI to refrain from delimiting the native territories to be omitted in its medical assistance program; it is now taking steps to limit the procreation of the Indians. "Whereas it should be the defender of the Indians, it is becoming their gravedigger," Father Paulo Suess, executive secretary, stressed.

8568

CSO: 5400/2191

BRIEFS

URBAN YELLOW FEVER CONTROL--Brasilia--Pedro Luiz Tauil, director of the Ministry of Health's department of epidemic eradication and control, said yesterday that it will take another 3 years to eradicate the last foci of the *Aedes aegypti* mosquito, the transmitter of urban yellow fever. According to him, Rio de Janeiro is the most difficult area in which to inspect houses. "Foci still existing in Salvador, Foz do Iguacu and Ponta Pora are expected to be under control within 6 to 18 months," he said. Pedro Luiz Tauil also said that the Ministry of Health has been striving for a continent-wide program to eradicate the *Aedes aegypti*, based on the experience of 18 American countries which, in the 1950's and 1960's, succeeded in eradicating urban yellow fever and dengue fever. However, some nations, such as the United States, Venezuela and Mexico, say that the costs are very high. "In fact," he asserted, "these countries are not running the risk of having to contend with an outbreak of urban yellow fever and, even if that did happen, they are able to combat such an outbreak rapidly. But the problem is expected to be resolved, for in June, at a meeting of the technical group of the Pan American Health Organization in Mexico, alternative methods were suggested to the organization's advisory board for the control of urban yellow fever and dengue fever." According to Pedro Luiz Tauil, the establishment of a continent-wide program is important, for, just recently, about 350,000 cases of dengue were reported in the Caribbean, with 158 deaths. [Text] [Rio de Janeiro O GLOBO in Portuguese 13 Jul 82 p 5] 8568

MENINGITIS IN SANTA CATARINA--Osvaldo Vitorino de Oliveira, general manager of the Santa Catarina Autonomous Department of Public Health [DASP], dismissed yesterday the possibility that the three cases of meningitis reported last week in Chapeco, in the western part of the state about 800 km from Florianopolis, might be the beginning of an epidemic in Santa Catarina. As of yesterday, the three children, admitted to the hospital with meningococcal meningitis, are doing well, although they are being kept in the isolation ward. Yesterday, the DASP manager said that those cases are still within the normal range, since an average of about 600 cases of meningitis are reported in the state, 100 on the average being of the meningococcal type. In 1980, there were 626 cases, with 117 being meningococcal; in 1981, the total was 653, 112 being meningococcal; and in the first 6 months of this year, 235 cases have been reported, with 23 being meningococcal. Dr Osvaldo Vitorino de Oliveira said that normally the number of cases increases in the winter months, and the disease crops up in almost every part of the state. [Excerpts] [Sao Paulo O ESTADO DE SAO PAULO in Portuguese 13 Jul 82 p 12] 8568

INCIDENCE OF SEXUALLY TRANSMITTED DISEASES INCREASES

Santiago EL MERCURIO in Spanish 10 Jul 82 p C5

[Text] "The increase observed throughout the world in the incidence of sexually transmitted diseases results from the fact that such diseases are spread by special means, aided by an obvious change in personal sexual behavior patterns."

These remarks were made by Dr Daniel Villalobos, director of the Third Conference on Sexually Transmitted Diseases conducted by the Public Health Institute and sponsored by the Department of Support for Programs of the Ministry of Health and the Pan American Health Office.

The conference was attended by professionals in charge of the administration of sexually transmitted disease programs and all the country's health services and by two professionals from Brazil.

Statistics

Dr Villalobos said that at the present time, our country has an incidence of 113 cases for every 100,000 inhabitants for gonorrhea and 80 cases for every 100,000 for syphilis. "However, we do not have good information in Chile, especially for gonorrhea, because in many cases, the person involved does not go to health centers with doctors set up for the purpose, preferring to consult a pharmacist or friends.

"That is perhaps why our figure is lower than in the United States, for example, where the rate is 200 for every 100,000 inhabitants for gonorrhea, but that country has a much more sophisticated system of information. Whatever the case, we are definitely improving our own system and beginning this year, we are using a new system of reporting cases which in the future will enable us to obtain much more realistic statistics," he added.

Concerning the increase in these diseases, he said that they cannot be controlled as strictly as typhoid fever, for example, in which case deficiencies in sanitation are corrected as soon as they are detected. "Sexual behavior has gradually become more permissive, especially among young people, which facilitates contagion, although the most important factors continue to be prostitution, homosexuality and promiscuity.

"Another aspect that gives these diseases their own stamp is that there is no type of vaccination or immunity, meaning that even if a person infected is cured, he can catch the disease again if exposed," he concluded.

BRIEFS

CHOLERA INFESTED REGION--Medical authorities in Ashanti have declared the region a cholera infested area. A letter to that effect has been sent to the Ministry of Health in Accra. The Ashanti regional secretary, Mr Kwame Dwemoh-kessie, learned this when he visited the Nkenkansu Health Centre during a tour of the Offinso District last Wednesday. Mr Dwemoh-kessie was told that despite the fact that the Ministry of Health had been notified of the cholera outbreak in several parts of the region it had not announced the situation to the public. To prevent death and spread of the highly infectious disease a team of health personnel had been rushed to some parts of the region to inoculate the people. The medical assistant in charge of the health post, Miss Sophia Asiedu, briefing the regional secretary, disclosed that the health post recorded 12 cases of cholera within one week. She said because there were no cholera vaccines they had to treat patients with infusion and dehydration fluids. [Article: "Ashanti Declared Cholera Infested Region" [Text] [AB161956 Accra Ghanaian TIMES in English 13 Aug 82 p 3]

CSO: 5400/5720

BRIEFS

MALARIA IN NORTH BENGAL--CALCUTTA, July 23--Malaria has been spreading in parts of Jalpaiguri district in north Bengal in an epidemic form despite preventive measures being taken since March. Even more disturbing is the fact that a fair proportion of the incidence also represents the malignant-type causing more fatalities than normally. In most of the fatal cases involving children, malnutrition is a complicating and contributory factor. The state government is, therefore, in touch with the national malaria eradication programme authorities already. It is also planning to contact the UNICEF for assistance towards enlargement of the coverage of the milk-feeding programme. The NMEP director is expected here on Monday. As the health minister, Mr. Nani Bhattacharyya, admits, the incidence has spread from the original four--Nagrakata, Dhupguri, Falakata and Madarihat--to 13 administrative blocks in the district. All the four blocks are in the tea belt. Till mid-July, the total number of attacks has been 3,248. Of these 2,532 have been confirmed as positive ordinary cases and the rest 716 of the malignant type. The number of deaths is 117. The four blocks alone account for 2,313 cases, including 519 of the malignant type, and 113 deaths. Mr. Bhattacharyya regretted that some field officers and supervisors, involved in the preventive and control programme were non-co-operative for one reason or another and were not attending to their work properly. However, the government was trying to its best to face up to the situation. [Bombay THE TIMES OF INDIA in English 24 Jul 82 p 9]

