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CSP12.R2 EN RESOLUTION CONCERNING THE AGREEMENT BETWEEN THE PAN AMERICAN
SANITARY BUREAU AND THE WORLD HEALTH ORGANIZATION

The XII Pan American Sanitary Conference, meeting at Caracas, after having carefully studied the documents, reports and statements presented by the Delegates of the American Republics, the reports of the Governing Board of the Pan American Union of November 6, 1946, the statement issued by the Directing Council of the Pan American Sanitary Bureau at its meeting in Havana on October 1-10, 1946, the resolution approved by the General Assembly of the United Nations on December 14, 1946, and other pertinent background documents,

CONSIDERING (1) That it is imperative for humanity that there should emerge from the war a better world, more favorable to social existence and that one of the immediate means of attaining this objective is to hasten the establishment of the World Health Organization, already provided for in agreements signed by nearly all the nations of the world;

(2) That the American Republics unanimously signed these pacts, thus testifying to their willingness to cooperate in the realization of the above stated objectives; and

(3) That nothing would contribute more surely toward the realization of this objective than the unequivocal definition without delay of the relations which shall exist between the Pan American Sanitary Organization, - represented by the Pan American Sanitary Bureau and the Pan American Sanitary Conferences, - and the World Health Organization, which relations have been concretely outlined in Article 54 of the Constitution of the Charter of the World Health Organization.

RESOLVES:

I. To recognize expressly the need for and the benefit to health of all peoples of the world and consequently to peaceful

relations among all men regardless of race, creed or tongue, to be derived from the immediate establishment and operation of the World Health Organization and of its executive and technical organs.

II. To recommend to the governments of the American Republics which have not yet done so, the approval of the Constitution of the World Health Organization, signed in New York on July 22, 1946, through ratification in accordance with their respective constitutional processes.

III. That the Pan American Sanitary Organization, represented by the Pan American Sanitary Conference and the Pan American Sanitary Bureau, shall continue to function in its continental character in American aspects of health problems and shall act as Regional Committee and Regional Office of the World Health Organization in the Western Hemisphere, in accordance with the Constitution of the World Health Organization and the terms of the agreement envisaged in the following article.

IV. To approve the principles contained in the attached document (Annex) which will serve as a basis for the formulation of the agreement envisaged in Article 54 of the Constitution of the World Health Organization.

V. To authorize the Directing Council of the Pan American Sanitary Bureau in the name of the American Republics to work out the details of the agreement within the general framework of the attached document (Annex) in accordance with sub-paragraph G of Article 2 of the Agreement which established the Interim Commission of the World Health Organization.

VI. That the agreement those formulated shall enter into effect and have full legal force only after the following events have occurred:

- (1) The World Health Organization has been established;
- (2) The World Health Assembly has approved the terms of the agreement;
- (3) At least 14 of the American Republics have ratified the Constitution of the World Health Organization with or without reservations; and
- (4) The Director of the Bureau has signed the agreement on behalf of the Pan American Sanitary Conference.

VII. That, pending the establishment of the World Health Organization and the entry into force of the agreement referred to in paragraph V, the Pan American Sanitary Bureau shall maintain the closest possible relations with the Interim Commission of the World Health Organization for the general improvement of the health of the world which is the common objective of both organizations.

VIII. That the provisions of article 54 of the Constitution of the World Health Organization, shall be carried out under the terms of the agreement here envisaged or of one which may contain possible modifications suggested by the World Health Organization and approved by the Directing Council of the Pan American Sanitary Bureau, to which the Conference delegates the necessary authority. The points which are not contemplated in the basis contained in the Annex and which may be raised when the present draft of agreement is concluded shall be resolved by the Directing Council of the Pan American Sanitary Bureau within the spirit of free and loyal cooperation which this Annex expresses.

IX. To send this Resolution and its Annex to the Governments of the American Republics for the appropriate purposes.

ANNEX TO THE RESOLUTION CONCERNING THE AGREEMENT BETWEEN THE PAN
AMERICAN SANITARY BUREAU AND THE WORLD
HEALTH ORGANIZATION

1. The Pan American Sanitary Organization, represented by the Pan American Sanitary Conference and the Pan American Sanitary Bureau shall continue to function in its continental character in American aspects of health problems and shall act as Regional Committee and Regional Office of the World Health Organization in the Western Hemisphere, in accordance with the Constitution of the World Health Organization and the terms of the agreement envisaged in Art. IV of the Resolutions.

