

FOURTH PAN AMERICAN CONFERENCE OF NATIONAL DIRECTORS OF HEALTH

(Held at Washington, D. C., April 30-May 8, 1940)

RESUMÉ

The Final Act of the Fourth Pan American Conference of National Directors of Health appeared in the *Bulletin* for June 1940. Preceding the publication of the General Transactions, now in preparation, the Pan American Sanitary Bureau here offers a resumé of the important discussions and papers presented at the Conference. It is naturally impossible, in a summary of this nature, to cover all the interesting points brought out by such a group of experienced sanitarians, but an effort has been made to present as comprehensive a picture as possible.

SANITARY PROGRESS REALIZED IN THE AMERICAN REPUBLICS SINCE THE TENTH PAN AMERICAN SANITARY CONFERENCE (BOGOTÁ, 1938)

In reviewing the sanitary progress of the American Republics as reported at the Conference, it is well to recall that not all the countries are represented in this outline, and that many of the sanitary advances described at the Conference belong more properly in the chapters dealing with specific subjects, which will appear in other numbers of the *Bulletin*.

Argentina.—Dr. Spangenberg presented as the most significant event in Argentine sanitary progress during the last few years the tendency toward unification of health and social welfare services. Important services have already been incorporated into the Department of Health, and he himself is President both of the Department of Health and of the Advisory Commission on Asylums and Regional Hospitals. The vigorous campaign against contagious diseases continues. Smallpox cases have been reduced from 53 in 1938 to 5 in 1939. In the latter year, 721,000 smallpox vaccinations and nearly half a million diphtheria immunizations were made. Bubonic plague decreased to 5 cases, all of rural origin, in 1939, and rat extermination showed an increase of 18,000 rats, no plague-infected rats being found. The National Central Tuberculosis Hospital, with 600 beds, was recently opened. It will function as a center for classification and distribution of cases. There are also three mountain sanatoria and 17 dispensaries for tuberculosis. The number of leprosy beds has been increased, and will reach 1500 by the end of the year, including those of a new colony under construction.

Brazil.—Dr. Barros Barreto reported that the most notable initiative in health work in Brazil since the Bogotá Conference has been the effort of the National Department of Health to coordinate under a single directing principle the activities of the various State departments of health. Attempts have been made to secure a uniform structure in State departments, based on the following fundamental points: a single centralized office, organization of a central laboratory, division of the territory into sanitary districts, and individualization of certain activities. Eighteen State services have already been remodeled. Also of interest is the increase from 59 in 1937 to 147 in 1938 of the cities for which the National Department of Health collects and publishes statistical data. A new leprosy hospital has been built, and several preventoria for children of lepers are planned. The tuberculosis campaign is being extended to 13 states, with the construction of new sanatoria. More than 35 Abreu roentgen-photography units have been installed. A progressive reduction in plague in the northeastern focus

has been achieved, with a decrease from 1,344 cases in 1934-35 to 193 in 1937-39. Progress has also been made in yellow fever control work, including the apparent eradication of *A. aegypti* in many zones, the vaccination of more than one and a half million persons, and the organization of the National Yellow Fever Service.

Colombia.—The most important development in Colombia since the Bogota Conference, as pointed out by Dr. Bejarano, has been the creation of the Ministry of Labor, Health and Social Welfare, with an increase in the health budget from 1,700,000 pesos to nearly 7 million. The number of tuberculosis dispensaries has been increased from 14 in 1938 to 27. Two regional tuberculosis conferences have been held, helping to arouse greater interest in the subject. Preventoria for the children of lepers, and leprosy dispensaries in areas of greatest incidence are giving promising results. Protection of the pregnant mother and of children is provided for by a law enacted in 1938. Mention should also be made of the increase in the number of milk stations, nurseries and children's clinics. A yellow fever institute, with a special laboratory for research and preparation of vaccine, has been created, immunization intensified, and a reduction in the epidemic incidence of the disease secured. A municipal improvement fund or *Fomento Municipal* was established, and part of it will go to the creation of sanitary works such as sewers and aqueducts. Of importance also were the etiologic and clinical discoveries of Patiño Camargo, and the effective measures taken, in connection with a disease which caused more than 3,600 deaths in two years, and which was found to be bartonellosis similar to Carrión's disease.

Costa Rica.—Dr. Peña Chavarría pointed out that in Costa Rica, since 1936, all the medical, clinical and preventive activities have been carried out under the direction of the Department of Public Health and Social Welfare. Health centers have been increased and rural medical units added. Tuberculosis work has been continued, as has the emphasis on soil sanitation for the eradication of intestinal parasites and malaria. A survey has been made of the incidence and epidemiology of the latter disease in the Republic. The effectiveness of the public health work done is shown by the decrease in both the general death and infant death rates, in the Capital and in the country as a whole.