CSO: 5400/7101

BRIEFS

GASTROENTERITIS IN BANYUMAS DISTRICT --Gastroenteritis which began to occur in several villages in Banyumas Regency last May stormed through them during the second week of June. As of Tuesday afternoon [22 June] 19 persons were recorded as having died and 100 others were treated at hospitals and public health centers. The many victims caused a shortage of beds in public health centers in the disaster area. The local government had to open emergency receiving stations and patients had to provide their own mattresses and pillows. As of yesterday no mass inoculation to prevent the spread of the disease had been done by the local government since it was felt the epidemic had not yet reached a critical stage. Causes of the epidemic are still under investigation by the health authorities. Reportedly victims of this stage of the disease generally are 15 years of age or less. [Excerpts] [Jakarta HARIAN UMUM AB in Indonesian 24 Jun 82 pp 1, 3] 6804

GASTROENTERITIS IN CILACAP DISTRICT--The number of gastroenteritis cases in the Cilacap Regency (Central Java) is not believed to be as high as those which have erupted in the Banyumas Regency at this time. Soebarkat Tjitro Darmodjo, chief of the Cilacap Regency Health Service, said there is sufficient medication to cover requirements for the next 3 months if the number of cases does not mount rapidly. The medication status has been reported to the chief of the regional office of the Central Java Department of Health in Semarang. Moreover the regional office has stocked the required medication should it be needed. Medications stocked included tetracycline, oralit, lysol, and kaporit. When asked about gastroenteritis in the Cilacap Regency area, Dr Sodbarkat said the disease occurred because of the increasing scarcity of potable water sources during the dry season. It may be that people are using impure river water for their daily needs. Soebarkat said Cilacap Regency in 1982 recorded 722 cases of gastroenteritis with 21 deaths. He pointed out that the number of cases may increase before the dry season ends. During the first 5 months of 1982, he said, 18 of the 158 persons diagnosed as having gastroenteritis whose stools were examined in the laboratory were positively identified as having cholera. [Excerpts] [Jakarta MERDEKA in Indonesian 30 Jun 82 p 3] 6804

CSO: 5400/8426

BRIEFS

TYPHOID REPORT 'CORRECTION'--Dr. Kenneth Baugh, Minister of Health, has described the report in Wednesday's Gleaner on cases of typhoid in the Corporate Area in July as "incorrect". Dr. Baugh said six cases had come to the attention of the Ministry of Health, but these occurred and were investigated in April, May and June. No new cases had occurred in July, he said. Fewer cases of typhoid were reported in the Corporate Area in the first six months of this year, compared to the same period in 1981. "In fact, there has been a reduction in the number of typhoid cases reported annually over the last three years as compared to previous years," he said. There had been no upsurge in the number of cases reported in 1982. The Ministry continued to maintain vigilance in the investigation of reported cases to identify and control sources of infection. [Kingston THE DAILY GLEANER in English 23 Jul 82 p 2]

CSO: 5400/7574

BRIEFS

CERTIFIED RABID BEEF--Some 416 people in Thyolo District are being treated for rabies after eating certified rabid beef. Veterinary officials are appealing to those who were in contact with the animal or ate its meat to report to the hospital immediately for anti-rabies treatment. An official from the Veterinary Department said that people from around Grenae Dairy belonging to I Conforzi Tea and Tobacco Limited were advised to bury the carcass of a rabid cow which died at the farm recently. The people decided to defy the order and ate the meat. So far 416 people have come forward for treatment and officials think that there could be more people who ate the meat who have not yet come forward for treatment. Veterinary officials are also advising the public not to eat any animal whose cause of death has not been determined by their officials.--(Mana) [Text] [Blantyre MALAWI NEWS in English 24-30 Jul 82 p 1]

CSO: 5400/5709

CHOLERA EPIDEMIC ABATING IN SOME AREAS OF SABAH

Kuala Belait BORNEO BULLETIN in English 17 Jul 82 p 4

[Excerpt]

KOTA KINABALU.

— There was good news this week on Sabah's cholera front, with the districts of Ranau, Kudat, Lahad Datu and Tawau being declared free of the highly contagious disease.

But it continues to present a serious health threat in Sandakan, Kinabatangan and Beluran.

A 23-year-old man from Kampung Langkabon in Kinabatangan became the state's ninth person to die of cholera since the outbreak began in mid-April.

And four more cases, all from Beluran, were reported during the week ending last Saturday, bringing the outbreak's total to 187.

The Medical Department said it had also isolated three carriers.

The department in Sarawak reported no new cholera cases during the week to Monday.

CSO: 5400/8428

DENGUE EPIDEMIC DECLARED IN KELANTAN

Kuala Lumpur NEW STRAITS TIMES in English 20 Jul 82 p 10

[Excerpt]

KOTA BARU, Mon. — Kelantan was today declared a dengue epidemic State following the outbreak of 21 cases including one haemorrhagic type in the State.

Health and Medical Department director, Dr Jones Varughese said today that the situation was still not under control.

Two victims had died in Kota Baru General Hospital, aged between 34 and 36, in June and early this month, he said.

He said that of the cases reported, 18 were in Kota Baru, while Tum-

pat, Pasir Mas and Bachok had one case each.

"The situation is still not under control, and the cases reported for the first six months of this year surpasses the 19 reported for the whole of last year," he said.

"The latest suspected victims were an eight-year-old boy from Padang Bogor in Jalan Pengkalan Chepa, a senior officer's wife, 42, in Kampung Sirih and a man, 24, from Jalan Kebun Sultan admitted to the hospital here yesterday," he added.

Dr Varughese said

that Kota Baru was the worst affected, but it had not "raised an eye brow" among the residents here.

They were not aware where aedes mosquitoes — the virus carrier of dengue — often breeds, believing that aedes breeds only in drains, he said.

"Aedes breeds in places where clean but stagnant water is found, in and outside the houses, specially among ant traps, pot holders, bathtubs, jars, tins and old tyres," he added.

He added, that about 26 per cent of the aedes were

found in anttraps in Kota Baru houses when his team launched a house to house inspection recently.

The campaign by the department in the Kota Baru old town area showed that private and government offices were found to be infected.

The campaign also showed that almost half of the 6,788 houses inspected in the old town areas were found to breed aedes, he said.

In the campaign, 16,195 people were given health talk and 6,282 pamphlets were issued. The department also carried out mass fogging in the area.

CSO: 5400/8428

ALLEGATIONS OF HEPATITIS EPIDEMIC SQUASHED

Windhoek THE WINDHOEK ADVERTISER in English 29 Jul 82 p 3

[Text]

**THE SOUTH
African Government
has rejected claims
made by Swapo concern-
ing the alleged out-
break of a hepatitis
epidemic in Namibia.**

A letter to this effect was handed to the Director-General of the World Health Organisation this week by SA's permanent representative to the UN in Geneva, Consul-General Mr O van Oordt.

The correspondence follows an allegation by the President of Swapo, Mr Sam Nujoma, to the WHO, which drew to the attention of the health body "that a hepatitis epidemic has recently broken out in Namibia. As a result, a alarmingly high rate of deaths has been registered in the country, especially in northern rural areas of Namibia.

"Reports reaching us say that in one district alone 2 527 people have been affected and 151 are said to have died. This district lies between the towns of Oshakati and Endola," Mr Nujoma's letter claims.

In his letter to the Director-General of the

WHO, Mr Van Oordt said patients from Angola and other countries neighbouring Namibia had received, and continued to receive, treatment for a variety of diseases in hospitals and clinics in the Territory.

