

8-5-2004

## Progress on Tropical Disease in Panama

LADB Staff

Follow this and additional works at: <https://digitalrepository.unm.edu/noticen>

---

### Recommended Citation

LADB Staff. "Progress on Tropical Disease in Panama." (2004). <https://digitalrepository.unm.edu/noticen/9221>

This Article is brought to you for free and open access by the Latin America Digital Beat (LADB) at UNM Digital Repository. It has been accepted for inclusion in NotiCen by an authorized administrator of UNM Digital Repository. For more information, please contact [amywinter@unm.edu](mailto:amywinter@unm.edu).

## Progress on Tropical Disease in Panama

by LADB Staff

Category/Department: Panama

Published: 2004-08-05

Panama has seen some recent advances in confronting tropical disease, even as malaria flares out of control in spots. The advances are mostly in research and dependent on international cooperation, but they also result from public-awareness campaigning and active public participation.

In June, the governments of Panama and the US signed a broad technical- and scientific-cooperation agreement between the Gorgas Memorial Institute and the Walter Reed Army Institute of Research. The agreement was a highlight of the IV Congreso Científico Cien Anos por el Desarrollo de la Salud en Panama (100 Years for the Development of Health in Panama). The agreement will enable further work on determination of malarial resistance and of the serotypes of HIV now circulating in Panama, and comparison of these with those in the rest of Central America and the Caribbean. The US\$50,000 project will begin in late 2004 and last about three years. Panama, with 5,000 cases of AIDS, is the second-most-affected country in Central America, after Honduras (see NotiCen, 2003-05-01).

The Congreso Científico ran concurrently with the Primer Congreso Internacional de Salud Corporativa de la Autoridad del Canal de Panama. Both events commemorated the hundredth anniversary of the arrival in the country of William Crawford Gorgas, MD, who worked to eradicate yellow fever, the major threat to the building of the Panama Canal. HIV has attracted the keen interest of researchers because Panama is a transit hub and, as such, goes a theory, will exhibit a number of strains of the virus that can be traced to their origin, and which might correlate with a location within Panama. Locations of interest include the Caribbean province of Colon, Panama City, and the western regions of Chiriqui. Malaria targets indigenous Chiriqui is one of the few places in Panama where the incidence of malaria has exploded.

Director of epidemiology of the Ministry of Health Itza de Mosca said the disease is under control in most of the country, but, among some indigenous populations there and in Kuna Yala and Chepo, epidemic outbreaks are being reported. The Smithsonian Tropical Research Institute (STRI) is another US institution looking at these phenomena. STRI has been focusing on AIDS, tropical diseases, and cancer, particularly from the point of view of biodiversity.

Biologist Todd Capson, coordinator of the International Cooperative Biodiversity Groups (ICBG), which works in cooperation with the Secretaria Nacional de Ciencia, Tecnología, y Innovación, (SENACYT), spoke of joint accomplishments that included a novel bioassay technique for discovering substances useful in the treatment of a number of diseases. Panamanian scientist Eduardo Ortega-Barria called discoveries made in connection with the new technique "a revolution" that could lead to the development of new treatment for malaria, leishmaniasis, chagas, dengue, and cancer. STRI was created in 1910 and now manages eight research facilities, on land and at sea, in Panama. It also operates an ecological reserve in Barro Colorado, an island in the Lago Gatun on the Panama Canal route.

Still, tropical disease, malaria in particular, that once might have deprived Panama of its reason for being, the canal, remains a problem for Panama. In the small town of El Progreso, in central Panama, authorities have their hands full with an increase of known cases from 20 to 70, since the seasonal arrival of rains. With the recent rains and faulty drainage that allows the mosquito vector to proliferate, there is an instant ballooning of cases. Officials have also seen new cases of dengue, one of which appears to be hemorrhagic. These periodic outbreaks occur despite programs to control larvae and fumigation.

Public Health official Mario Macia said, "The situation is delicate. Malaria and dengue have shot up, but also diarrhea and acute respiratory infections that attack the population, especially the children." Public support In this community, the response to an outbreak is collaborative. "We alert the population and invite them to cooperate in the work undertaken by Public Health. The objective is to eradicate the breeding places of mosquitoes, avoid stagnant waters, and keep the vacant sites where the insects live clean," explained Macia. His office has also educated the population about the risks of these diseases and about the importance of participating in campaigns like this one. In the effort to extend the campaign to every nook and cranny of the area under his jurisdiction, Macia enlists both private businesses and local officials.

The message also goes out to areas that have not experienced outbreaks, for preventive purposes. The chief of a health center in an unaffected area has nevertheless mobilized resources. "Thank God at this moment neither cases of dengue nor malaria have shown up in Santa Rita, but we can't stay with arms folded. We have already activated the health committees in the barrios to prevent the presence of the mosquito that transmits the illness," said Ivis Saucedo. "During all this time we have been working to raise awareness in the population about the presence of the insect in the zone, but it is necessary for them to be familiar with it to avoid being stung and running the risk of death."

By contrast, in the neighboring barrio of San Miguel, local leader Pablo Ordonez said that part of the responsibility for the incidence of malaria there belongs to the municipality, which failed to understand the problem and neither cleaned up nor promoted the cleaning of vacant lots. "We have repeatedly asked police judge Justo Rufino Pinto to watch the barrios and apply the law against the owners of lots, but, to date, they've not done anything." Veraguas has been a malaria hotspot too. The province has recorded 294 cases so far this year and had 420 for all of last year.

Humberto Guerrero of the Departamento de Control de Vectores said the Health Ministry is stepping up vigilance because new cases continue to appear despite what he described as strict controls in endemic areas. Part of the problem, he said, is that people with new symptoms are not going to health clinics or getting treatment. Indigenous people are the most affected, especially in the communities of Calovebora and Rio Luis. In these communities, health personnel go house to house, asking about people with fevers or chills and providing medications, including preventive medicines.

Santiago Gonzalez, director of the Health Ministry in Veraguas, said that, for the province as a whole, malaria is under control, and he expects that, with continued vigilance in the endemic areas, cases will diminish or at least not surpass last year's numbers.

Another epidemiological issue plaguing Panamanian neighborhoods is hanta virus. The Health Ministry has recorded 21 cases of the deadly disease in the past seven months, a 420% increase over the entire year of 2003. Chief of the Departamento de Vigilancia Epidemiologica Irma de Mota said 16 cases have been identified in the province of Los Santos, three in Veraguas, and two in Cocle, contiguous areas of central Panama. Mota said that, even with the large increase in hanta, there is a bright side. The clinical picture of the individual cases is less serious than in the past, and the system is better prepared to deal with the disease. "Since 1999, when the first case of hanta virus was diagnosed in Panama, we have had 55 cases with nine deaths, giving us a death rate of 17.3%, which may be the lowest in the world. In the United States and Argentina, for example, the rate reaches 40%," she beamed.

The epidemiologist attributed the increase in cases to the rains and to migrations of indigenous people, who are among the most affected populations. The average monthly rate of infection, between three and five cases, is comparable to the rate experienced in 1999-2000, when the rains were as heavy as they are this season. For the other diseases under discussion, the country has had 2,455 cases of malaria, an increase of 125 over the period for 2003, with the greatest concentration in Boca del Toro, on the Costa Rican border. Dengue has sickened 45 so far this year, 86 fewer than the 131 reported for the period in 2003.

-- End --