2. The Pan American Sanitary Conference and the Pan American Sanitary Bureau shall retain their names and shall add the subtitles of "Regional Committee of the World Health Organization" and "Regional Office of the World Health Organization", respectively.

3. The self-governing States of the Western Hemisphere may become members of the Pan American Sanitary Conference and the Pan American Sanitary Bureau, provided that they agree to comply with the common obligations of membership.

4. Territories or groups of territories within the Western Hemisphere, which are not responsible for the conduct of their own international relations, shall have the right to be represented and to participate in the Pan American Sanitary Conference as the Regional Committee of the World Health Organization, in accord with the provisions of Article 47 of the Constitution of the latter.

5. For the application of Article 53 of the Constitution of the World Health Organization to the personnel of the Pan American Sanitary Bureau, the agreement envisaged shall take into account the pertinent provisions of the By-laws of the Pan American Sanitary Bureau.

6. Even after they have adhered to the World Health Organization, the American Republics will continue making the contributions to the Pan American Sanitary Bureau which the Pan American Sanitary Conferences may decide, subject to approval by the respective Governments. In addition to paying the quotas fixed for the expenses of the World Health Organization, the American Republics may make such special contributions as they desire, either for the Pan American Sanitary Bureau or the World Health Organization.

7. The annual budget estimates for the expenses of the Pan American Sanitary Bureau as regional office for the Western Hemisphere shall be presented annually by the Director of the Pan American Sanitary Bureau to be considered in the preparation of the annual budget estimates of the World Health Organization. The funds allocated to the Pan American Sanitary Bureau in the budget of the World Health Organization shall be administered in accordance with the financial policies and procedures of the World Health Organization.

8. The Director General of the World Health Organization is authorized to receive from the Director of the Pan American Sanitary Bureau full information regarding the administration and operations of the regional office of the Western Hemisphere.

9. The Pan American Sanitary Conference is free to promote and adopt sanitary standards and conventions in the Western Hemisphere, being required to take into account and to proceed in accordance with the standards, conventions and plans of the World Health Organization, and if any country decides that the application of such standards, conventions and plans is contrary to its interests, it may refer the matter to the Directing Council of the Pan American Sanitary Bureau for prompt action. If the Council decides that the interests of the country have been adversely affected, it will submit its decision to the World Health Organization, requesting that the necessary changes be made to eliminate such discrimination.

10. The Pan American Sanitary Bureau may undertake any health programs of a regional character in addition to those of a world character of the World Health Organization. For these programs the Pan American Sanitary Code and the resolutions of the Directing Council and of the Pan American Sanitary Conference shall govern, provided that such programs are not incompatible with the Constitution of the World Health Organization.

11. The Director of the Pan American Sanitary Bureau at the time the present agreement goes into effect, shall assume the post of Regional Director until the end of the period for which he was elected.

12. The successors of the Director to which the previous Article refers, shall be elected in accordance with Article 52 of the Constitution of the World Health Organization, but no person may be named to the post of Regional Director unless he has received the vote of two-thirds of the American Republics. The right of non-acceptance may be exercised only once for each period by the Directing Council of the World Health Organization or by the Pan American Sanitary Conference.

CSP12.R3 EN REPORT OF THE COMMITTEE ON REORGANIZATION OF THE PAN AMERICAN SANITARY BUREAU

The XII Pan American Sanitary Conference records its satisfaction with the past successes of the Pan American Sanitary Organization and adopts as its own the words expressed in Habana to the effect that "the continued progress made by the Pan American Sanitary Organization has been a decisive factor in the promotion of advancement in public health in the Americas." It states, furthermore, that these results have been obtained in spite of the limited funds available to the Bureau, a fact which makes the work of the Director and personnel of the Pan American Sanitary Bureau all the more commendable.

Nevertheless, the Conference wishes to point out that the progress made by the sciences of public health and medicine, together with newer and wider concepts of the functions of the Pan American Sanitary Organization, make it necessary to reorganize and strengthen the Bureau which necessarily implies that its finances be also strengthened.

In accordance with these facts, the Conference believes that the primary aim of the Pan American Sanitary Bureau should be to fight disease, lengthen life and promote the betterment of the man of the Americas, both physically and mentally, by the coordinated efforts of all the countries of the continent.

The Conference believes that in order to carry out this purpose, the Bureau must adopt a new and broader program, including all medico-sanitary aspects of preventive medicine, medical care and social welfare. The Conference also believes that the personnel of the Bureau must be increased in proportion to the additional functions that it will assume, and points out the necessity for new quarters and an enlarged budget.

