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Topic 24: TREPONEMATOSES

(Topic Proposed by the Government of Chile)

GENERAL BASES FOR THE ESTABLISHMENT OF AN EPIDEMIOLOGICAL CAMPAIGN

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Public health and preventive medicine are two activities having a single aim, although their methods differ. The first of these is a function of the State, carried out through its health experts; it is concerned with environment. The second is a strictly medical function and is applied to the individual directly before conception, during interuterine existence, and from the moment of birth to the last years of life. By taking advantage of the advances in the many phases of science, both these activities have succeeded in prolonging man's life and making possible a better balance between his inner world and the world that surrounds him.

The treponematoses are diseases that have no transmittor other than man. The campaign against the propagation of such diseases, therefore, narrows down to a single sphere of action: man. The bases on which any campaign against treponematoses should rest are: treatment of the patient; search

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for the source of contagion and for contacts, and their treatment; and, in general, education and the raising of standards of living.

The following treponematoses exist in the Americas: syphilis, frambesia and yaws. These can be classified as venereal and nonvenereal diseases.

A - Venereal Treponematoses - The venereal treponematosis par excellence is syphilis (<u>Treponema pallidum</u>), which is found in all regions of the Americas. It is primarily an urban disease and continues to be a problem in the large centers of population, although morbidity due to this disease is generally higher in the ports than in cities in the interior. Under special conditions, such as large-scale population migrations, rural areas may be invaded by this scourge and become human reservoirs of reinfection for the centers of population.

In his primary or secondary stage, the syphilitic is a menace to mankind and becomes an extremely serious epidemiological problem. In the advanced stages of the disease he
suffers personal consequences, ceases to be an epidemiological
danger, and is a case for the clinic. For these reasons, preventive medicine— in the widest sense of the word —should
channel all its efforts toward the rapid sterilization and cure
of the disease in the first group of such patients.

B - Nonvenereal Treponematoses - Yaws (<u>T. pertenue</u>) and Cuban pinta or carate (<u>T. carateum</u>) are rarely transmitted through sexual relations. They are rural-type diseases and occur only in the regions located between the two tropical circles. Millions of individuals living in intertropical regions suffer from one or the other of these diseases. Their lower output in every phase of activity, or their inability to work; seriously affects the economies of the countries most severely attacked by these diseases.

RECOMMENDATIONS

These treponematoses can be cured with penicillin. The sterilizing action of this drug on the various disease-producing treponemas is very rapid. Up to the present no adaptation of these pathogenic agents to the drug has been shown. The facts mentioned indicate that every campaign pursuing epidemiological goals must be carried out using penicillin as a basis. In the territories that have followed this policy, the results have been highly satisfactory.

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- 1) Uniformity of criteria for the treatment of the various treponematoses, on the basis of the smallest number of injections in the shortest possible time.
- 2) Exclusive use of P.A.M., a drug giving maximum results at a minimum cost.
- 3) In primary or secondary syphilis in adults, apply 2.4 to 4.8 mega U.; in endemic treponematoses, 1.2 mega U. of P.A.M.
- 4) Treatment of contacts as if they were contagious cases.