OSP.CE5.M/-2

REPORT OF THE DIRECTOR OF THE PAN AMERICAN SANITARY BUREAU

INDEXED

April to September, 1948

Introduction

In the various reports made to the Executive Committee and the Directing Council in 1947 and 1948 the question of inadequate financing and of lack of technical personnel to carry out authorized programs is repeatedly emphasized. The same subject must be the principal emphasis of the present report, but with a note of optimism regarding the future.

The receipt in June 1948 of a voluntary supplementary payment made by Mexico in the amount of \$200,000, in addition to her quota of \$22,000, came at a critical moment when the Bureau was operating on borrowed funds. This payment, together with the action of various other countries in making appropriations for the Bureau, has given rise to a more optimistic feeling among the staff of the Bureau. The active interest shown by the members of the Executive Committee and of the Directing Council in the needs of the Bureau forms the real basis for this optimism. A knowledge of the important rôle which the Bureau should play in the inter-American medical and health fields is a constant incentive to the staff in its efforts to secure adequate funds and personnel.

The discussions at the First World Health Assembly in Geneva clearly showed that the development of regional health organizations in other parts of the world is depending in great part upon the leadership of the Pan American Sanitary Bureau.

As supplementary information to this report certain documents are attached for Member Governments on the activities of the Bureau since the last Meeting of the Directing Council. These include the Statement of Program and Budget, which has been sent to Member Governments for study, a copy of the report made by the Director to the Executive Committee in May, and a collection of documents on actions taken at the First Assembly of the World Health Organization in Geneva in June and July of this year.

This report deals only with developments since the Directors's Report to the Executive Committee in May.

Finances

Because of the urgency of the financial situation, the Executive Committee instructed the Director to carry out six specific directives (OSP.CE4.W/-20). A copy of the Statement on Program was recently sent to all Governments and is presented for discussion at this meeting of the Executive. Committee. This statement includes the authorized program, the actual program, and the proposed program, together with a summary Proposed Budget for January 1 to June 30, 1949, and a summary Proposed Budget for the Fiscal Year 1950. It can be seen from this statement that the responsibilities of the Pan American Sanitary Bureau are great, even though the proposed program submitted for consideration is inadequate in most respects.

The budget of approximately \$1,300,000 approved by the First Meeting of the Directing Council in Buenos Aires in 1947 has never become operative because of delay in receiving anticipated contributions. The Consolidated Statement of Contributions for the calendar year 1948 and for prior years which accompanies this report merits special consideration. On the quota basis of one dollar per thousand inhabitants the Bureau should have received for the year \$284,541. In addition to this amount, there was due from 1947 \$22,897 and from previous years \$7,527, making a total receivable from quota contributions of \$314,965. Of this amount the Bureau had received up to August 31, 1948, only \$118,429. Fortunately for the solvency of the Bureau, Mexico paid her regular quotas and a large supplementary contribution in June of 1948. A glance at the balances on the Consolidated Statement shows that the amounts received in supplementary quotas from Mexico, El Salvador and Chile are just about equal to the balance due from other countries on the dollar per thousand quota.

The past year's experience demonstrates the urgent need for the creation of a working capital fund as well as a reserve fund for emergency projects and to take care of unanticipated delays in the receipt of funds. It is impossible to organize international health activities on a short term basis with irregular financing.