Furthermore, the XII Conference believes that when an agreement is concluded between the Pan American Sanitary Bureau and the World Health Organization, as is provided for in the Constitution of the latter, the Bureau will have to assume additional obligations as Regional Office in this Continent of the World Health Organization and that the agreement will thus affect both the method of financing and the total budget of the Bureau.

Finally, the Conference recognizes the fact that the broadened scope of activities of the Bureau, the acceptance of new responsibilities and the reorganization of the personnel make it necessary to amend its Constitution, Rules and Regulations.

In view of the above, the Conference

RESOLVES:

1. To entrust to the Executive Committee, as constituted in paragraph "D" below, the drafting of a Reorganization Plan based on the following principles to be submitted to the Directing Council before September, 1947:

A. The Pan American Sanitary Organization shall consist of four parts to be called:

- a. The Pan American Sanitary Conference
- b. The Directing Council
- c. The Executive Committee
- d. The Pan American Sanitary Bureau

B. The Pan American Sanitary Conference is the supreme organ of the Organization, and shall be constituted by a Delegation from each of the Governments of the American nations. The Conference recognizes Canada as a member state of future Pan American Sanitary Conferences. Continental territories not responsible for the conduct of their international relations, shall participate in Pan American Sanitary Conferences in the capacity in which the Conferences may determine. The Conferences must be held at least every four years at the site selected by the previous Conference.

C. The Directing Council shall consist of one representative from each of the States forming part of the organization. The Conference recommends that these representatives and their alternates be selected by the respective Governments from among specialists in public health, preferably officials of the National Department of Health. All expenses incurred by these representatives shall be paid by their respective governments. The Directing Council shall meet at least once a year. When the agreement between the Pan American Sanitary Bureau and the World Health Organization becomes effective, the Directing Council shall assume the responsibilities of the Regional Committee of the World Health Organization for the Western Hemisphere.

D. The Executive Committee will be composed of seven representatives, elected by the Directing Council from its members, for overlapping terms of three years. The first Executive Committee of seven members shall be formed at the present XII Pan American Sanitary Conference, by election of countries, not of persons,

determining by lot the terms of the members as follows:

- a. Three members for three years
- b. Two members for two years
- c. Two members for one year

The Executive Committee shall meet at least once every six months or whenever a meeting is called by the Director of the Bureau or upon request of at least three countries.

E. The Executive Committee shall elect its own Chairman from among its members. He shall serve as Chairman for the duration of his term as a member of the Executive Committee.

F. After the expiration of the term of office of the Director of the Bureau elected by the present XII Pan American Sanitary Conference, the Director shall be designated by the Directing Council by a two-thirds vote of the representatives present. The term of Office of the Director shall be four (4) years. The Director shall be ex-officio member of the Executive Committee, and shall have a voice but no vote in its deliberations.

G. The Bureau shall have an Assistant Director and a Secretary General appointed by the Director, who will also appoint the personnel of the Bureau in accordance with the Rules and Regulations adopted by the Directing Council. These Rules and Regulations shall guarantee the exclusively inter-American character of the Bureau and of its personnel and shall also assure a geographically equitable distribution of staff positions in so far as possible of both technical and non-technical personnel.

H. The Pan American Sanitary Bureau, composed of the Director and the personnel appointed as herein stated, shall supervise the work of the several Divisions of the Bureau, in accordance with the new program previously set forth covering the medico-sanitary aspects of preventive medicine, medical care and social welfare. The Pan American Sanitary Bureau shall also supervise the work of the district offices approved by the Directing Council. The Director shall appoint the permanent or non-permanent technical committees which the Pan American Sanitary Conference or the Directing Council may recommend. The possibility is also envisaged of appointing consultants and advisors, whether Americans or not, to some of these Committees.

2. To carry out the provisions of the previous Articles, the Conference believes it necessary to alter the contributions of the countries to the Bureau as follows:

The Directing Council shall prepare an adequate budget for the work of the Bureau which, in accordance with Article 60 of

the Pan American Sanitary Code, shall be allocated among the signatory governments in accordance with the system under which the expenses of the Pan American Union are allocated. The Director shall likewise be instructed to request the approval by the various governments of the quotas established.

3. Except for the increase in individual quotas, which must be submitted to each government for its approval, the organizational details formulated in accordance with the bases herein set forth shall become effective immediately upon their approval by the Directing Council.

4. The Conference authorizes the Directing Council to begin at the earliest possible date the discussion and approval of the amendments to the Constitution and By-laws of the Pan American Sanitary Bureau.

5. For carrying out the provisions of this Resolution, the Director of the Pan American Sanitary Bureau, in agreement with the Executive Committee, shall convoke a meeting of the Directing Council within the next nine months.