"In the specific case of hepatitis, between January 1 and July 15, 1982, a total of 82 suspected cases were reported in Owambo, of which 18 suspected cases were reported in the vicinity of Oshakati and Endola.

"In all confirmed cases, the patients have been, and are receiving, the standard prescribed treatment."

It was clear that SA had once again to deal with an attempt by Swapo to draw attention away from its real intentions — "Indeed, another transparent attempt to present itself as an organisation concerned with the welfare of the people of Namibia, when in fact it has a long and infamous record of violence and aggression against the civilian population of the Territory."

There was a practical test to which Swapo's allegations may be subjected — a local inspection by

qualified medical personnel.

"The South African Government accordingly invites the WHO to nominate, without delay, a team of two or three qualified doctors, who are not concerned with politically motivated claims and counter-claims, to visit the hospitals and clinics of Namibia in order to assess matters for themselves and the WHO," Mr Van Oordt said.

The SA Government, the letter continues, "also trusts that the team will make every effort to visit hospitals and clinics in Angola for the purposes of comparison, as there is strong evidence that the origin of some of the diseases being treated in Namibia lay north of the Territory's border.

"The SA Government is for obvious reasons concerned about the deterioration of the medial situation in Angola, and deems it of importance that the WHO should not only take cognisance thereof, but should assist the people concerned, which will only be possible after a visit as suggested," Mr Van Oordt said. — Sapa

CSO: 5400/5708

BRIEFS

UNFIT CANNED FOOD--Over 300 items of tinned food found to be unfit for human consumption have been seized and destroyed by the Public Health Department (PHD) at Ogoja in the Cross River State. The food items which were estimated at the cost of 650 Naira were seized from local article sellers and super markets. The items include tomato sauce, corned beef, fruit juice, quaker oats, milk, tinned fish etc. Speaking to the press before the items were destroyed, the Senior Health Superintendent in charge of Ogoja, Mr. R. I. Owan warned that supermarkets and retail shops that continue to stock food items that are bad for human consumption, would be closed down and its licence revoked. He also said that traders who continue to stock such items after this warning will be taken to court, and advised them to desist from such practice. He appealed to them to always go through their stocks to check and remove from their shelves, all items that are bad, adding that "this will prevent the frequent visits to such stores by health superintendents." When asked to comment on how he knew that the items were in bad condition, Mr. Owan who was being assisted by two of his assistants, Mr. P. A. Bankong and M. Egozi said that the external defect and rust on the containers alone shows that the food in it is bad. He said that the operation will be intensified, so as to free the local government from unhealthy tinned food. Owners of the condemned items who were invited to watch the destruction of items collected from their stores refused to show up. [Text] [Kaduna NEW NIGERIAN in English 28 Jul 82 p 7]

CSO: 5400/5714

IMPROVEMENTS URGED IN COMMUNICABLE DISEASE REPORTING

Beijing JIANKANG BAO in Chinese 24 Jun 82 p 2

[Article by Huang Zemin [7806 3419 3046]: "Strengthen Reporting on Epidemic Situations To Improve Quality of Illness Prevention"]

[Text] When receiving diagnoses, medical treatment units at all levels should promptly and accurately report to the sanitation and anti-epidemic units concerned all patients having communicable diseases to help keep track of changes in epidemic situations and to enable effective prevention measures to be taken. This is a duty that treatment units at all levels must fulfill. Those concerned have recently realized that in many places in the country today failure to report communicable diseases is extremely serious. The non-reporting rate is more than 30 percent, and even as high as 90 percent.

The Jinhu County Hospital in Jiangsu Province has yet to institute a system for reporting and registering communicable diseases. Its non-reporting rate for acute communicable diseases stands at 57.5 percent. In terms of kind of illness, non-reporting of measles is 88 percent, of hepatitis 57 percent, of dysentery 71 percent, and of malaria 55 percent. An investigation conducted by the Liaoning Provincial Sanitation and Anti-epidemic Station covering 15,215 people at seven check points in three prefectures and municipalities discovered 398 cases of seven different communicable diseases, 43.7 percent of which medical treatment units had failed to diagnose, and 65.6 percent of which they had not reported.

An analysis of the investigation showed that failure to report communicable diseases is attributable to the following several reasons.

1. Numerous medical practitioners emphasize treatment but slight prevention. They have an inadequate understanding of the significance of communicable disease reporting, and they do not understand the nationally promulgated regulations on management of acute communicable diseases. Succeeding shifts of outpatient doctors do not pass on instances of communicable diseases. Many medical personnel lack sufficient familiarity with standards for reporting communicable diseases.

2. Leaders at some medical treatment units do not give enough attention to epidemic situation reporting; their system is not all it should be.

3. At the grassroots level, prevention capabilities are weak, and no one reports epidemic situations.

4. Propaganda is too little. A considerable number of medical personnel lack knowledge.

In order to further improve the quality of the country's sanitation and anti-epidemic work so that sanitation and anti-epidemic work will become modernized, regularized, and scientific, units concerned are called upon to diligently carry out each article of "Chinese People's Republic Regulations on Management of Acute Communicable Diseases." All levels of sanitation and anti-epidemic units are to strengthen technical guidance and supervision of epidemic situation reporting. In cities and the countryside, all levels of sanitation and medical treatment units are to establish and perfect epidemic reporting systems with specific people responsible for reporting, registering, verifying and doing statistical and analytical work on epidemic situations in order to reduce or halt failures to diagnose or failures to report communicable diseases and to assure the safety of the lives and health of the people.

9432

CSO: 5400/4004

EARLY DETECTION, TREATMENT OF LEPROSY DESCRIBED

Outpatient Treatment Center

Beijing JIANKANG BAO in Chinese 20 Jun 82 p 1

[Article by Huang Caigang [7896 2088 0474]: "Outpatient Treatment Established for Early Discovery of Lepers by Beiliu County Skin Disease Prophylaxis and Treatment Hospital"]

[Text] During the past 2 years the Beiliu County Skin Disease Prophylaxis and Treatment Hospital in Guangxi-Zhuang Autonomous Region has set up skin disease outpatient treatment and mobile outpatient treatment to find a new way in which to discover lepers, provide them early treatment, and bring leprosy under early control.

Beiliu County is an area in which the prevalency of leprosy is low. Formerly, because of a psychology of fear, lepers avoided surveys, and it was fairly difficult to discover and treat them promptly. In May 1980 the Beiliu County Skin Disease Prophylaxis and Treatment Hospital decided to establish stationary outpatient treatment and mobile outpatient treatment of skin diseases to make up for the inadequacy of surveys. They divided the hospital professional staff into 3 units, 1 of which was responsible for stationary diagnosis plus treatment of patients in the hospital, and 2 of which did mobile outpatient treatment in the 16 communes (or towns) throughout the county, using advertisements and radio broadcasts to provide wide publicity and to mobilize sufferers with skin diseases to come forward to have their disease examined. Some lepers who had formerly feared discrimination slipped through the crowd to obtain outpatient diagnosis and obtain medicine, and to receive treatment secretly. A comrade at the prophylaxis and treatment hospital said that the establishment of outpatient treatment of skin diseases was both convenient for the masses and helped in early detection and treatment of lepers; it was also a good way in which to save national expenditures and increase earnings.