PAN AMERICAN SANITARY BUREAU

CONSOLIDATED STATEMENT OF CONTRIBUTIONS CALENDAR YEAR 1948 AND PRIOR

COUNTRY	POPULATION FOR'48 QUOTA	1948 QUOTA	BALANCE 1947	BALANCE PRIOR TO'47	TOTAL DUE	PAID ON PAID ON a/c a/c 1948 '47 & '48	TOTAL PAID	BALANCE DUE AUG.31,1948	OTHER PAYM ADV. QUOTAS	ENTS REC'D. SUPPLEMENT	REMARKS
Argentina	14,130,871	\$ 14,130.87	\$ 2,826.17		\$ 16,957.04			\$ 16,957.04			
Bolivia	3,533,900	3,533.90	706.78		4,240.68			4,240.68			
Brazil	41,565,083	41,565.08	8,313.01		49,878.09			49,878.09			
Chile	5,389,554	5,389.55	0,010.01			\$ 5,389.55	\$ 5,389.55	47,070.07	\$5,500.00	\$ 1,857.46	
Colombia	8,701,816	8,701.81	69.59		8,771.40	φ),)07.))	# J,JO3.JJ	8,771.40	\$9,500.00	Ψ 1,077.40	
Costa Rica	725,149	725.14	145.03	\$ 572.06	1,442.23						
Cuba	4,778,883	4,778.58	955.72	1,911.43	7,645.73			1 ,442.23 7,645.73			
Dom. Rep.	1,940,546	1,940.54	777.12	1,711.45	1,940.54	*388.11	388.11	1,552.43			*D4 4- 10/0
Ecuador	3,241,311	3,241.31			3,241.31	*268 . 36	268.36				*Pd. in 1947
El Salvador	1,934,925	1,934.92			7,241.71			2,972.95		E20 70	*Pd. in 1947
Guatemala	3,546,624	3,546.64	709.32		1,934.92 4,255.96	1,461.21 \$ *473.71	1,934.92	1 255 06		538.79	*Pd. in 1947
Haiti	2,719,474	2,719.47	109.32			40 3 <i>05 50</i>	ח זמב במ	4,255.96			#D3 4- 1046
Honduras	1,201,310	1,201.31	240.26	461.76	2,719.47	*2,175.57	2,175.57	543.90			*Pd. in 1947
Mexico				401.70	1,903.33	00 386 (0 4 000 83	0/ 507 70	1,903.33		301 (00 (1	m . 3
Mexico	22,178,423	22,178.42	4,392.71		26,571.13	22,178.42 4,392.71	26,571.13			194,689.64	Total
Nt comp mus	1 070 175	יין המה ניי			1 000 40	225 /5	225 65	go. 40			\$221,260.77
Nicaragua Panama	1,070,475	1,070.47	306 30		1,070.47	335.65	335.65	734.82			
	631,637	631.63	126.32	7 (22 (1	757.95			757.95			
Paraguay	1,071,689	1,071.68	214.34	1,623.64	2,909.66	¥3 480 34	7 180 7 4	2,909.66			
Peru	7,395,687	7,395.68	2,958.27	2,958.27	13,312.22	*1,479.14	1,479.14	11,833.08			*Pd. in 1947
					-						Bal. in 1948
77 C A	160 000 600	150 501 00			100 FAL 00	15 007 M/ F07 0F; F7	70 44/ 07	mo /a4 ma			\$ 5,916.24
U.S.A.	159,772,539	152,584.77		•	152,584.77	47,931.76 *31,954.51	79,886.27	72,698.50			*Pd. in 1947
Uruguay	2,202,936	2,202.93	440.58		2,643.51			2,643.51			
Venezuela	3,996,095	3,996.09	799.22		4,795.31			4,795.31			
	TOTAL	\$284,540.79	\$22,897.32	\$7,527.16	\$314,965.27	\$81,607.77 \$36,820.93	\$118,428.70	\$196,536.57 **	\$5,500.00	\$197,085.89	

^{**} Balance of quotas receivable reconciled with the records of the Pan American Union. (Note: We have deducted \$35.33 paid by Nicaragua in Sept. 1948). fle. 1

Continental Eradication of Aedes aegypti

The control program in Paraguay has continued with a marked reduction in breeding indices of aegypti in Asunción and its suburbs. The Ministry of Health of Uruguay has authorized a program for the eradication of Aedes aegypti in collaboration with the Institute of Inter-American Affairs, and with the technical orientation of the Pan American Sanitary Bureau. In Argentina a yellow fever law was approved by the Senate on July 30, 1948, establishing an obligatory program for anti-yellow fever measures. This law is very important in that it establishes a mechanism whereby federal, provincial and municipal authorities collaborate on the program.

The confirmation of fatal yellow fever cases in Rio Grande do Sul, in Brazil, and in Misiones, Argentina, in June 1948, emphasizes the permanency of the threat of yellow fever to those cities which remain infested with Aedes aegypti.

