

South-East Asian leaders unite to combat SARS

On 29 April, the heads of member states of the Association of South-East Asian Nations Plus Three, meeting in Bangkok, Thailand, endorsed a set of procedures to combat SARS jointly. The procedures specify standardized screening for all travellers, isolation and treatment for identified SARS cases, and sharing of accurate and timely information.

Represented at the meeting were Brunei Darussalam, Cambodia, China (including Hong Kong Special Administrative Region), Indonesia, Lao People's Democratic Republic, Malaysia, Myanmar, the Philippines, Singapore, Thailand and Viet Nam.

WHO's Director-General, Gro Harlem Brundtland, stressed the importance of sustained international cooperation in the fight against SARS. "It is now we have a chance to contain it, and we must use the public health tools that we have at our disposal," she said in a recent interview.

At the Bangkok meeting, David Heymann, WHO's Executive Director for Communicable Diseases told the heads of state that there were two simple strategies for containing and eventually stopping SARS: detecting all cases, and protecting those at risk of infection from those cases. "Meetings of this level and magnitude, to form a common strategy against a specific disease, show how serious countries are about becoming free of SARS," Heymann said. ■

Singapore tightens SARS containment measures

On 12 May WHO experts met by video link with Singapore's Minister of Health and other officials to assess progress in containing the SARS outbreak. The cumulative number of cases in Singapore on 12 May was 205, with 28 deaths. The last probable case was reported on 9 May.

Singapore has drastically raised infection control standards at Tan Tock Seng Hospital, which has been converted into the country's specialized hospital for managing SARS patients.

Strict airport screening measures have also been introduced for all out-bound passengers and incoming passengers from areas with recent local transmission of SARS.

Nineteen thermal infrared scanners are in place at the airport, on loan from the army. They can detect a fever within a 0.2 °C degree of accuracy. Last week (5–11 May), 70 000 passengers were screened, and 58 were found to have fever and taken to Tan Tock Seng Hospital. Two of them were then admitted as suspect cases, but neither has been reclassified as probable. The hope is that the spread of SARS has peaked in Singapore as in most of the countries affected.

At the time of writing, 12 May, Singapore is one of the five countries or areas in the world with over 100 cases of SARS. The others are China, with 5013 cases and 252 deaths, Hong Kong Special Administrative Region with 1683 cases and 218 deaths, Taiwan Province with 184 cases and 20 deaths, and Canada with 143 cases and 22 deaths. The total for all 33 countries and areas currently affected is 7447 cases and 552 deaths. ■

Malaria kills 3000 children a day in Africa

Three thousand children die of malaria every day in Africa, according to the *Africa malaria report*, published on 25 April. Released jointly by WHO and the United Nations Children's Fund (UNICEF), the report highlights the urgent need to make effective antimalarials available to those most at risk. The drugs needed exist but those who need them most urgently do not have access to them, the report says, and only a small proportion have bednets treated with effective insecticides. "Malaria continues to tighten its grip on Africa," said WHO's Director-General, Dr Gro Harlem Brundtland. "But by scaling-up our efforts we can reverse this trend."

The report challenges the international community to halve the global burden of malaria by 2010 by investing in malaria control programmes, putting malaria higher on the health agenda, increasing business involvement in

supplying antimalarials and treated bednets, and ensuring the availability of the new generation of highly effective combination drug treatments to populations at risk.

The proper use of insecticide-treated nets combined with prompt treatment of malaria in the community can reduce malaria transmission by 60% and the mortality rate in young children from all causes by at least 20%. "We have the knowledge and the potential to achieve our target," said Carol Bellamy, Executive Director of UNICEF, "but we need much greater investment and political commitment."

For a hard copy of the report contact the CDS Information Resource Centre, email cdsdoc@who.int. It is also available from: http://mosquito.who.int/amd2003/amr2003/amr_toc.htm. ■

US\$ 20 million a month will restore the Iraqi health system

WHO estimates that US\$ 20 million a month is all that is needed to "jump start" hospitals and health centres across Iraq and prevent the damage done by recent events from getting worse. Initially this means putting the simplest basics in place, such as making sure the floors are cleaned, the patients are fed, waste is removed, staff get a daily allowance until a salary system is restored, essential maintenance work is done, and essential medicines are available. For each hospital, this means only a few thousand additional dollars a month.

Following the collapse of the government, looters targeted the hospitals, stealing vital equipment and supplies, and damaging facilities.

On 1 May, the WHO Representative in Iraq, Dr Ghulam Popal, was able to return to Baghdad, together with colleagues from other UN agencies. "I am so pleased to return to my team of dedicated national WHO staff, who have worked extremely hard in the worst imaginable circumstances," he said. "As soon as it was safe, and often when it wasn't, our Iraqi colleagues came back to work. I am proud to be able to join them once again." ■