Recognition of Workers

Beijing JIANKANG BAO in Chinese 20 Jun 82 p 2

[Article by Zhang Zhongtian [1728 1813 3944]: "Shandong Decorates Advanced Collectives and Individuals for the Prophylaxis and Treatment of Leprosy"]

[Text] Recently Shandong Province convened a conference on leprosy work at which 19 advanced cooperatives and 28 advanced workers in the prophylaxis and treatment of leprosy were decorated, while 302 specialists who have been engaged in leprosy prophylaxis work over more than 20 years were commended.

The outstanding characteristics of Shandong Province's advanced collectives and individuals in leprosy prophylaxis are as follows: Fervent love for leprosy prophylaxis endeavors and a spirit of selfless devotion. Ever since 1956, the Haiyang Center Skin Disease Prophylzxis and Treatment Unit in Yantai Prefecture has pursued comprehensive prevention and control measures including checking, receiving, treating, caring, and research. In Haiyang County, 18 investigations of clues and screenings of all the people were done. An accumulated 905 lepers were discovered, 89.5 percent of whom were cured. In its diligent treatment of lepers, the Pingdu County Skin Disease Prophylaxis and Treatment Station has used orthopedic surgery in 170 cases, and has cured 279 cases of leprosy ulcers, making it the first leper village in Shandong Province to be free of leprosy ulcers. Comrade Gao Shaozuo [7559 4801 0146], station chief and physician in charge at the Yiyuan County Skin Disease Prophylaxis and Treatment Station has spent 23 consecutive New Years since 1958 with patients in the leprosy prophylaxis and treatment station in order to make patients feel at ease about leper village treatment. The masses have praised him as a "fine doctor sent by the party." Comrade Jia Xunan [3946 6079 0589], deputy hospital director and chief physician at the Beitan Hospital in Zaozhuang Municipality, in disregard of social discrimination against leprosy prophylaxis work and despite the urgings of relatives and friends, left the Provincial People's Hospital in 1952 to go into the frontline of leprosy prophylaxis. During the past 30 years he has had yeoman accomplishments in investigating and treating leprosy and in the training of cadres. Though more than 60 years old, he continues as usual to give outpatient treatment and to make ward checks.

9432

CSO: 5400/4006

HEPATITIS VIRUS HYPOTYPE ASEXUALLY REPRODUCED

Beijing GUANGMING RIBAO in Chinese 14 Jun 82 p 1

[Article: "Type B Hepatitis Virus Gene Successfully Asexually Reproduced in China for First Time. Shanghai Institute of Biochemistry Now Striving for Early Type B Hepatitis Virus Surface Antigen and To Produce Type B Hepatitis Vaccine"]

[Text] Xinhuashe Shanghai 13 June Dispatch. Xinhuashe reporter, Lu Guoyuan [7120 0948 0337] has reported that the Shanghai Institute of Biochemistry of the Chinese Academy of Sciences has, for the first time anywhere in the world, successfully transferred an ADR hypotype gene genome of a Type B hepatitis virus, which is found mostly in Asia, into bacteria for asexual reproduction. This success holds major significance for penetrating research into the physiology of incidence of Type B hepatitis, and particularly for final use of genetic engineering methods to research a Type B hepatitis vaccine and control the spread of Type B hepatitis.

Type B hepatitis caused from infection with Type B hepatitis virus is currently one of the most communicable diseases in the world. Its incidence is highest in Asia and Africa. In recent years many scholars have felt that Type B hepatitis virus may be related to cirrhosis of the liver and to cancer of the liver.

At the present time the world has no particularly effective medicine for control of this communicable disease, which harms all mankind.

With the development of genetic engineering research, scientists have sought ways to separate and purify Type B hepatitis virus genes (biological genetic material) in the human body, and they have used genetic engineering techniques to plant them within bacteria, allowing the bacteria to reproduce them asexually. They have gone on to substitute Type B hepatitis virus surface antigens produced by the human body, using these surface antigens to research Type B hepatitis vaccine. Currently, the United States, the United Kingdom, France, and West Germany have succeeded one after another in the asexual reproduction within bacteria of two of the four hypotypes of Type B hepatitis virus (the one found principally in Western Europe and the Americas, ADW hypotype), and they have produced microscopic amounts of Type B hepatitis virus surface antigens. The world has not yet had any reports of success on

the asexual reproduction of Type B hepatitis virus ADR hypotype genomes, which are peculiar to Africa.

At the end of 1980, the Shanghai Institute of Biochemistry began this research. The scientists considered that inasmuch as the principal Type B hepatitis virus hypotype in China is ADR, the research work would focus on realities in the country as the only way to have the fruits of research serve in improving the health level of people throughout the country. They started with the blood plasma, which carries Type B hepatitis virus, separating from it and purifying the ADR hypotype virus genomes. With the help of the Shanghai Municipal Sanitation and Anti-epidemic Station, after more than a year's efforts they succeeded finally in April this year, for the first time in the world, in the asexual reproduction in bacteria of ADR hypotype genomes of Type B hepatitis virus, and they once obtained 158 bacterial strains carrying ADR hypotype genomes of hepatitis virus. Such a high rate of success is very rare in similar types of experiments.

Success in the asexual reproduction of ADR hypotype hepatitis virus genomes lays a good foundation for China's future independent use of genetic engineering techniques for further research and development of Type B hepatitis virus surface antigens, and going on to the production of Type B hepatitis vaccines. In addition, it creates the necessary conditions for sequential analysis of deoxyribose and deoxynucleic acid in the study of China's major hypotypes of Type B hepatitis, their genetic composition, and their genetic expression, as well as the study of the diagnosis and prevention of Type B hepatitis and liver cancer.

This major scientific achievement was gained by some middle age and young scientists trained in China working under the guidance of older scientists. Currently the scientists are continuing efforts to obtain Type B hepatitis virus surface antigens at an early date, and to produce a Type B hepatitis vaccine to protect the health of the people.

9432

CSO: 5400/4004

HYBRID TUMOR TECHNIQUES USED TO DIAGNOSE TYPE B HEPATITIS

Shanghai WEN HUI BAO in Chinese 24 Jun 82 p 1

[Article: "New Technique For Diagnosing Type B Hepatitis. Zhabei District Center Hospital Successfully Establishes Hybridoma"]

[Text] Medical personnel at the Virus Immunity Laboratory in Center Hospital, Zhabei District have themselves refitted and made simple and crude China-produced testing instruments, have used China-produced reagents, and have applied hybrid tumor techniques for the first time to establish a hybridoma that produces Type B hepatitis antibodies, which have now continuously gone from one generation to another for 6 months. Yesterday experts concerned authenticated these results.

Hybrid tumor antibodies formed by Type B hepatitis antigens possess special significance for the diagnosis of this illness. Hybridization of lymph cells and tumor cells to produce Type B hepatitis antibodies was done abroad in 1980, and the antibodies were sold commercially at a very high price. In order to obtain the newest techniques for diagnosing Type B hepatitis, numerous units inside China conducted such research, but without success. At the Virus Immunity Laboratory in Center Hospital, Zhabei District, Guo Hengchang [7753 1854 2490] and his assistants considered the problems in terms of clinical diagnosis requirements and, with the support of units concerned, they began this research in 1980. The first difficulty facing them was the lack of instruments and equipment, which if imported from abroad would require substantial foreign exchange. This was something that could not be easily managed for the time being. So they decided to take action themselves by using whatever China-made equipment was available to begin research. Importation from abroad of a carbon dioxide drying cabinet for culturing cells would require more than 10,000 yuan, but they bought a glass drying container for only slightly more than 10 yuan, which they rigorously sterilized, refitted, and sent to the place at which it would be used.