Although DDT is being widely used in the eradication of Aedes aegypti, the technique has varied from place to place according to local conditions. In British Guiana the work has been based on the use of residual DDT as a house spray, which has obvious advantages in that it takes care of other insect pests. On the other hand, in Paraguay the attempt is being made to eradicate Aedes aegypti at a minimal cost. The method used consists of using DDT as a larvicide on a three months cycle. The method is still in an experimental stage but promises to be successful. During the first cycle of application of DDT in Asunción, adult aegypti were found in 45.3% of houses inspected, whereas only 3% of houses were found infested during the second cycle.

Regional Health Meetings

There have been no regional health meetings since the report in May.

The report on the meeting between representatives of Ecuador and Peru, scheduled for September 1948, will be made at the next meeting.

Nursing

The plans of the Nursing Section were reported in May. Mrs. Agnes W. Chagas, Nursing Consultant, attended a meeting of American, Canadian and Brazilian nurses in June to discuss

the question of an Inter-American Federation of Nurses' Association. Only 9 of the 21 American Republics have national nurses' associations at the present time, and one of the present activities of the Nursing Section is aiding in the formation of such associations where they do not now exist.

Relations with the World Health Organization

The Executive Committee, at its meeting in May 1948 authorized the Director of the Bureau to enter into administrative arrangements with the Director General of the World Health Organization in order to coordinate plans for the Western Hemisphere and harmonize the action of both organizations, reporting periodically on these arrangements.

The Director and the Secretary General both attended the final meetings of the Interim Commission from June 18 to June 23, 1948, in Geneva, and also the sessions of the First World Health Assembly meeting from June 24 to July 24, 1948. Under separate cover a document on

"Notes and Documents on Regionalization and Relations with the Pan American Sanitary Organization from the First Assembly of the World Health Organization" (OSP.CD2.M/-3)

has been sent out to all Member Governments. This document will give the Members full information on the actions taken at the First Assembly.

Real progress was made during the Assembly in planning future regionalization of World Health Organization activities. The concept of regionalization was well established in the minds of all, and six regions were delineated:

European Regional Organization
Middle East, Near East and Parts of NorthEast Africa
South-East Asian Zone
Far East Region
Africa
Western Hemisphere

An item of \$300,000 was set up for regional office budgets, but the final decision of the allocation of these funds will be made by the Executive Board of the World Health Organization. In addition, it is anticipated that portions

of the money budgeted for special programs will be spent through regional organizations where these exist.

The Pan Arab Health Organization was incorporated as the regional office for the Eastern Mediterranean, and the First Regional Committee Meeting for Southeast Asia has been called to convene in India early in October 1948.

There are at present seven Pan American countries members of the World Health Organization. These are Brazil, the Dominican Republic, El Salvador, Haiti, Mexico, the United States and Venezuela. Argentina has signed the Constitution, but the documents have not yet been deposited.

During the World Health Assembly in Geneva the question of relationships with the Pan American Sanitary Bureau received considerable attention. The Draft Agreement approved at the First Meeting of the Directing Council of the Pan American Sanitary Organization in Buenos Aires, October 1947, was taken as the basis for action.

On pages 38-40 of the report of the Assembly there is a copy of the draft agreement as approved by the Executive Board of the World Health Organization on July 24, together with the wording of the draft approved by the Directing Council at Buenos Aires in September 1947. Action taken by the Directing Council at the present meeting in Mexico City must be referred to the Executive Board of the World Health Organization which meets in Geneva on October 25. The Executive Board has been authorized by the World Health Assembly to conclude this agreement with the Pan American Sanitary Organization. Such agreement cannot become operative until 14 of the American nations have ratified the World Health Constitution.

Through the administrative office of the Bureau arrangements were made for the Expert Committee on Malaria of the WHO to meet at the Bureau's Washington office from May 18 to May 24. This collaboration with the WHO made an important meeting possible during the time of the Fourth International Congresses on Tropical Medicine and Malaria when members of various countries were already present in Washington.

