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Panama's Caja de Seguro Social Hospital Hit by Superbug

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Panamanian health authorities announced in late July that 16 people had died in recent months from an antibiotic-resistant bacteria in Panama City's main social security (Caja de Seguro Social, CSS) hospital. While nosocomial infections are a growing concern for health authorities around the globe, Panama's handling of the incident has been subject to a lot of criticism, especially since authorities kept the situation a secret for months and because of subsequent revelations of the hospital's conditions.

Panama's health authorities first suspected the presence of a new infectious agent in the Complejo Hospitalario Arnulfo Arias Madrid last August, a Ministerio de Salud (MINSA) authority told TVN-2 television on Aug. 7. By December, testing confirmed the presence of an antibiotic-resistant type of in the hospital, said MINSA.

Authorities said the 16 deaths occurred between May and June, but news reports have questioned the total. Some 50 people have been infected.

There are a lot of gaps in the timeline. But events suggest authorities knew they had trouble brewing and failed to avoid an outbreak with a go-it-alone attitude. After the deaths were reported and authorities declared the situation under control, President Ricardo Martinelli announced, via Twitter, that personnel from the US government's Centers for Disease Control (CDC) were en route to Panama to help with the situation. It is unclear if any external help was sought prior to the deaths.

**Economic growth does not solve all problems**

While the incident underscores growing global concern regarding antibiotic-resistant superbugs, it also highlights Panama's predicament: While it is one of Latin America’s models for economic growth, its basic public institutions have yet to show much improvement. From the courtroom to the classroom, the state struggles, and the CSS incident has exposed the frailties of the stressed public health care system.

The case will also put to task Panama’s justice system, which has launched an investigation, as well as the Defensoría del Pueblo, Panama’s quasi-independent human rights watchdog, which is also investigating.

CSS director Guillermo Sáez-Llorens and health authorities have repeatedly said that they followed correct protocol regarding getting the superbug out of the hospital. Reports suggest the intensive-care unit was the main area for transmission and the pre-existing medical conditions of the patients were a factor in their deaths. But even as authorities insisted that the necessary controls were in place, the hospital's basic hygiene problems were questioned.

The Frente Nacional por la Defensa de los Derechos Económicos y Sociales (Frenadeso), a left-leaning political movement, obtained what appeared to be a copy of minutes of a CSS doctors and administrators meeting in June as the crisis intensified. The interventions ranged from complaints
about lack of medicine to some especially disturbing observations on the hygiene and the rundown state of the intensive-care unit.

"We have operating rooms that have dripping water from an unknown source," Domingo Moreno, a gynecologist, said at the meeting, according to the faxed document Frenadeso posted on the Internet. "The obstetrics rooms are invaded with bugs, we don't know where they came from but apparently from cats, rats, etc."

Moreno complained about obsolete equipment that posed "potentially lethal problems for patients" and called the intensive-care units chaotic and a dangerous place to work, and he expressed frustration regarding the lethal superbug.

"We have a chaotic situation in the intensives, we know there is a bacteria that is resistant to multiple antibiotics that has taken many people to the grave," he said. "Those of us who work in the hospital cannot keep a complicit silence in light of all these situations that are happening."

Mention of cats quickly converted into an urban legend of a cleaning worker releasing cats into the ventilation ducts to catch the rats. The fleas, the rumors went, were in the ducts.

"They weren't cats, they were fleas," Sáez-Llorens told a local TV station, reported. "And that had nothing to do with the bacteria."

Death toll climbs

Sáez-Llorens has quickly become the focal point of criticism. quoted CSS doctors as claiming that the death toll was higher than 16—but no numbers were given—and they complained that Sáez-Llorens sent out a memo in June prohibiting staff from mentioning the problems at the CSS hospital or from speaking to the media. On Aug. 9, CSS authorities revised the death toll upward to 21.

Authorities have said that they kept the information quiet so as to not compromise patient confidentiality. countered by quoting Panamanian law that says public health threats need to be known to the public. The World Health Organization (WHO) provides some guidelines on the communication of outbreaks of hospital-acquired infections but does not fully explain when telling the public is appropriate.

The Defensoría del Pueblo, which had already pressed local authorities to deal with hygiene issues and a shortage of specialists and medicine in hospitals in the country's interior, said it would investigate.

"We want them to give us an explanation of what is happening in the CSS," Patria Portugal, the rights organization chief, said in a statement. "Here there was a possibly violation of the human right to health...and the authorities must take the necessary measures to avoid new cases or deaths from this bacteria."

The fallout continues to be a problem. The press has reported that people are shunning the CSS hospital. Authorities plan to transfer a number of patients to another public hospital while hygiene issues are addressed.

Perhaps cartoons published in newspaper by an editorial cartoonist depicted the situation best. Recent cartoons depict an ambulance rushing into the hospital with a hearse rushing out; another depicts Sáez-Llorens being rushed in on a stretcher pleading to be taken to a public hospital instead.
Another depicts an "international-team" member in a biohazard suit arriving at the hospital to meet the modestly dressed mop- and bucket-toting specialized cleaning team from the hospital.

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