The establishment of Type B hepatitis antibody hybridomas will bring about major changes in the diagnosis of Type B hepatitis in China, and the antibodies can also be used to prepare large quantities of standardized distinctive antibodies to replace the mixed antibodies formerly used, thereby improving the rate of accuracy of diagnosis of Type B hepatitis. The hospital has obtained satisfactory results in this use of these antibodies in testing more than 5,000 cases of suspected Type B hepatitis.

SPECIALIST ON END TO SMALLPOX VACCINATION

OW100144 Beijing XINHUA in English 1214 GMT 9 Aug 82

[Text] Beijing, 9 Aug (XINHUA)--Young parents should not worry about their children no longer receiving smallpox vaccinations, since the disease has been officially "dead" in China for the past 20 years, Zhao Kai, a Chinese specialist in vaccination research said in an XINHUA interview.

Zhao, deputy chief physician of the National Vaccine and Serum Institute, Beijing, added that it is almost impossible to find faces of people under the age of 20 pockmarked from the disease.

He said that the last case of smallpox in China was reported in March, 1960 in Menglian Autonomous County in Yunnan Province.

China's successful elimination of smallpox in one-fourth of the world population, has contributed to freeing the world from smallpox. The World Health Organization (WHO) declared the world free of the disease and urged on May 8, 1980 at its annual assembly that vaccinations be discontinued in every country. Since then China discontinued routine smallpox vaccination.

The last case of smallpox in the world was reported in Somalia on October 26, 1977. A special committee of the WHO observed and investigated for two years and found out that no additional cases of smallpox occurred.

China's achievement is due to a series of preventive measures against smallpox which have been taken by the government since the founding of new China in 1949, Zhao said. Smallpox was rampant in old China and tens of thousands of laboring people died of the disease every year.

At the early years of fifties, the government issued a rule governing vaccination against smallpox and made a decision on a general smallpox vaccination throughout the country. The rule stipulated that babies would be vaccinated within six months after birth and were revaccinated at the ages of six, twelve and eighteen. Reported smallpox cases dropped from 67,000 in 1950 to 466 in 1954. No case has occurred in large and medium cities since 1954.

Chinese Government also stressed research work of bovine vaccines, in order to improve the quality and to ensure supplying. [sentence as received] Frozen and dried vaccines were produced for remote areas and the southern part of China.

China also strengthened the hygienic and quarantine work of the ports.

Zhao Kai said that China has made contributions to smallpox vaccination. Dating back to 2000 years, people started to use smallpox scabs from those suffering from the disease to inoculate healthy children.

CSO: 5400/4010

INCREASE IN MALARIA CASES REPORTED

Hangzhou ZHEJIANG RIBAO in Chinese 21 Jun 82 p 1

[Article: "Vigilance Against Recurrence of Malaria. Sanitation and Anti-epidemic Units Bolster Monitoring and Prevention"]

[Text] Following year after year decrease in the incidence of malaria in the province, the Zhejiang Provincial Sanitation and Antiepidemic Station yesterday asked that all jurisdictions be on guard against a recurrence of malaria and genuinely bolster their monitoring and prevention work.

During the past several years, the province has intensified measures to prevent malaria, and the incidence of the disease has decreased year after year. Last year it dropped another 33 percent over the year before. Statistics from national departments concerned showed that except for Shanghai Municipality, the incidence of malaria in Zhejiang Province is the lowest in any province or autonomous region south of the Yangtze River. In Zhejiang Province 26 counties have an incidence rate of less than 1 per 10,000, and only 1 county has an incidence rate of more than 10 per 10,000. All the other counties have an incidence rate between 1 and 10 per 10,000. In order to assure the health of the masses, the Sanitation and Antiepidemic Station has intensified its monitoring work. They have discovered that in Wenzhou, Shaoxing, Ningbo, and Jinhua, some of the sources of contagion have not been very well controlled. Chemical testing of the blood of 676 outpatients with fevers showed 21.3 percent to contain malarial parasites. This is an advance signal of the outbreak of malaria. Unless active measures are taken, there is danger of a partial outbreak. The Provincial Sanitation and Antiepidemic Station has intensified prevention measures on this account, and it has sent specialized personnel to all jurisdictions to intensify technical guidance. It has allocated preventive medicines to areas of high incidence, has actively treated existing malarial patients, has done a good job of providing preventive medicine, has eradicated mosquito breeding areas, and has sprayed jiuyaowu [6794 5522 3670] to kill mosquitoes.

9432

CSO: 5400/4004

VERRUCA OUTBREAK IN VARIOUS DEPARTMENTS REPORTED

Lima CARETAS in Spanish 5 Jul 82 pp 72-74

[Article by Xavier Ugarriza]

[Text] In 1885, a young medical student named Daniel Alcides Carrion--before dying from having inoculated himself with the verruca virus--said to a group of doctors standing around his bed taking notes: "Now it is up to you to go forward." Almost a century after Carrion's noble gesture, the strange malady, which kills through violent anemia, is coming back full force with hundreds of outbreaks in the Cordillera del Condor area--among the colorful Indian peasants of that locality--and, what is alarming, at the very gates of Lima, Huaral and Matucana, where many cases have already been reported. Curiously, until now, there has been no vaccine against verruca, and only one researcher, from the Institute of Tropical Medicine of San Marcos, is working tirelessly to discover such a vaccine and prevent the disease from returning.

"We must check the wart outbreak," Dr Luis Solano Mendoza from the laboratory of the Institute of Tropical Medicine of San Marcos exclaimed with alarm. And it was not without cause, for, according to the doctors of the San Ignacio health station (Cajamarca), there are more than a thousand cases of persons infected with that disease.

Tireless researcher on verruca for 15 years, Solano told CARETAS that the outbreak involves Indian peasants who came to that area, on the Ecuadorean border, from several of the country's cities. "They are people who lack defense against warts and, within a short time, become infected in that endemic area," he said.

"On the other hand," Solano says, "the settlers of San Ignacio and the primitive forest area, characteristic of the Cordillera del Condor, are immune to the disease; they are carriers of the Bartonella bacilliformis, a bacterium which is transmitted to man through the bite of an insect which lives on blood. "Those individuals suffer only a cold when attacked by the disease," Solano says.

However, the disease attacks someone who has just arrived in its most acute form: chills, fever, lack of appetite, headache, general malaise and extreme pallor which reflects severe anemia and is fatal most of the time.

Around the Corner

"However, the affliction is not limited to those homes," Solano asserts, "since it is at the gates of the capital." The researcher states that there are wart outbreaks in Matucana, Huinco, Huaral and Huallapampa. "Most of them," he says, "are not recorded by the Ministry of Health inasmuch as they are confused with cases of severe anemia, or else, the patients do not come to the hospitals.