When the occurrence of a case of yellow fever in the Misiones in Argentina was reported, Egypt proceeded to declare an air and sea quarantine against Argentina. The Bureau made a protest on this action to the World Health Organization and directly to the Egyptian Government. Eventually an official notification was received from the World Health Organization that Egypt had cancelled its previous action.

Relationships with the Pan American Union

The relationships between the Bureau and the Pan American Union on the administrative level have been cordial and cooperative. The Treasurer's Office has continued to handle the funds of the Bureau, and his accounts are audited by U. S. Government auditors.

In the winter of 1947 and during the spring of 1948 the Personnel Officer of the Union worked with the Personnel Officer of the Bureau in a classification of its personnel, using U. S. Government standards as a basis.

The exchange of administrative services has continued, with the Bureau having the benefit of the telephone exchange of the Union, certain printing operations, photograph service. The use of the addressograph belonging to the Bureau is made available for use of the Pan American Union. The Union truck has also been available when needed. The Union has also continued to extend to the Bureau the services of the staff nurse and those of the staff doctor. This has been helpful when vaccinations have been needed on short notice or other minor services required.

In regard to the use of the Pan American Union building, cooperation has been extended in granting the use of the Hall of Nations to the Bureau for the celebration of Pan American Health Day on December 2. Through the Division of Intellectual Cooperation one of the staff is already working with the Nursing Consultant of the Bureau on plans for the celebration.

The Bureau has, in turn, made available to the Union needed space at the headquarters office for the Division of Conservation, the Division of Music, and the Inter-American Commission of Women. While this is resulting in somewhat crowded office space, it has been possible to adjust to the needs, inasmuch as the Union has been paying a large part of the rent of the present headquarters of the Bureau. It is anticipated that the new building of the Union will be ready for occupancy within twelve months, at which time the congestion will be somewhat relieved.

Cooperation between the Library of the Union and that of the Bureau is helpful when subjects not catalogued in the Bureau's specialized material are needed for quick reference.

Relations with other Organizations

Fourth International Congresses on Tropical Medicine and Malaria

The Pan American Sanitary Bureau actively collaborated with the Fourth International Congresses on Tropical Medicine and Malaria from May 10 to 18, 1948, during the time of the Executive Committee meeting in Washington.

An exhibit of work by the Bureau was prepared and shown at the Congresses. The Director was Chairman of the Exercises Commemorating the Establishment by Walter Reed of the Mosquito Transmission of Yellow Fever. Papers on scientific subjects were presented by the following members of the Bureau: Dr. Miguel E. Bustamante, Dr. Atilio Macchiavello, and Dr. Fred L. Soper. The Director also acted as Chairman of the Entertainment Committee of the Congresses.

Of active interest to the Bureau was the adoption by the Congresses of a resolution calling on the Bureau to act as a center of information and coordination between the institutions and investigators interested in the study of Chagas disease and leishmaniasis to bring about a methodical joint investigation program in the Western Hemisphere.

Nutrition Conference for Latin America

This Conference was held under the auspices of the Food and Agriculture Organization in Montevideo in July 1948 and the Bureau furnished technical help by lending the services of Dr. Oscar Vargas who acted as simultaneous interpreter.

Economic Commission for Latin America

Dr. Atilio Macchiavello, representing both the World Health Organization and the Pan American Sanitary Bureau, attended the first meeting of the Economic Commission for Latin America at Santiago, Chile, in June.

The Commission passed a resolution asking the World Health Organization and the Pan American Sanitary Bureau to submit a concrete program of cooperation with the Economic Commission on problems which might justify such coordinated action.

International Union against Venereal Disease

Dr. Jaime Velarde Thomé represented the Pan American Sanitary Bureau at the 1948 General Assembly of the International Union against Veneral Disease, (25th Anniversary Celebration) in Copenhagen, September 1948.

Headquarters

The classification of the headquarters personnel made with the aid of the Personnel Officer of the Pan American Union was used as the basis for salary adjustments beginning May 1, 1948.

Early in June the headquarters staff went on a forty-hour week instead of a thirty-five-hour week as previously.