CSP12.R4 EN REPORT PRESENTED BY THE TECHNICAL COMMITTEE ON THE
ORGANIZATION OF SANITARY SERVICES

The XII Pan American Sanitary Conference insists on recommending to the respective Governments:

1. That for the organization and development of sanitary services, the National Government establish technical and administrative standards, supervise their application throughout its entire territory, and cooperate in the coordination of national, regional, local and private efforts;

2. That for the administration of the various local sanitary programs, preference be given to local health units dealing with all the sanitary problems of well-defined areas and populations under a single direction.

3. That all activities of preventive or curative medicine carried out by social welfare organizations be promoted and developed in accordance with the standards established by the National Health Department, with the program of which all social welfare programs should be coordinated; similarly, the programs of all official or private institutions, rendering services in social welfare and charity shall be carried out in accordance with these standards;

4. That legislation be enacted to establish:

- 1) stability of employment,
- 2) promotion of career personnel, and
- 3) responsibilities of such personnel.

5. That a system of full-time employment with reasonable salaries be adopted for all positions in which such employment is desirable and necessary.

6. That Governments appropriate in their national budgets at least the equivalent of \$1.00 per inhabitant per year for preventive health work.

CSP12.R5 EN RELATIONS BETWEEN PUBLIC HEALTH AND SOCIAL INSURANCE

The XII Pan American Sanitary Conference believes that it should favor the inception and development of social insurance systems which help to make a reality of the right of citizens to the preservation of health, the treatment of illness, rehabilitation, and to other economic subsidies in time of major want or inability. The contribution of the insured insures that right.

The insurance system recommended is a transition towards a universal system which should aid all individuals in the best way and without distinctions of any kind.

In addition to being obligatory, social insurance should be amplified as much as possible to cover important sectors of the population and to check the creation of privileges and the artificial breaking up of families and groups of persons.

In order to be effective and to contribute to the improvement of collective health, social insurance should be carried out in accordance with the principles of preventive medicine, taking into consideration the causes of disease, the modes of transmission when communicable, and the social and emotional factors which may cause or aggravate them. Social insurance as a merely curative program fulfills a temporary need but has no appreciable influence on the indices of morbidity and mortality.

The money received and accumulated by social insurance is for the benefit of those who have actually contributed and it is not fair, therefore, to devote it to the hypothetical benefit of future generations or other people. When the money is used for programs of wider scope, the State should at least cover the difference so as not to lessen the original amount belonging to the contributors.

When the funds are utilized for the carrying out of plans conceived and executed in a reasonable manner, the resources should not be curtailed with a view to balancing the budget or to over-protecting the reserve fund. It is known that insufficient funds nullify such plans but on the contrary, a properly executed program lessens the burden of illness as well as future needs for which the funds were destined. The State must always be ready to grant necessary financial backing.

When carried out under good administrative standards, the structure of the social insurance programs may vary in different countries according to political or other circumstances. Whatever it be, it should follow a national program covering the functions of health protection and of medical care. Furthermore, it must avoid breaking up the family, forced splitting of problems and overlapping of efforts. The doctors should participate actively and decisively in directing the program and in the formulation of policy. Until unity is achieved, an ideal which the various countries are seeking by varying routes - it seems advisable to set up committees to maintain close relations among the different departments and to harmonize their activities.

Whatever the future evolution may be, the XII Pan American Sanitary Conference considers sanitary units of proven efficacy through which complete care can be given to groups of population. Each of these units marshals its resources and employs them in carrying out a plan which is in accord with the characteristics and requirements of the respective group, which it comes to know and with which it establishes permanent contact. The unit is under the direction of a full-time health officer, assisted by general practitioners, various specialists and a sufficient number of public health nurses.

Convinced that modern techniques of preventive medicine can greatly improve the collective health, the XII Pan American Sanitary Conference recommends that these be put unto practice, with the warning that they are expensive. The Governments should, then, provide budgets in accordance with the need which should forestall the lowering of the economic level of the medical profession, and particularly should not injure any national programs which may have been proposed or are being carried out.

CSP12.R6 EN ZOO NOSES TRANSMISSIBLE TO MANA. BRUCELLOSIS

The XII Pan American Sanitary Conference recommends:

1. The organization of a Permanent Commission composed of delegates from all countries interested in the brucellosis problem. These delegates shall be selected by the Pan American Sanitary Bureau from a list of three submitted by each of the countries and, when selected, each delegate will organize a National Committee in his own country for the study of brucellosis. The National Committee so organized will include membership from the various professions: of medicine, veterinary medicine, epidemiology, bacteriology, economy and vital statistics.
2. That the Brucellosis problem be declared one of international importance.
3. That the methods for diagnosis of brucellosis be standardized for the Americas.

