

VETERINARY MEDICINE

Foot-and-Mouth Debate

Two sides of the problem of combating aftosa are being hotly argued by Mexicans who must decide between sanitary rifle and vaccination needle.

► MEXICAN OFFICIALS are wrestling with their consciences over whether to stop using total slaughter as a means of combating dreaded foot-and-mouth disease of cattle.

The weight of popular opinion in Mexico seems to be against using the "sanitary rifle" to kill all infected herds, and popular opinion soon becomes political pressure. But the scientists and agriculture experts know that any steps short of total eradication of infected animals will lead to the permanent establishment of foot-and-mouth, or aftosa, in Mexico.

Negotiations now underway between Mexican and U. S. officials of the bi-national Anti-Aftosa Commission are in a "delicate" state, the U. S. holding out for the sanitary rifle, while the Mexicans look longingly at the less awesome—but less effective—vaccination needle.

The latest outbreak of aftosa in Mexico began last May in the state of Vera Cruz, near the village of Gutierrez Zamora, after more than a year of freedom from the disease. Moving with great speed, the Anti-Aftosa Commission put to death about 500 head of cattle in the area by the sanitary rifle.

However, reaction to this drastic, though absolutely necessary, treatment followed quickly and feeling began to run high against slaughter. A prominent Mexico City newspaper carried banned headlines proclaiming that "new methods" for combating aftosa were to be adopted, while the sanitary rifle would be put away.

The hope of the "optimists" that foot-and-mouth disease can be eradicated in Mexico without slaughter is based on vaccines, such as are used in Europe and the Near East against this plague. But the difference between the Mexican and the Old World situation with aftosa is vast.

The disease in Europe and the Near East is widespread, permanent, endemic. Slaughter could not possibly wipe out the disease—unless all the split-hooved animals, domestic and wild, were destroyed, an unlikely solution. There, vaccination is about the only remedy that can be offered to cut down on livestock losses to aftosa.

Foot-and-mouth disease in Mexico, though, is a stranger, an unwanted alien. Because it is not permanently established and spread throughout the country, immediate and total slaughter of any infected herds discovered can mean that the disease will never become endemic there. And with effective quarantine at the nation's borders, the destructive disease can be forever kept out of Mexican herds.

The Mexicans have a tough decision to make. If they succumb to the temptation of putting up the sanitary rifle, they may win votes, gain popularity, perhaps save some money in the immediate future—although they will probably lose the United States as a market for their meat.

But if they follow the advice of scientists

who have weighed the facts, that anything less than slaughter is an invitation for the disease to become a perpetual and malignant drain on the Mexican economy, then the long-term interests of their people will be best served.

There is room for hope that the sanitary rifle will stay around for a long time. Many of the officials of the Mexican half of the Anti-Aftosa Joint Commission took part in the campaign against aftosa in the 1940's in Mexico, and have seen the good work of the sanitary rifle.

These men and officials in the Ministry of Agriculture and Livestock are competent scientists and trained agriculturists. Scientific fact will probably win over popular emotion.

Science News Letter, July 11, 1953

MEDICINE

Hospital Not a Hospital

► A HOSPITAL that is not a hospital has opened in Bethesda, Md.

It is a 14-story, red brick, \$60,000,000 structure with beds for 500 patients, but the patients will not be admitted just because they are sick people who need medical and surgical care.

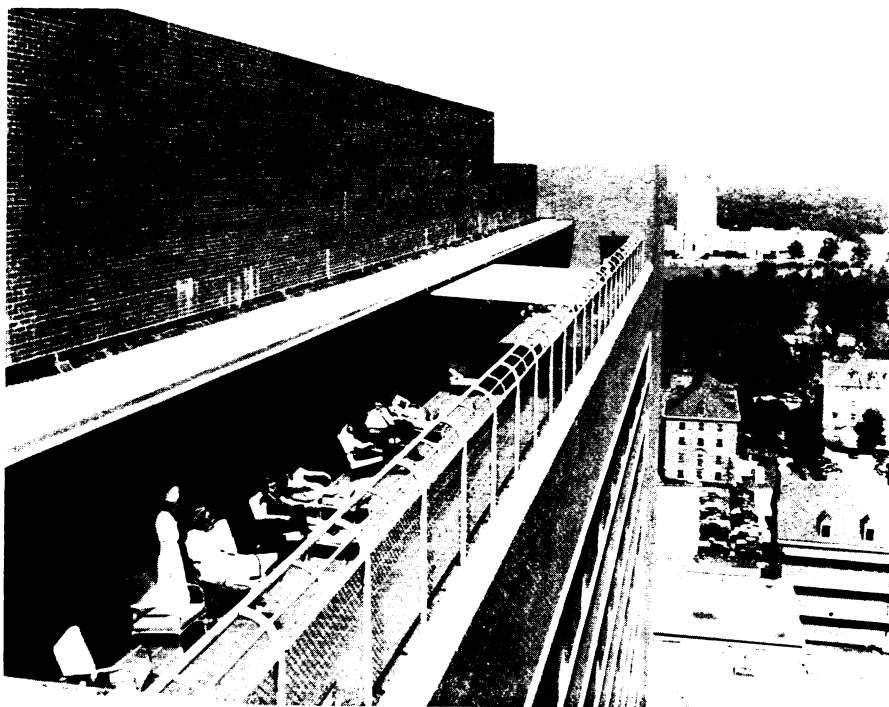
Their ticket of admission will be a precise diagnosis according to a standard established for a particular disease study.

The hospital is not even called a hospital.

Its name is The Clinical Center, and it is a "research resource" of the Public Health Service of the Department of Health, Education and Welfare.

Although there are beds for 500 patients, a dining room and solarium on every floor, and a theater, library and chapel, this hospital that is not a hospital has twice as much space for laboratories as for patient care.

The reason is that the Clinical Center is to be a research center for the study of the



SUNNING SPOT—The sun deck on the 14th floor of the new Clinical Center of the National Institutes of Health gives patients a view of neighboring buildings, including the Naval Medical Center across from the Institute.