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Rejecting DDT is like signing death warrants

Wednesday, 21st February, 2007

E-mail article Print article



Fiona Kobusingye

By Fiona Kobusingye

I refer to John Ken Lukyamuzi's article in The New Vision of February 15 titled, "Malaria genocide can be curbed without DDT." As a former Member of Parliament, and therefore an opinion leader, it is wrong for Lukyamuzi to hand out death certificates to more Ugandans by undermining a realistic weapon against malaria.

DDT can be effective in the case of indoor residual spraying. It is one "bed net" for the whole family, and it must be part of our arsenal for fighting the disease. Professor Amir Attaran from the University of Ottawa

points out that by combining DDT with Artemisinin-based medicines, South Africa managed to cut malaria cases by 89 percent in one year and reduced malaria deaths by 97 percent in four years.

However, for reasons only he can comprehend, Lukyamuzi detests DDT and demands new environmental studies, public hearings and, in extremes, a complete rejection of DDT. He talks constantly about supposed risks of using DDT, but never says a word about the horrible risks of not using it — the dangers that it would prevent.

Every day that he diverts our determination to use DDT, another 320 Ugandans go to their graves from preventable malaria. Every year, this disease costs Uganda millions of shillings in lost working days, productivity and economic output, because it makes millions of our people too sick to work, and forces millions of others to care for the sick instead of working or going to school.

Malaria causes brain damage, mental impairment, epilepsy and spasticity; forces children to repeat school terms; forces families to spend all their savings on malaria medicines and hospital care; and turns thousands of our children into orphans. It makes people anaemic and increases their risk of death from dysentery, lung disease and AIDS. It keeps tourists and investors away from Uganda.

Lukyamuzi contradicts science when he claims that DDT causes cancer, abnormal births, blindness, brain distress, genetic defects and impotence. These stories have no place in disease control policy because they have not been proven.

It is not true that spraying houses with DDT would be a new or pilot programme. The chemical was used during and after World War II to prevent malaria and typhus. It eradicated malaria in the United States, Europe and other countries. Millions of houses have been sprayed with DDT, saving millions of lives. No one ever got cancer or other diseases from any of these programmes, according to WHO and other scientists.

The WHO decision was made by an entire team of scientists and doctors who carefully reviewed all the evidence about risks and benefits in using the chemical. If Uganda and its neighbours take advantage of this decision, we can reduce the killer malaria in all our countries, and probably wipe it out eventually.

Indoor spraying does not harm the environment and therefore using DDT would not violate Uganda's international obligations based on environmental agreements she has signed. The Stockholm Convention specifically allows DDT for disease control. Uganda's watchdog for the environment, NEMA, has an obligation to protect Uganda's wildlife, nature, parents and children. It is in this regard that it okayed the use of residual spraying as a preventive measure against malaria.

The writer is the Coordinator of Core Uganda



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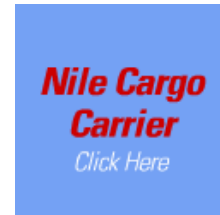
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