"All this is happening because verruca has never been eradicated and could not have been," Dr Solano observes, "for, until now, there has been no vaccine to counteract it. However, the path leading to knowledge of this disease--typical in endemic areas of Peru, Ecuador and Colombia--was opened by the young Peruvian doctor, Alcides Carrion, who innoculated himself with Bartonella to describe the symptoms and characteristics of verruca, called 'Oroya fever' due to the great mortality it caused between 1870 and 1872 among the workers of the Central Railway.

"Carrion," Solano says, "demonstrated that the disease is a single one with two distinct phases. Within 21 days after the bite of an insect called 'Lutzomyia,' the typical symptoms begin to show up; the patient becomes increasingly weaker and his pallor is due to the loss of some 300,000 to 400,000 red cells per cubic millimeter per day.

"In this acute or hematic phase, the patient may finally have only 800,000 red cells per cubic millimeter (the normal average is 4.5 million) and infectious complications are common, resulting in the patient's death, if he is not treated in time. And, if he survives, he proceeds to the 'intercalated' phase: the microorganisms lodge in the tissues and it becomes a curious biological balance between the infected individual and the warty parasite. This phase lasts 3 or 4 weeks and, at this point, the patient recovers, with or without treatment.

"All this occurs prior to the so-called eruptive or warty phase which is so obvious, since warts appear on the skin, hands, legs and face; these are outbreaks of lesions of varied size and form, wine-red in color and bloody." According to Solano, thanks to the electron microscope, it was possible to verify that these warty eruptions are proof of the manifestations of the human immunological apparatus. "Therefore, we now know that, when these eruptions appear on the skin, the patient is on his way to recovery," Solano explains.

To be precise, in 1972, a project carried out by Dr Sixto Recabarren and Dr Hugo Lumbreras, involving five patients who had come to Cayetano Heredia Hospital, demonstrated with the aid of an electron microscope--taking samples of eruptive lesions--that this phase is, in fact, a sign that the patient is on the road to recovery.

In any case, Dr Solano is presently the only researcher on the entire planet who has 36 varieties of Bartonella bacilliformis in the trim laboratory of the Institute of Tropical Medicine of San Marcos University. Working with those, the zealous researcher will try to discover a vaccine to end this characteristic and peculiar illness of such places as Ancash, Cajamarca, Piura (Huarmaca, La Tiza, Yagaraja), Huallaga Valley, Mantaro, Yungay, Santa and Siguas.

"At present, the most active focus," Solano reiterates, "is the border with Ecuador and, naturally, the entire area of the Cordillera del Condor." To be precise, Solano is treating three patients who came from the San Ignacio area. He found one of them to have Bartonella. "And if this ratio of 3 to 1 were maintained, the situation would be very serious," he asserts.

"The treatment of the foregoing disease," Solano says, "is very simple when given in time. We have only to administer penicillin; and if there are complications, we use another antibiotic called amoxicillin." However, in the opinion of Solano, who honors the name, the most important objective is to develop a vaccine. Solano is selecting the most antigenic cultures to find out which one is apt to be the most suitable for that objective, innoculating them in experimental animals. No one has these valuable cultures and, more than anything else, to obtain the vaccine, the institute must have more funds to wage the final battle against the Peruvian wart.

8569

CSO: 5400/2192

KILLER DISEASES AGAIN TAKING TOLL IN SA

Johannesburg SUNDAY TIMES in English 25 Jul 82 p 8

[Article by Ada Stuijt]

[Text] Three major diseases are rife among South African blacks--typhoid, polio and cholera. And SA still has the world's highest incidence of pulmonary tuberculosis.

A breakdown of the year's disease toll so far shows:

--Polio--this month's death toll has risen to 25 infants and children with 251 admitted to rural hospitals around Tzaneen.

Most cases were in the northeastern Transvaal.

One black child from Swartkoppen near Krugersdorp was admitted with polio but had only recently arrived from Tzaneen with his father.

Unexpected

--Typhoid--at least five deaths at Weskoppies mental hospital near Pretoria have been registered in the past two weeks.

Some 5000 cases were identified in the Northern Transvaal, an endemic typhoid area.

--Cholera--from January to June cholera has claimed 4 498 laboratory-proven cases treated at northeastern Transvaal and Natal rural hospitals and clinics.

--Tuberculosis--between January to the end of June 18 452 tuberculosis cases were registered.

On cholera, Dr James Gilliland, deputy director-general of the Ministry of Health in Pretoria said that there were "many more" actual cholera cases treated but which had not been bacteriologically proven.

On typhoid he said the Weskoppies outbreak had been "unusual and totally unexpected."

"The ten to fifteen patients usually admitted there daily come from the Northern Transvaal's rural areas where typhoid fever unfortunately is an endemic disease.

"We found twenty typhoid carriers at Weskoppies who showed no symptoms of the disease.

"All such carriers and the patients have been isolated and are under antibiotic treatment to prevent the disease from spreading," he said.

Asked why "Third World" diseases could inflict such damage in a well-developed country like South Africa he said: "We are still part of Africa and still developing our infrastructure, especially in those afflicted areas.

"In places such as Soweto with its water services, good sewage handling and health clinics, we are better in our health care than Third World countries.

"However, the problem is the rural areas.

"Our community health workers have a wealth of material with a stress on personal hygiene available to educate those people.

Complacent

"People are being made aware of how they can stay healthy with means at their disposal. For instance, a dash of Jik in drinking water kills cholera.

"People had become complacent about getting their children the polio vaccine.

"As far as pulmonary TB is concerned, we still are among the world's highest-affected countries according to the World Health Organisation.

"I never see headlines about the 18 452 TB cases registered in South Africa between January and June," Dr Gilliland said.

The World Health Organisation figures are obtained from the International Red Cross and missionary clinics treating such patients.

5400/5706

BRIEFS

EYE DISEASE RIFE--About 20 000 people in Northern Lebowa have the eye-disease trachoma. A further 150 000 people have an active inflammatory form of the disease, the highest occurrence of which is found in children of pre-school age. These findings by the Department of Microbiology at the University of Witwatersrand and the South African Institute for Medical Research were published in a recent edition of the South African Medical Journal. [Text] [Pretoria SOUTH AFRICAN DIGEST in English 9 Jul 82 p 7]

TYPHOID DEATH--One more person has died in the Kalafong Hospital as a result of typhoid, bringing the number of deaths by typhoid to six. They contracted the disease at Weskoppies Hospital. After laboratory tests, a few more carriers have been identified at the Weskoppies Hospital and are being treated in isolation. Dr James Gilliland, deputy Director-General of Health, said that 24 patients were recovering in the Weskoppies Hospital, adding that an entire ward was still being kept in isolation. He said that no new cases of the disease had been reported. No new polio cases had been reported either. [Text] [Johannesburg THE CITIZEN in English 3 Aug 82 p 12]

POLIO SLOWS DOWN--Three polio cases reported yesterday in the Gazankulu district brought to 261 the total number of children admitted to hospital with symptoms of the disease during the current outbreak. Dr James Gilliland, Deputy Director-general of Health said no more deaths had been reported and no more cases had been reported in South Africa. Twenty-eight children have died in the epidemic so far. The typhoid outbreak in Pretoria had "quietened down," Dr Gilliland said.--Sapa [Text] [Johannesburg THE CITIZEN in English 5 Aug 82 p 12]

CSO: 5400/5710

JACKAL-POISONING CAMPAIGN FOLLOWS FARMER'S DEATH FROM RABIES

Harare THE HERALD in English 26 Jul 82 p 3

[Article by Mike Overmeyer]

[Text]

MORE than 200 jackals were killed in an anti-rabies operation near Kadoma last week.