Cuba.—Dr. Finlay reported that the Cuban Health Department has devoted its efforts in the last few years to the creation of a scientific health organization; the adoption of a commissioned, full-time health service; the improvement of water supplies; typhoid vaccination; the solution of the venereal disease, leprosy, tuberculosis and nutrition problems through education, dispensaries and sanatoria; and the reorganization of vital statistics.

Chile.—Dr. Garcés pointed out that despite the setback of the 1939 earthquake in Chile, the Government has continued its work in the solution of the most urgent social problems, namely, food, shelter, and other assistance. Among the measures are a law assuring the means of subsistence to heart disease and incipient tuberculosis cases. Three new contagious disease hospitals are being erected. The typhus situation has greatly improved. A decree providing for a decrease in cost of medical and pharmaceutical preparations has been issued. Under consideration are compulsory treatment of drug addicts and greater economic protection for mothers. In general, Social Security benefits have been increased, as have the treatment, assistance and protective features and the medical and technical personnel of the Workers' Insurance system. The activities of the Social Assistance and Welfare Service, which has 163 institutions and 22,250 beds, have also been expanded.

Ecuador.—Among the most outstanding achievements of the Ecuadorian Health Department, as reported by Dr. Montalván, are the eradication of bubonic plague from the port of Guayaquil and its reestablishment as a Clean Port, Class A; and the creation of an Institute of Hygiene, now almost completed,

with all facilities for laboratory and research work. Smallpox is now entirely under control. The tendency toward a more centralized health administration has continued, and better control over the pharmaceutical profession and pharmaceutical products is being secured.

Guatemala.—Dr. López Herrarte observed that the centralization of the health administration in Guatemala has contributed to the realization of more effective work. Continued efforts are being made against onchocerciasis, and to solve the food and housing needs of the poor.

Mexico.—In Mexico, as reported by Dr. Siurob, a decrease in the infant death rate and smallpox death rate have been noted. An intensified campaign including skin tests of children, use of collapse-therapy in dispensaries, and increase in the number of sanatoria, has contributed to the reduction of tuberculosis mortality. Among other achievements are the extension of water supplies to small Indian villages; medico-social work among Indians through the establishment of free health centers; inauguration of the Institute of Tropical Diseases, with its splendid laboratories; completion of a 600 bed leper colony and commencement of work on another of 1200 beds; the beginning of work on five hospitals, one to be devoted to onchocerciasis, with its own laboratory, and another, of 150 beds, for pinto cases; an increase in the number of nurses; the making of the transmission of venereal disease a punishable offense; an increase in sanitary engineering work against malaria; and improvement of housing facilities.

Panama.—Among the advances seen in Panama, as reported by Dr. Mastellari, are the securing of a certain amount of permanency in health department activities and personnel, as shown by the steady flow of its action; the completion of three provincial hospitals, a tuberculosis dispensary, and three health centers; the beginning of work on two additional hospitals (one, of 1000 beds, for mental disease cases), four health centers, a Cancer Institute, and a Maternity Hospital; the permanent work against malaria; the increase in sewerage and water supply systems, markets, etc.; and the establishment of a yellow fever and viscerotomy service and of a National Nutrition Commission.

Peru.—Dr. Hurtado recalled that the Peruvian Ministry of Public Health and Social Welfare was created in 1935, and its services have subsequently been extended with the addition of the Maintenance Bureau, the Institute of Andean Biology (with the cooperation of the Rockefeller Foundation) for biological research on the influence of altitude and of *coca* addiction, the National Cancer Institute for diagnosis and treatment (with facilities for 100 patients), and the Social Security system established in 1936, which immediately began the construction of hospitals, among them, one in Lima of 1000 beds. In 3 years, 3500 beds will have been added to the facilities of the country. The budget has been progressively increased, the Census Law expedited, and the unification of the tuberculosis campaign under state direction has been secured. Two tuberculosis dispensaries and a children's sanatorium have been founded; another sanatorium has been enlarged and one of 1000 beds is to be constructed. A new building, 6 stories high, which has just been completed, houses the Ministry itself.

Dominican Republic.—In reviewing the sanitary progress of the Dominican Republic, Dr. Batlle mentioned the Social Betterment Plan through which 16 dispensaries have been constructed in certain endemic regions. The eradication of yaws and a decrease in malaria and intestinal parasitoses in such areas seem to have been secured by this means. Other activities include the promotion of some 685 school gardens, and the building of 5,000 privies, a children's hospital with 200 beds, a military hospital, and one for mental disease cases. The construction of the first tuberculosis sanitarium, with 200 beds, and of two other hospitals, one a general hospital of 200 beds, have been authorized. Compulsory vaccination of school children is another important activity.