

from abroad

FROM GENEVA

Cheaper Measles Vaccine Still Only a Promise

Measles vaccines, strikingly effective in an estimated 30 million children in the Western world, cannot yet eradicate this arch child-killer throughout the developing world.

The reasons, according to World Health Organization doctors, are two: most countries do not have the medical services to carry out campaigns, and the vaccines are still too expensive at 75 cents to one dollar a dose.

A case in point is Hong Kong, where measles has moved since 1951 from the sixth cause of death to second, behind tuberculosis. Since 1961 measles has been the most important cause of death in children under 5. "It is abundantly clear that new control measures by vaccination must be developed," says the Hong Kong Measles Vaccine Committee, composed of virologists, pediatricians and health officers. In addition to costs, the committee blames traditional Cantonese beliefs in herbal medicine and parental aversion to blood tests and other modern procedures.

So, attempting to discover a cheaper, efficient way to save the children, the committee, working with WHO, has conducted an experiment watched closely elsewhere.

Using two prime live attenuated vaccines, the doctors boldly cut the dose to one-fifth normal, administered either subcutaneously or intramuscularly. They aimed also to reduce the complications—mostly fever and rash—while achieving satisfactory immunity.

They report in the WHO BULLETIN that "none of the major objectives were realized," but headquarters doctors agreed with an independent observer that the results remain reasonably promising.

The effective rates for the Schwarz and Beckenham 31 vaccine strains given intramuscularly, were found entirely satisfactory in 96 percent of the cases. Even at the low dose, subcutaneously, they were, respectively, 74.7 percent and 86.5 percent, which is good but not yet good enough.

Health Gets Less Support

A strange, little publicized trend is disturbing doctors in the World Health Organization and the health ministries of many member countries.

Health is getting less and less of the United Nations Development Program's

aid funds for field projects. This is one of the alleged reasons why, in public health at least, the touted Development Decade thus far has flopped.

Of the total of \$110,650,995 approved by the UN for 1967-68, only \$15,939,338 or 14.4 percent goes for health projects. Senselessly, according to the medics, these figures are down from \$16,473,267 and 16.3 percent for the previous budget year—cuts both in actual and percentage slices, while the total resources grow.

Dr. Marcolino Gomez Candau, Brazilian Director-General of the UN medical agency, finds also that WHO has been designated directly as executing agency for only 16 of 657 projects, handling less than \$15 million of \$645 million, or 2.29 percent. Health projects include fighting infections, nursing, occupational health, and water and sewerage development.

Dr. Candau says some long-term projects have even been dropped from the UNDP and have had to be financed by WHO "so the investment would not be lost." Four such projects are in this year's WHO program.

David Alan Ehrlich

FROM JAPAN

White Paper on Brain Drain

The prospect of a brain drain menacing future Japanese scientific endeavors was among the problems cited in a white paper on science and technology recently released in Tokyo.

While noting that expenditures for science and technology in fiscal 1966 (ended last March) increased 13.4 percent over the previous year's expenditures, the paper also indicated that when viewed as a percentage of the gross national income, no progress had been made. As was true the year before, the equivalent of only 1.7 percent of the national income was invested in research, whereas the corresponding percentages for the United States and England were given as 4.3 and 2.9.

Of the grand total for combined government-sponsored and private firms (firms capitalized at more than \$277,788) research, \$1,600 million, the government's share was 35 percent, much less than the 65 percent cited for the United States Government, 60 percent for the British Government and 69 percent for the French Government. The white paper stressed that this gap must be diminished.

Unless spending for research is increased, the white paper predicted that a brain drain would appear in certain

specialized fields. To date, Japan has not suffered the loss of men that has worried European nations, but the combination of low pay (based on seniority, not accomplishment or ability), low research funds and limited facilities has encouraged a number of top scientists to move to America. The first returnee was Dr. Kunihiro Kodaira, Tokyo University mathematician, who spent 18 years at Princeton and Stanford. The press hailed his return, to a salary one-tenth that of his American pay. But many scientists tend to take up permanent residence in America, and there was also a scare recently when America's Boeing placed an ad in a Japanese aviation magazine, calling for 300 men. Japan's total force of aeronautical engineers is only about 2,000, of which 700 are younger than 40 and likely to be attracted by American salaries, facilities and other attractions.

Martin Cohen

FROM AUSTRALIA

Protection for Sheep, Cattle In the Face of Threat

All overseas visitors arriving from European and Asian countries for the memorial service to the late Prime Minister Harold E. Holt had to walk on a pad soaked with antiseptic when they left their planes.

Visitors treading the mats included Prince Charles, President Johnson and Prime Minister Wilson. This precaution was taken to stop viruses—particularly foot-and-mouth disease—entering the country. A Federal Health official said: "Nobody is exempt—no matter who they are."

Since the outbreak of the epidemic in Britain (SN: 12/9/67), stringent precautions have been enforced to prevent foot-and-mouth disease entering Australia. Every item of baggage brought in by air is examined, and soiled clothing fumigated if necessary. Footwear is disinfected.

The federal and state governments have prepared a detailed plan to deal with any possible outbreak of foot-and-mouth disease. The plan is ready to go into force as soon as an outbreak occurs.

The Federal Minister for Health says the procedure was particularly strengthened by the knowledge obtained from departmental officers who had been sent to England in the current widespread outbreaks of the disease there.

One senior veterinary officer, H. R. Peisley, has just returned after having observed eradication procedure.