CSP12.R7 EN B. RABIES

1. That the American countries intensify the control of vector animals, principally dogs, and that a census of these animals be made.
2. That laws or ordinances be enacted providing for rabies control methods and that where such laws or ordinances already exist, provision be made for their enforcement.
3. That in laws, ordinances, and regulations, concerning rabies prophylaxis, preferential attention be given to the provision that dogs which are allowed on the streets be properly muzzled and leashed.
4. That all ownerless stray dogs be captured and destroyed.

CSP12.R8 EN C. TYPHUS

1. That everything possible be done to provide appropriate rat-proof dwellings to the entire population.
2. That the use of residual insecticides and rodenticides be popularized and that the prices of them be lowered.

3. That the present official institutions for the study of typhus be strengthened and that private investigators of typhus be encouraged and aided.

4. That an attempt be made to standardize rickettsial disease nomenclature.

CSP12.R9 EN D. PLAGUE

1. That in all countries where plague has been found in wild rodents, investigations be intensified for the purpose of obtaining more exact knowledge of the epizootiology and epidemiology ofylvatic plague.

2. That all buildings be rat-proofed.

CSP12.R10 EN E. SALMONELLOSIS

In view of the fact that diarrheal disturbances constitute the principal cause of death in many of the American countries, it is recommended that the study of the salmonellas and other pathogenic intestinal parasites be intensified, that centers for their study be established, and that those in existence be improved.

CSP12.R11 EN F. TRYPANOSOMIASIS

1. That epidemiological surveys of Chagas' disease be made in the countries of the Western Hemisphere for the purpose of establishing what local conditions tend to perpetuate its endemicity.

2. That studies be carried out on the biology of Schisotrypanum cruzi, on the Triatomias and on improvement of diagnostic methods.

3. That studies be made to design a new type of rural dwelling that will fulfill minimum health standards, taking into consideration the habits and economic condition of the rural population.

4. That a systematic study be made of insecticides in the campaign against the Triatomias.

CSP12.R12 EN MALARIA

The XII Pan American Sanitary Conference resolves:

1. To authorize the Director of the Pan American Sanitary Bureau to appoint for a period of three years the seven active members of the Pan American Malaria Committee, who may be re-elected; the term of office of two of these members after the first appointment shall be one year, and the term of office of two others shall be two years, these four members to be chosen by lot immediately.

2. That in the budget of the Pan American Sanitary Bureau a sufficient amount should be provided to cover the expenses required for an annual meeting of the seven active members of the Committee, as well as for a bi-annual plenary meeting and for the expenses of the secretariat of the Committee.

3. To authorize the active members of the Pan American Malaria Committee to appoint two other groups of members;

a) corresponding members who shall be the chiefs of Special Malaria Service of the National Health Departments, provided that such services represent primary administrative divisions within such departments; and b) associate members, who shall be persons belonging to educational or health organizations, devoted to the study of malaria or its control in America, and who in the opinion of the active members of the Committee could contribute sound advice toward its work.

4. To authorize the active members of the Pan American Malaria Committee to appoint as corresponding or associate members persons from American territories of European nations, who are interested in the teaching, research or control of malaria.

5. That full authority be given to the Pan American Malaria Committee to adopt its own rules of procedure.

6. To authorize the Chairman of the Pan American Malaria Committee to request directly of the National Health Departments of the American countries information on all matters concerning malaria and its control by means of questionnaires, for the drafting of a report which the Committee must present periodically to the Pan American Sanitary Conference regarding the progress of the antimalarial campaign in this continent and that the Department of Health requested to answer the questionnaires be urged to act promptly; that the data thus compiled be published in the Bulletin of the Pan American Sanitary Bureau and that the report be submitted for publication to specialized journals such as "The Journal of the

National Malaria Society", "Tijeretazos sobre Malaria", "The Journal of the Malaria Institute of India", and "Revista di Malariologia".

7. That the National Departments of Health should, in the formulation of plans or programs for anti-malaria campaigns, be directed to take advantage of all opportunities offered for active cooperation with other Government Departments, until the Malaria control program may be converted into one of rural improvement.

8. That the anti-malaria services take necessary steps with their respective governments, to include malaria and malaria control measures among the subjects studied in Grammar, High and Normal Schools.