The Problem Animal Control (PAC) research unit of the Department of Parks and Wildlife was called in to reduce the jackal population in the area after a farm manager died of rabies last month.

Mr Benjamin Driver, who was the general manager of Handley Cross farm near Chegutu for 26 years, died of rabies in

an isolation ward of Harare's Wilkins Infectious Diseases Hospital.

He was bitten by a rabid dog and although he received treatment for the wound he did not have a course of anti-rabies injections.

Meanwhile, the Chegutu municipality has launched a rabies vaccination campaign by distributing more than 3 000 pamphlets appealing to residents to have their dogs vaccinated.

And farmers in the area between Chegutu and Kadoma called on the Department of Parks and Wildlife to reduce the jackal population — carriers of the dreaded disease.

A group of 12 rangers under Cde Austin Ndlovu and Cde Takawira Madawo has been combing the area since last month using sophisticated methods to kill the jackals.

In one method the men set traps with .38 special cyanide bullets which explode in the animal's mouth and kill it within 20 seconds. The bait is rotten meat.

The rangers operated in teams of four or five with one man keeping watch at the bush camp they set up on one of the farms in the area.

They bait and set up traps at dusk and recover the dead jackals at dawn.

On Friday they recovered seven dead jackals and the previous day 18. But about 20 others which ate poisoned meat bait could not be found.

So far the rangers have killed more than 200 jackals, seven civet cats and two rusty-spotted genets.

The traps of poisoned meat and cyanide capsules are placed under shrubs and grass to prevent other animals eating the lethal bait.

The rabies epidemic in the area must be controlled, said Cde Ndlovu. Farmers, he added, were worried after the death of Mr Driver.

After farmers sign an indemnity for the rangers to operate from their property, the jackal hunters set up camp and place warning signs in the "operational area".

During the day the rangers set out to track jackal spoor in preparation for setting traps at around 5.30 pm.

All the jackals killed by the deadly traps are skinned, blood-tested and the meat burnt.

The men take anti-rabies injections before going into the field.

Cde Madawo demonstrated how the meat-poison trap worked.

The poison mostly used — telodrex — takes up to two hours to kill the jackal.

Another poison, strychnine, kills within 20 minutes.

Blood samples of the dead animals are taken from their hearts and sent to the Department of Veterinary Services.

So far the team has found two rabid jackals.

The team might be moving closer to Harare in their operation. The next area, Cde Ndlovu said, might be around Norton.

"We are not trying to exterminate the jackal but to reduce its population in certain areas because of the acute rabies danger they pose."

BRIEFS

SHEEP SCAB OUTBREAK--Sheep scab has been diagnosed in the Warmbad district. Strict control measures will be enforced and all necessary inspections to determine the extent of this outbreak will be undertaken according to the Director of Veterinary Services in Windhoek. The attention of all stock-owners is drawn to Government Notice AG 90/1982 whereunder the dipping of sheep and goats without a permit from a state veterinarian or stock inspector is an offence under the Animal Diseases and Parasite Act. This regulation is applicable in all districts of SWA. [Text] [Windhoek THE WINDHOEK ADVERTISER in English 29 Jul 82 p 1]

CSO: 5400/5708

HIGH COST OF FIGHTING TICKS REPORTED

Johannesburg THE CITIZEN in English 5 Aug 82 p 12

[Text]

THE infestation of parasites on livestock in South Africa — a problem which could be controlled — is costing the country millions of rands every year.

This was revealed at a press conference held at Kwanyanga — Cooper's Veterinary Research Station near East London — yesterday.

According to Mr Gavin Stanford, entomologist at Kwanyanga, ticks alone could cost South Africa as much as R200-million annually.

Mr Don Gautier another research entomologist, said few actual figures for the effect of flies on the livestock industry were available. However, in the United States the estimated loss due to flies in 1965 was R760-million. "At today's prices this could easily top R1150-million annually," he said.

Parasites which affected livestock internally, like worms, cost

South Africa between R80-million and R100-million annually, Mr Piet Hugo, Cooper's product manager, said.

He pointed out that most of these parasites, after attaching themselves to the host animal, caused a slow deterioration in the animal's health which often, but not always, lead to death.

However, even if the animal did not die, the production of a milk cow or the price fetched for a beef animal would be greatly reduced.

An experiment had shown, Mr Stanford said, that on tick-infested grazing an advantage of 48 kg per head over a twelve month period could be gained by keeping cattle tick-free.

"At a conservative price of R2 per kg, this could represent R96 per head per annum," he said.

The only way to con-

trol ticks is to dip the animals regularly. "To dip an animal 40 times annually would cost R3,60, assuming an average cost of 9 per dipping. Saving about R96 is surely a good return on investment," Mr Stanford said.

He added that the only way for farmers to keep up with the growing demand for meat, milk and leather goods was to ensure that dipping was done on a regular basis throughout the year.

Dipping could also reduce the adverse effect of flies on livestock.

Mr Hugo said internal parasites were the scourge of South African livestock. Farmers could often not see any signs of certain worms in the animal's droppings.

He pointed out, that it was not for nothing that one of these worms was called "the bankrupt worm." Farmers could go bankrupt once their herds had become infected.

BRIEFS

ANTI-RABIES CAMPAIGN--THE Department of Veterinary and Tsetse Control in Luapula Province is to carry out a door-to-door campaign vaccinating dogs against rabies. Provincial veterinary officer Dr Mutha said the outbreak of the disease was alarming and urgent preventive measures were needed. Already one child who had been bitten by a rabid dog was lying critically ill in Mansa general hospital. Dr Mutha appealed to dog owners to rush them to the veterinary offices so that they can be vaccinated. Nine people have died from the disease in the province since last year. [Text] [Lusaka TIMES OF ZAMBIA in English 5 Aug 82 p 5]

CSO: 5400/5711

ISRAEL

BRIEFS

RATS ATTACK WEST BANK CROPS--Jenin--Rats are invading agricultural crops in the Arraba plain, eating corn and barley. Farmers are currently suffering from low harvests, a dunum of land producing 100 kg, about one-fifth of the annual average. The rats are also eating summer crops, such as melons, watermelons and tobacco. The rats have raided because of lack of rain. Arraba farmers called on the agricultural department to see to the problem to save their crops. [Text] [Jerusalem AL-FAJR in English 11-17 Jun 82 p 6]

CSO: 5400/4736

SERIOUS WHEAT APHID PROBLEM DISCUSSED

Shijiazhuang HEBEI RIBAO in Chinese 22 May 82 p 1

[Article: "Province's Serious Wheat Aphid Problem Must Be Quickly Eradicated, Provincial Agriculture Bureau Comrade-in-charge Points Out in Statement Made to Reporter"]

[Text] Yesterday a Provincial Agriculture Department comrade-in-charge emphasized, in a statement to the reporter about eradication of the wheat aphid problem, that wheat aphids are serious in Hebei province and that emergency mobilization must be done to bring them under control quickly in order to assure a bumper summer harvest.

