Consciousness Raising 101 — The Modern Plague of Malaria

Sunday, September 25, 2005

Except for occasional (and rational) scares about influenza and the fear of biological weapons, most Americans sleep soundly at night without the fear that they or their children will die of infectious disease. Not so in much of the world, particularly in Africa, where malaria alone kills between 1 million and 3 million each year. Apparently, these lives could be saved with about $2.00 worth of medicines.

The Los Angeles Times has produced a fascinating 6-part series on the disease and its impact. Consider these statements: When the sun goes down in Africa, death stalks the children. It seldom comes from jungle cats or venomous snakes, but often from bugs smaller than a toddler’s thumbnail. Every year, their deadly sting kills more people than at Hiroshima and Nagasaki, more than December’s tsunami in Asia, more than the combined Union and Confederate casualties in the Civil War. If a biblical plague slaughtered every man, woman and child in Philadelphia, it would not equal some estimates of the death toll from malaria in the last 12 months. Well, some might say, the world is full of tragedy. We can’t cure all disease or save all lost children. But these acres of graves are the needless legacy of a disease that we have known how to cure for a century. And each life might have been saved for about $2 — less than the price of a latte.

Public health authorities can only guess how many people die of malaria because most of the victims never make it to a clinic; the estimates range from 1 million to 3 million a year. Most of the dead are children under age 5, and 90% had the misfortune to be born in sub-Saharan Africa, a land trapped somewhere between the modern world and the Stone Age.

Read The Los Angeles Times’ important series, “The Sting of Death: Malaria.”

Dangerous Waters, September 12, 2005. Where there’s water, there are mosquitoes. And where there are mosquitoes, there is disease — even diseases we thought we had eliminated long ago.

An Effective, But Costly, Cure, August 15, 2005. When a child who was playing until yesterday, then got convulsions, and the next day is dead, it’s devastating. And when a child has cerebral damage, sometimes we don’t know how to tell the mothers this child will not be the same.

No Gains for Africa, August 7, 2005. The mosquitoes that carry the malaria parasite bite mostly at night, which makes sleeping under a treated net a strikingly simple way to prevent the disease. But getting the nets to the people who most need them is anything but simple. And the international aid community is roiled in debate over whether to sell or give away the nets. The feud obscures a tougher challenge: supplying a scattered population that lacks not just basic infrastructure but also basic knowledge about the fever that kills and sickens so many.

A Promise and Pitfalls, August 3, 2005. Bush’s malaria initiative is an inspirational commitment that — if implemented properly and fully funded by Congress — could save thousands of lives. Unfortunately, those are big “ifs.”

The Hope of Vaccine, June 30, 2005. There are a lot of weapons in the fight against malaria, all of which are either being misused or underfunded. Bed nets and insecticides go after the mosquitoes that spread the disease. A new generation of drugs targets the parasite after the victim is bitten and can even help stave off an infection. But you could blanket the continent with bed nets, blast whole villages with insecticide and deliver cheap drugs by the trainload without eradicating malaria in sub-Saharan Africa. Hot weather and unique breeds of malaria-carrying mosquitoes create a cycle of infection that is impossible to break. The only way to stamp out malaria in Africa is with an effective vaccine.

The Killer Bug, June 5, 2005. The malaria parasite is remarkably complex and adaptable. As soon as scientists discover a new drug to fight it, the parasite starts developing resistance. Ditto for the mosquitoes that carry it, which eventually build resistance to poison sprays.