9. To recommend to those American countries where malaria is a considerable problem: a) a periodic study of those measures which might facilitate the control of the disease to be sure that the money and effort devoted to this end are in proportion to the importance of the problem; b) the vital importance of employing, on a full-time basis, the personnel trained in antimalarial work; and c) the use of the facilities offered by the School of Malariology at Maracay, Venezuela.

10. That the American countries be reminded that, with the present increase in travel, great attention should be given to the fact that insects of medical and economic importance, including the Anopholes, have been transported by land, sea and aircraft, and that these countries should take the necessary measures to protect themselves against the inadvertent transportation of such insects to their own territories and those of their neighbors.

11. To recommend the use of chloroquine and paludrine on a larger scale for the treatment of malaria, obtaining information on its use against species and strains of plasmodia not previously treated; to investigate experimentally the effectiveness of these drugs for the suppression of malaria in endemic zones and for the rapid control of epidemics; and to inform interested persons and agencies on their use.

12. That the attention of the American countries be directed to increasing the efficiency of their systems for the free distribution of anti-malarial drugs; to the urgent need of reducing the cost of distribution; to the need for checking their purity and cost, and to the systems of mass distribution of anti-malarial products now operating in Argentina and Venezuela, systems which they should study with the idea of adapting them to their own needs and requirements.

13. To call attention of the Public Health Department of the American countries to dichloro-diphenyl-trichlorethane insecticide, known as DDT, which plays a most important role in the malaria control programs, and to recommend that full efforts be made towards its utilization, and to a better knowledge of its use for the solution of those problems in which it has not yet been employed, with special studies on the reasons for its ineffectiveness under certain conditions; that the Director of the Pan American Sanitary Bureau and the Pan American Malaria Committee, as its consulting body, expedite the exchange of information regarding the use and application of this insecticide, and that all DDT used be in accordance with the specifications of JAN-D-56-A of the Government of the United States of America.

14. That thanks be expressed to the Venezuelan Government for its generous and inspiring action in granting scholarships for the training of specialized personnel from other countries in the School of the Division of Malariology at Maracay.

15. That the Pan American Sanitary Bureau, National Health Departments of the American Countries and other interested agencies in these countries, accept the recommendations by the Pan American Malaria Committee at its III Meeting.

CSP12.R13 EN FOOD AND DRUG REGULATIONS

The XII Pan American Sanitary Conference recommends:

1. That the Pan American Sanitary Bureau create and establish a Committee on Drugs and Foods, composed of representatives of each of the American countries, and a Central Office, the primary function of such a committee being to study problems arising from the exportation, importation, manufacture, and supply of drugs, food and cosmetics.

2. That the above mentioned Committee prepare a Pan American Bromatological Code which will define and classify human foods, establish standards of purity, regulate manufacture, preservation, labeling and transportation, and contain rules and definitions regarding adulterations, alterations and falsifications, determining the common methods with which to judge the quality and the preservation of the same. Pending the establishment of the said Committee, it is suggested that, in view of the urgency of the matter, the drafting of a project of such Code be undertaken by the Pan American Sanitary Bureau.

3. To ratify by vote, the recommendations suggested in previous Pan American Sanitary Conferences with regard to the promulgation of a Pan American Pharmacopoeia suitable for adoption by all the American countries. Meanwhile, it is suggested that the Pharmacopoeia of the United States of America be adopted duly complemented by such National Formularies and Special Regulations as each country may deem necessary.

4. That in the Bulletin of the Pan American Sanitary Bureau a permanent section be devoted to the publication of data about new therapeutic products, techniques of identification and evaluation, applications and indications as well as full information regarding measures taken by the different American governments with reference to specific therapeutic, food and cosmetic products.

5. That the Pan American Sanitary Bureau take suitable steps in order to assure to the official laboratories of the American countries supplies of pharmacological and biological standards as well as standard bacterial strains for determining the potency of such products as have or in the future may have official standards.

RECOMMENDATIONS

6. It is recommended that the Governments of the American countries enter into Agreements to repress traffic and propaganda of therapeutical and food products which in any form constitute fraud or danger, or which do not correspond to modern principles of therapeutics and bromatology.

7. It is recommended that the Central Committee on Opium of the World Health Organization be asked to adopt necessary measures for the international shipment of narcotics to be made only in sealed containers so that possible violations may be detected.

8. For the greater security of Public Health it is recommended that Health and University authorities of the American countries adopt measures and regulations which, while contributing to the more efficient and ethical practice of the medical and pharmaceutical professions, will at the same time regulate in the best possible manner the practice of the same, emphasizing the ethics and responsibilities of those professional men devoting themselves to the pharmaceutical industry.

