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Update On Cholera Epidemic, April 10 - 25

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April 10: According to Jorge Hernandez, Federation of Fish Vendors secretary general, nearly 1 million Peruvian fishermen and vendors have lost their jobs since authorities identified fish and seafood as the main sources of the cholera epidemic. Due to the strike by public sector health care employees, Peru's public hospitals and clinics were providing emergency services only. As of April 10, hundreds of cholera victims were being treated at home. April 11: Colombian Health Minister Camilo Gonzalez confirmed 19 new cases of cholera in Tumaco and Salahonda, Narino department. As of April 11, 67 persons in Colombia had been infected by cholera. According to the Ecuadoran Medical Federation, of 5,000 reported cholera cases, 90 persons have died. Health Minister Plutarco Naranjo told reporters the government is considering the possibility of declaring a state of emergency, which would enable authorities to bring private clinics into the anti-cholera campaign. The Guayas Province Health Department reported that in the city of Guayaquil alone, 830 people had been hospitalized. April 12: Brazilian Health Minister Alceni Guerra told daily newspaper Jornal do Brasil that the Solimoes river was contaminated by feces from a Peruvian cholera patient treated at hospital in the Colombian city of Leticia. Water supplies for 26 Brazilian municipalities derive from the Solimoes. Guerra said 60,000 inhabitants of the area are at risk. According to health ministry statistics, Brazil is prepared to treat 1 million cholera patients. Peruvian Prime Minister Carlos Torres announced that Bolivia and Ecuador have agreed to lift import restrictions on Peruvian products. The governments of Bolivia, Chile and Brazil have imposed extraordinary quality control measures on Peruvian imports. The Peruvian Health Ministry reported that 142,000 Peruvians had been infected by cholera, of which 52,000 were hospitalized. Fatalities number 987. April 13: Over the past week, the cholera epidemic in Ecuador spread from the coast to several Andean departments. The local media reported a death toll of 50, and at least 1,500 persons infected. Government sources assert that the death toll has not surpassed 20, 480 cases of infection have been confirmed, and 1,500 suspected cases have yet to be confirmed. Dr. Ricardo Rocha, director of the hospital in Atalaia do Norte, a Brazilian city near the Peruvian border, reported that Brazilians who live in the border area have already contracted cholera, but have yet to present symptoms. April 15: Colombian health officials announced a $1.75 million nationwide cholera prevention program. Unless rigorous preventive measures are adopted, said officials, 87,000 Colombians may be infected by the disease. April 16: Citing predictions by the Brazilian Health Ministry and the Panamerican Health Organization, the Jornal do Brasil reported that 3 million Brazilians may be infected by cholera by year-end. The estimate is equivalent to 2% of the nation's population of over 155.5 million. The Peruvian Health Ministry reported that nearly 148,000 had been infected by cholera. The death toll as of April 16 was 1,088. About 20 people per day are dying from the disease. In Chile, the first confirmed case of cholera was reported near Santiago. The Health Ministry has prohibited the sale of raw fish in restaurants. In Peru, public health sector physicians asserted that while the government religiously makes payments on the $22 billion foreign debt, it has been negligent in bringing the cholera epidemic under control. Of the $60 million officials claim the government has made available to cope with the epidemic, only $4 million have actually been disbursed. Foreign donations, said the physicians, constitute practically the only source of financing for the anti-cholera effort. Efren Arauz, director of Luis Vernaza hospital,
the largest in Guayaquil, Ecuador, said the Ecuadoran Medical Federation's statistics on cholera infection and fatalities are erroneous. He acknowledged that the disease is spreading in Ecuador. Hospital admissions of suspected cholera victims increased from 18 to 45 per day over the previous weekend. Ecuadoran deputy health minister Enrique Granizo reported a cholera death toll of 59, 682 confirmed cases, and 2,488 suspected cases. Venezuelan Health and Social Welfare Minister Pedro Paez reported that no cases of cholera have been confirmed in Venezuela. The Colombian Health Ministry reported 29 new cholera cases, raising the total to 113. April 17: Three people have been hospitalized in the Brazilian city of Tabatinga with cholera symptoms. Tabatinga is located near the Peruvian and Colombian borders. April 18: Dr. Horacio Lores, an epidemiologist with the Panamerican Health Organization, said cholera will probably kill at least 1,600 Peruvians and infect about 280,000 before the epidemic is under control. April 19: The Colombian Health Ministry reported 15 new cholera cases, raising the total to 149. In Tumaco, Narino department, the nation's first two fatalities from the disease were reported. In Lima, Panamerican Health Organization (PAHO) director Carlyle Guerra said the cholera epidemic will inevitably spread throughout Latin America. April 20: The Chilean Health Ministry reported 12 confirmed cases of cholera. Two of the victims reside in Antofagasta, 1,368 km. north of Santiago, and the remainder in the capital. The government ordered the destruction of all crops irrigated with water contaminated by human feces, in order to halt the spread of the disease in Santiago. In Lima, PAHO director Carlyle Guerra said the cholera epidemic may eventually infect 6 million Latin Americans, and kill 42,000. April 21: The department of engineering at the Universidad de Chile reported that the cholera virus had been found in waste water samples from the northern cities of Arica and Iquique. The Peruvian Health Ministry reported a death toll of 1,147, and 160,000 persons infected by cholera. April 23: The Chilean Health Ministry reported 22 confirmed cholera cases. The first fatality, an 83-year-old woman, occurred on the same day. The ministry statement indicated that most cholera victims were infected as a result of eating vegetables which had been in contact with contaminated water. The Peruvian government announced a $120 million program to install and upgrade sanitation facilities throughout the country. The UN Disaster Relief Organization (UNDRO) reported that the largest number of infected persons has been reported in Lima and the nearby port city of Callao. The highest fatality rate was reported in Cajamarca department. As of April 21, an estimated 326 residents of Cajamarca had died of cholera. April 24: Ecuadoran Health Minister Plutarco Naranjo reported 3,051 confirmed cases of cholera, and a death toll of 100. April 25: WHO director general Dr. Hiroshi Nakajima said the cholera epidemic may infect 120 million Latin Americans. Halting the spread of the disease and preventing its reoccurrence, he added, could cost up to $50 billion in installation and upgrading of water treatment systems. The Brazilian Health Ministry reported the first confirmed case of cholera among the 20,000 members of the indigenous Tikuna tribe. The Tikuna reside near the Colombian border. [Basic data from AFP, 04/10/91, 04/13/91, 04/14/91, 04/16/91, 04/18-24/91; AP, 04/12/91, 04/16/91, 04/18-22/91, 04/25/91; Deutsche Press Agentur, 04/16/91, 04/17/91, 04/23/91; EFE, 04/11-13/91, 04/15/91, 04/16/91, 04/20-23/91; Folha de Sao Paulo (Brazil), 04/15/91; Inter Press Service, 04/11/91, 04/20/91; Notimex, Prensa Latina (Cuba), Xinhua, Jornal do Brasil, 04/16/91]