The Provincial Agriculture Department comrade-in-charge said that the wheat aphid outbreak came early in Hebei Province this year and with great ferocity. It is a year of serious outbreak now at its peak. A survey done on 10 May in Fucheng County shows a sudden increase to 721 aphids per 100 plants. A recent survey in Linzhuang County showed 8,000 to 10,000 aphids per 100 plants, and large numbers of oily plants [3111 2701] have appeared. The infestation is much more serious than during the same period in 1981 when the maximum number of aphids per plant was 1,100 for the province as a whole. A survey conducted on 7 and 8 May by the Provincial Plant Protection Institute in Wangdongzhuang, and Xiangzhuang production brigades in suburban Baoding showed a plant aphid rate of 93 and 95 percent respectively. Numbers of aphids per plant were 1,891 and 2,539 respectively 4.9 to 7.3 times more than the number during the serious outbreak of 1980.

Wheat aphids pose a great threat to wheat. Survey data show that during the milk ripe stage of wheat, when the number of aphids average 10 to 20 per spike, the per thousand grain weight drops by from 5.5 to 7.4 percent. When the number of aphids average 40 to 60 per spike, the per thousand grain weight drops by 12.6 percent. For Hebei Province this year, this means that if the wheat aphids can be brought under control, about 10 to 20 percent of output can be saved and it will be possible to harvest an additional more than 1 billion several hundred million jin. Consequently, all levels of leaders must attach a high degree of importance to this matter, organize forces, act posthaste, and undertake control.

Methods used for the eradication of wheat aphids will require adaptation of general methods to local situations. In places where there are fairly large numbers of ladybugs, a natural enemy of aphids, where the ladybug ratio is

1:150 these natural enemies can be protected and used for natural control of aphids and there is no need to use pesticides for control. Where the numbers of ladybugs relative to aphids are inadequate, the spraying of phosphate in wheatfields may be combined with use of a 40 parts per hundred dimethoate emulsion for control. Wheat harvest time will soon be here so use of pesticides of severe toxicity or high residual toxicity is prohibited so as not to pollute the wheat producing man-made damage. Late season wheat care should also be intensified at the same time to increase the wheat's own resistance and reduce pest damage.

9432

CSO: 4007/452

MEASURES TO CONTROL SERIOUS COTTON APHID OUTBREAKS OUTLINED

Shijiazhuang HEBEI RIBAO in Chinese 28 May 82 p 2

[Article: "Tremendous Outbreaks of cotton Aphids; Need for Strenuous Efforts in Elimination and Control. Provincial Agriculture Bureau Comrades in Charge Issue Statement to Newspaper Reporters on Current Elimination and Control of Cotton Aphids"]

[Text] On 26 May, Provincial Agriculture Bureau comrades in charge pointed out the following in a statement issued on the problem of elimination and control of cotton aphids [*Aphis gossypii*].

By now most cotton seedlings in the province have emerged from the ground and a general outbreak of cotton aphids has occurred. Monitoring reports for the period 10 to 19 May from plant protection stations everywhere report a general 20 to 30 percent and a maximum 100 percent plant aphid infection rate. One hundred plants showed aphids numbering more than 100, and many had between 4,000 and 5,000. Curling of leaves has begun to appear on large numbers of plants. A survey done on 19 May at the Zhengding Stock Variety Farm showed a 50 percent rate of leaf curling. Generally speaking, when the plant aphid rate reaches 30 to 40 percent, when aphids number 1,000 per 100 plants, when the number of plants having curled leaves stands at 20 to 30 percent, and when the proportion of ladybugs is less than 1:150, prevention and control should be done at once, otherwise a loss in yields may result.

Aphid pest growth and development in cotton seedlings extremely damages cotton output. Studies show that when aphid pests occur in cotton seedlings during the period between the seed leaf and the first true leaf stage, the squaring stage will be delayed by from 5 to 10 days. When aphids strike cotton seedlings between the seed leaf and third true leaf stage, squaring will be delayed for 11 to 15 days. Surveys done at Shijiazhuang, Handan, Jingtai, and Baoding prefectures show that unless cotton seedling aphids and hot weather aphids are controlled, cotton output will drop by 60 percent or no crop at all will be harvested. If not properly controlled, a 10 to 30 percent drop in output will result.

Control of cotton aphids during the seedling stage requires comprehensive control measures. From the time that thinning of seedlings begins in cotton fields, control of aphids should be done at the same time. When thinning seedlings, attention should go to thinning of cotton seedlings bearing aphids, and uprooted aphid-infested cotton seedlings should be taken out of the fields and buried or composted.

Chemical control should emphasize stem applications of omethoate and methamidophos. Use of this method is highly effective, economical, convenient, and is not limited by lack of pesticide equipment. Peasant households can use it. Chemical control must be done in the control period, neither too early nor too late. In places where the proportion of ladybugs is greater than 1:150, attention should go to protecting and using natural enemies to effect control.

Control of aphids requires use of the plant protection organization. Particularly necessary is bringing into play the superiority of production brigades and production teams in providing centralized control. No matter the forms of production responsibility systems practiced, elimination of insects requires centralized survey of the insect situation, centralized purchases of pesticides, centralized management of pesticides, centralized preparation of insecticides, and centralized organization of control in order to reduce the incidence of accidental poisoning, improve control results, and solve problems of myriad households not having sufficient pest control equipment and inability to control the insects. Leaders at all levels and plant protection units must organize their mainstay cadre forces to go into communes and brigades to provide technical guidance and technical education. They must do a really good job of publicizing safe use of pesticides to prevent accidental poisonings.

9432

CSO: 4007/451

PEOPLE'S REPUBLIC OF CHINA

BRIEFS

JIANGSU BACTERIAL INSECTICIDES--Nanjing, 17 Jul (XINHUA)--A method of vegetable pest control by bacteria is being applied to 1,130 hectares of vegetables, about one-fourth of the vegetable gardens in the suburbs of Nanjing, according to the city's vegetable research department. The bacterial insecticides used in Nanjing belong to the bacillus thuringiensis family and have evidenced little pollution or side effects thus far. They are more effective in killing such farm pests as cabbage worms and moths than other pesticides. One kilogram of the bacterial insecticide, which can be used on 0.5 to 0.6 hectares, costs only 2 to 3 yuan. The expenditure of bacterial insecticides per hectare is 50 percent less than the farm chemicals. With the bacterial insecticides, the vegetables appear to grow better than those applied with farm chemicals, and do well on the market. The study and experiments on the bacterial insecticides began in 1977.
[Text] [OW181818 Beijing XINHUA in English 1219 GMT 17 Jul 82 OW]

CSO: 5400/4009

ANTI-GRAIN BORER MEASURES

Lusaka TIMES OF ZAMBIA in English 3 Aug 82 p 2

[Text]

The Ministry of Agriculture and Water Development has taken far reaching measures aimed at curbing the spread of grain borer from Tanzania into Zambia.

Minister of State for Agriculture and Water Development Mr Justin Mukando confirmed yesterday that since the campaign to halt all Tanzanian grain into Zambia was launched, no reports of grain borer had reached the ministry.

Mr Mukando said his technical officers were on standby and were well equipped in case the disease affected the local crops.

Political education was launched in the area to teach villagers the consequences of accepting Tanzanian grain.

Recently, a Food and Agriculture Organisation (FAO) representative said he was not aware of the imminent spreading of the disease but promised to investigate the situation with a view to finding a remedy.

CSO: 5400/5711

END