It is further recommended to the University authorities that they include in their respective programs of study such courses as may be considered necessary to accomplish this purpose.

9. It is recommended that duly authorized private laboratories in need of standards and strains to determine the potency of pharmaceutical and biological products obtain them from the official National Institutes or Laboratories.

10. It is recommended that the Governments of the American countries make a general revision of pharmaceutical, biological, endocrinic and vitaminic products, previously accepted for sale, and revoke the sale licenses or registration of patent medicines and pharmaceutical products not complying with the existing regulations or the fundamental principles of modern therapeutics. Likewise it is recommended that sale licenses or permits be renewed within a period not to exceed five years.

11. It is recommended to the Governments of the American countries, that pending the creation of the Food and Drug Committee, national health authorities should exact as necessary requisite for the registration of therapeutical products, scientific proof for the purpose of establishing its efficiency, consulting whenever pertinent, with official institutions of the country itself or of other American countries.

12. It is recommended to the Governments of the American countries not yet having established special legislation covering production and sale of cosmetics and of toilet goods, to draft and promulgate such legislation, with all due care for the protection of the health of the public, and as far as possible in keeping with similar legislation of other American countries.

CSP12.R14 EN EPIDEMIOLOGY OF TUBERCULOSIS AND RECENT ADVANCEMENT IN THE ANTI-TUBERCULOSIS CAMPAIGN

The XII Pan American Sanitary Conference recommends,

1. The creation of unified control of the tuberculosis campaign within the National Department of Health under specialized technical direction, as the means to achieve best results, by avoiding lack of coordination, duplication of work and application of different criteria. This technical direction shall comprise all the activities of control, in the preventive, curative and research fields, whatever the organizations may be which furnish the funds used.

2. That systematic and periodic examinations be made of apparently healthy contacts by means of the fluorographic method introduced by Dr. Abreu, preference being given to those

groups which epidemiological studies show to be more seriously affected, if and when available resources do not permit its general application.

If this method is practiced for the purpose of epidemiological findings, the tuberculin reaction should also be added thereto.

The work involved in the intensification of this method should not be undertaken at the expense of the dispensary, which represents the present basis of tuberculosis control.

3. Keeping in mind that there are already some results that justify the introduction of BCG vaccine into the practice of sanitary administration, its use is recommended subject to classical principles established in tuberculosis control, and without any reduction of these.

CSP12.R15 EN CONTROL OF VENEREAL DISEASES

In view of the great prevalence of venereal disease in all civilized nations, of its obvious gravity for the individual, of its preponderance among the causes of still birth and infant mortality; of its harmful effect upon the health of the race and of the economic losses which it represents to the State, in human capital loss, in manehours of work lost and in the expense of official medical care,

The XII Pan American Sanitary Conference recommends that:

The States participating in this Conference devote special efforts and attention to the reduction or elimination of venereal disease, establishing complete systems of prophylaxis equipped with sufficient economic resources and material and technical means and mobilizing all factors of society whose participation is necessary.

CSP12.R16 EN RESOLUTIONS OF THE COMMITTEE ON SUBJECT NO. 7 POST-WAR HEALTH PROBLEMS, ESPECIALLY THOSE REFERRING TO MIGRATIONS

1. That the time has arrived to study health conditions in the American Continent; to improve the conditions of health and comfort and to plan coordinated programs, keeping in mind recent advances in the field of health.

2. With regard to the necessity of intensifying the campaign against communicable diseases, special attention should be given to the problems of tuberculosis, venereal disease, malaria, typhoid

fever and dysentery, the control of which may well benefit by advances achieved during the last war.

3. It is necessary to determine and always strengthen on solid bases the salutary policy of mutual aid among the countries of the continent in regard to the food problems.

4. The countries of the Americas, reaffirming their traditions and their conveniences, which are notable principally for the possibilities of increasing and improving their production and developing their potential resources, should follow a broad policy of immigration.

5. The countries of the Americas are free to decide on the basis of their own political, economic and social conditions how they may face the problem of immigration; however, from a health point of view, they should all maintain unity in permitting only physically and mentally sound persons to enter their territories. All the indicated health requirements shall be applied to all travellers coming to reside permanently in a country by whatever means or class of transportation they may use to enter the country, with the exception of passengers classified as tourists.

6. For this purpose, the American countries should establish a plan of collaboration and mutual aid to conduct health examinations at points of concentration or ports of embarkation. This plan may be established by agreements between countries, either directly or through the Pan American Sanitary Bureau, without prejudice to the right of each country to conduct health inspections at ports of entry and possible repatriation, in accordance with the laws of that country.