It is a regret to the staff to lose the services of Donald L. Snow, Sanitary Engineer loaned to the Bureau by the U. S. Public Health Service. He has worked with the Bureau since 1943, and has been responsible, with assistance from the Institute of Inter-American Affairs, in the success of the Inter-American Association of Sanitary Engineering. His place is being taken by Ralph J. Van Derwerker, also loaned to the Bureau by the U. S. Public Health Service.

Mr. Leo J. Van Herpe, Fiscal Officer, resigned from the Bureau in early June. His place has been taken by Mr. Charles G. Muradian. Mr. Joseph S. Piazza, who has been with the Bureau since January, is the Executive Officer.

Mr. Leslie Atkins, previously associated with UNRRA, was appointed Procurement Officer in July.

In the field

Due to the retirement of Dr. John D. Long, Dr. Anthony Donovan, loaned to the Bureau by the U. S. Public Health Service, has taken over the work in Peru. Dr. Donovan was first appointed to the Bureau as Travelling Representative in November 1942. He was recalled to the Public Health Service in June 1947, and loaned again to the Bureau in August 1948. Dr. Donovan is thoroughly familiar with the problems of public health on the west coast of South America.

Mr. F. Carlyle Roberts, Sanitary Engineer of the U. S. Public Health Service, was assigned to the Bureau on Sept. 1 and will work in Bahia, Brazil, on water supplies.

Miss Genevieve W. Stout, Serologist from the U. S. Public Health Service, has been given leave by the Service to work with the Bureau to head up a training center in the serology work of the Venereal Disease Project in Guatemala.

Dr. Charles G. Dobrovolny of the U. S. Public Health Service was loaned to the Bureau in May to work on the Malaria Project in Guatemala.

Purchasing Division

A Purchasing Division to aid Member Republics in procuring needed medical, hospital and laboratory supplies and equipment was established on July 1, 1948. The new service should greatly expedite the solution of the supply problems of the Member Governments.

Projects sponsored by the Pan American Sanitary Bureau being carried out in Guatemala which are supported by grants-in-aid from the National Institute of Health

1. Onchocerciasis Investigations

Since May when the report on the work being carried on was made, Dr. Bertha Riveroll Noble of Tulane University has been making a study of eye conditions before, during and after treatment with Bayer's 205 and Hetrazan. The study will not be completed before October, when patients who have been treated will again be examined.

2. Venereal Disease Project

The program for continuing the work has been approved and Miss G. W. Stout, a serologist, has recently gone to the Laboratory to head up a training center for doctors, serologists and technicians from Guatemala and other Central American Republics and Panama in standard techniques. The Laboratory will also aid in the standardization of techniques of other laboratories.

Nutrition Institute of Central America and Panama

Dr. Nevin S. Scrimshaw of the University of Rochester has been appointed as Director of the Nutrition Institute. Dr. Scrimshaw will join the staff in June 1949, but in the meantime will act as consultant to the project.

The fellowship program in nutrition instituted in preparation of workers for the Institute of Central America and Panama is proceeding satisfactorily. Three biochemists are at the Massachusetts Institute of Technology, and three agronomists are continuing in Mexico for further study under the training of Dr. Harrar of the Rockefeller Foundation. Three clinical nutritionists are beginning their professional training at Harvard University this fall. One educator in nutrition from Guatemala is already working at the University of Rochester under Dr. Scrimshaw.

Public Health Corps

The action taken by the Executive Committee in May 1948, suggesting studies leading to the formation of a Pan American Public Health Corps, brings into focus the variation which exists between the preparation of health workers in various countries of the Western Hemisphere. The attempt to provide standards for the training of public health workers with international certification of individuals meeting those standards can be attempted only after there exists a thorough knowledge of the basic and professional preparation available throughout the hemisphere. Information is not now available on the organization and teaching facilities on which to take action.

It is also important in considering the organization of a Division of Medical Care in the Bureau that information be available regarding opportunities for the training of physicians and nurses throughout the Americas.

The Director of the Bureau believes that an objective study should be made of institutions which train physicians, public health workers and nurses. Such a study could best be made by a very small international commission which would work under instructions to collect objective factual material which could be presented without the necessity of the expression of personal opinions. This study might well include special sections on facilities for the treatment of special problems, such as tuberculosis, venereal disease and leprosy.