Malaria epidemic expected in Mozambique

Pat Sidley Johannesburg

Health experts fear epidemics of several infectious deseases in Mozambique as the flood waters recede and mosquitoes begin breeding.

According to Pierre Kahozi of the Maputo office of the World Health Organization, malaria is endemic in the region but there are fears that a much greater outbreak might occur in around a month. It is too early to tell if the situation has already worsened markedly, he said.

Scores of suspected cases of cholera have been reported and more are expected, along with cases of other diarrhoeal conditions. The Mozambican government has reported a "high degree" of cholera and malaria in camps. Cholera is endemic in Maputo and Beira, but numbers of cases are expected to increase in the wake of the floods.

Dr Kahozi said that agencies were unable to get adequate statistics on diseases because tens of thousands of people were being airlifted to safety, and operations to get food, drugs, and other provisions to refugees had only begun this week. Because of the lack of clean water, soap, clothing, and sleeping mats, skin diseases like scabies have been reported, along with bacterial conjunctivitis in children.

Among the other problems likely to be encountered by health authorities are the dangers from land mines. After Mozambique's two wars, an estimated one million land mines were left unexploded in the ground. These have been shifting because of the floods and may be unstable. The International Committee of the Red Cross has been asked to help.

An influx of more than 100 000 Mozambican refugees is expected in South Africa. The Northern Province of South Africa, which has a common border with Mozambique and which itself has been battered by the floods, is making provision for accepting refugees.

Neil Cameron, chief director of communicable diseases at the health department in South Africa, says that more cases of malaria are expected within a month when the breeding cycle of mosquitoes is renewed. He said the floods had wiped out breeding grounds and that this had contributed to a lull in the disease.

Before the floods, South Africa had seen an explosion in malaria. The Department of Health in KwaZulu-Natal and the



A Mozambican child infected with malaria: more cases to come?

national health department had begun using dichlorodiphenyl-trichloroethane (DDT) for the first time since 1995 to control mosquitoes.

Dr Cameron said that the number of cases of malaria in South Africa had increased from 12 000 in 1995 to 50 000 in 1999. The increase could be attributed partly to climatic changes and resistance to certain drugs. Reporting methods have also become more accurate, so the number of cases might previously have been underreported, but there has been a real increase in the incidence of the disease, Dr Cameron said. Some 380 people died last year.

It is possible that DDT will be used again in Mozambique. Its use there was stopped several decades ago, because 80% of the country's health budget came from donor funds, and donors refused to allow the use of DDT. Mozambique's earlier attempts to tackle the mosquito problem were hampered by South Africa's aggressive policy to the country during the apartheid era, when troops were flown in to fight the Mozambique government and it carried out air raids to destabilise the regime.

The issues involved in tackling malaria are now being considered as part of a special development initiative on infectious diseases being undertaken jointly by the health departments of three countries: South Africa, Mozambique, and Swaziland.

Surgeon in kidney inquiry himself faces surgery suit

Roger Dobson Abergavenny

The Royal College of Surgeons has said it was unaware that a senior urologist it appointed to help investigate how the wrong, healthy kidney was removed from a patient in Wales was himself involved in a claim for civil damages in relation to a kidney operation in Scotland.

The college set up the two member team two months ago to carry out an investigation into the removal of the healthy kidney from a patient at the Prince Philip Hospital in Llanelli. The patient, 70 year old Graham Reeves, died last week, five weeks after the error and a short time before a report

on the incident was due to be published.

Consultant Fletcher Deane, one of the inquiry team and president of the British Association of Urological Surgeons, is involved in a claim by a patient for damages over a kidney transplant operation three years ago in Scotland.

A spokesman for the North Glasgow University Hospitals Trust, where Mr Deane works, said: "The surgical operation carried out in March 1997 on patient Mary McComish did not go to plan. The trust's management team was clear and in agreement that there was no

requirement to take disciplinary action against Mr Deane.

"Mrs McComish did, however, lodge a claim for damages, and a settlement has still to be agreed. The claim is against the trust and not personally against Mr Deane. The trust would like to stress that Mr Deane is a highly respected, extremely experienced surgeon with a renowned reputation."

A spokesman for the Royal College said: "The college was completely unaware at the time that legal action involving Mr Deane has been taken in relation to a kidney operation in 1997 and only learned of this after completion and submission of the report.

"The college deeply regrets that it was unaware of this legal action regarding Mr Deane. Had it been aware of this at the outset it would immediately have sought another consultant to conduct the inquiry."

The college said that it believes the inquiry was conducted thoroughly and that its findings and recommendations are valid.

The Carmarthenshire NHS Trust, which runs the Prince Philip Hospital, has also been carrying out an inquiry, but publication of both reports is being delayed because the death of Mr Reeve has been referred to the coroner.

The trust said, however, that the findings of both inquiries are similar. "As a result, the trust has decided to instigate formal disciplinary proceedings against two doctors in the operating team. Action is currently being considered against a further two doctors," said a spokesman.

The British Association of Urological Surgeons said that Mr Deane would not be making any comment.