7. The American countries shall maintain and develop a program of education and health care for the immigrants and shall carry on necessary studies to clarify the procedure of adaptation in regions climatically different from those of origin. In all areas devoted to colonization, health authorities of each country shall proceed to make the necessary sanitary improvements and shall adopt the necessary health measures for their due and complete protection.

CSP12.R17 EN HEALTH EDUCATION

The XII Pan American Sanitary Conference resolves:

To approve the recommendation made by the II Pan American Conference on Health Education that a technical Committee on Health

Education be formed within the Pan American Sanitary Bureau and furthermore, that a Health Educator be appointed to the technical staff of said Bureau, if this be possible within its budget.

CSP12.R18 EN REPORTING ON RHEUMATIC SICKNESS

The XII Pan American Sanitary Conference recommends:

That rheumatic fever be considered a malady of compulsory report in order to be able to obtain precise statistics concerning the extent of its morbidity and mortality in view of its vast consequences and social repercussion on the health of child and adult.

CSP12.R19 EN COOPERATIVE HEALTH PROGRAM

The XII Pan American Sanitary Conference recognizes the great value and effectiveness of the cooperative health programs which the Institute of Inter-American Affairs is carrying out in the Republics of the Western Hemisphere.

CSP12.R20 EN DIRECTOR AND DIRECTOR EMERITUS

In accord with the Constitution and Statutes of the Pan American Sanitary Bureau, Dr. Fred L. Soper was elected Director by acclamation.

Dr. Hugh S. Cumming was elected Director Emeritus also by acclamation.

EXECUTIVE COMMITTEE

The following were elected members of the Executive Committee:

United States
Chile
Costa Rica
Argentina
Cuba
Mexico
Brazil

Of these, the following are to serve for a period of three years:

Mexico
Costa Rica
Brazil

The following for two years:

Cuba
United States

And for one year:

Argentina
Chile

HONORARY MEMBERS

The following persons were elected by acclamation as honorary members:

Dr. João de Barros Barreto, of Brazil
Dr. Edmundo Fernández, Minister of Health and Social Assistance, of the Republic of Venezuela.

SITE OF THE NEXT CONFERENCE

Guatemala City has chosen as the site of the XIII Pan American Sanitary Conference which is to take place in 1950, the exact date to be determined by the Government of Guatemala in agreement with the Pan American Sanitary Bureau.

IN MEMORIAM

The XII Pan American Sanitary Conference renders homage to the following men of science whose recent deaths constitute a loss to the service of public health in the Hemisphere:

Porter J. Crawford, of the Rockefeller Foundation;
Salvador Mazza, of the Republic of Argentina;
Juan Noé, of the Republic of Chile.

SPECIAL RECOGNITION

The XII Pan American Sanitary Conference gives its vote of appreciation and gratitude:

To the Government and people of Venezuela for the generous manner in which they have treated the delegations and facilitated their work, and particularly to His Excellency, the President of the Revolutionary Junta of the Government, and to the officials of the Ministry of Public Health and Social Assistance;

To the Constituent Assembly of Venezuela for its message of encouragement and its assistance in the success of the Conference;

To the Organizing Committee and to all the personnel of the Secretariat for the success with which the organization was carried out and direction of the work of this Assembly.

To the Pan American Sanitary Bureau for its valuable cooperation in the preparatory work;

To the Press of Caracas for the complete, excellent and very helpful information which it gave to the work carried out;

To the Dutch and British Territories and the French Departments of the Western Hemisphere for their participation in the Conference, and

To the Director of the Pan American Sanitary Bureau for his work from the time of the previous Conference and for the complete manner in which he reported thereon.

The closing session occurred at ten-thirty on the evening of January twenty-fourth, of the year Nineteen Hundred and Forty-seven in which His Excellency, Dr. Carlos Morales, Minister of Foreign Relations of the Republic of Venezuela took part.

The present Act was signed in the City of Caracas on the twenty-fourth day of January of the year Nineteen Hundred and Forty-seven with the recommendation that it be sent through diplomatic channels, in authenticated copies, to each of the countries represented at the Conference, and for this reason, copies should be sent to the Minister of Foreign Relations of Venezuela and to the Pan American Sanitary Bureau in order that they may assume this task.

Chairman,
(Sgd.) E. Fernández M.

Secretary General
(Sgd.) S. Ruesta

Secretary General
(Sgd.) Arístides Moll

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