

## Honduras awash in disease

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BY SAUNDRA AMRHEIN  
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SANTA LUCIA, Honduras - Through a rose-tinged sky at dusk, the San Miguel Volcano in El Salvador hovers over the remote Honduran home of Hector Ramos 50 miles away.

But the deadly infectious disease cholera looms even closer. Already, five cases of cholera have been reported in El Salvador, just over the border from Santa Lucia.

**MITCH  
RELIEF  
EFFORTS**

Honduran officials fear a new catastrophe could sweep through the country already devastated by Hurricane Mitch.

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Contaminated floodwater, crowded refugee sites and a growing shortage of food create ripe conditions for epidemics of not only cholera but malaria, hepatitis, typhoid and malnutrition, health officials say.

The ferocious storm already claimed more than 6,000 lives and left 1.4 million homeless here when it pummeled Central America the last week in October.

But the death toll could soar higher if the government can't fix destroyed water and sewer systems in time to prevent a rash of diseases.

In desperation, residents across the country from the capital of Tegucigalpa to San Pedro Sula drink, bathe or wash clothes with dirty water sometimes contaminated with raw sewage or corpses. Without latrines, displaced residents are relieving themselves in fields, further defiling a clean water stream.

Officials are frantic to get the word out about the need to boil water for 20 minutes or treat it with chlorine.

"The main problem now is communication with some areas, the lack of information in a lot of areas," said Dr. Oscar Rolando Duran, Honduras' secretary of health.

While utility officials labor feverishly to restore the water supply for 80 percent of Tegucigalpa, health workers stream into the countryside to teach villagers how to stop the sickness before it starts.

That includes Honduran Dr. Miguel Coello, employed by Cincinnati-based Shoulder to Shoulder Inc., a non-profit group shipping relief to three plagued areas of the country during the next year.

Dr. Coello visits residents like Mr. Ramos in the Honduran villages across the border from the cholera scare in El Salvador.

These outlying residents are more vulnerable to infection both because of their closeness to the human traffic across the border and their unhealthy living conditions.

Santa Lucia, the home of Shoulder to Shoulder's 6-year-old clinic, is one of the poorest cities in the country.

Dr. Coello visits Mr. Ramos in a neighborhood high above town to make sure he's boiling or treating his drinking water.

Mr. Ramos, 77, lives in this tin-roofed house with his wife and their 12-year-old adopted son. It's been his home for 50 years, but he almost lost it to the hurricane when about 6 feet of his back yard slid down the hill.

He couldn't eat or sleep for three days as tree roots snapped like firecrackers in the landslide.

But when Dr. Coello asks what he's doing with his drinking water, Mr. Ramos admits he's not doing anything, even though he knows better.

"No, doctor, I cannot tell you lies, because then I'm going to get sick and you won't know what's wrong," Mr. Ramos says.

### **A silent attack**

Cholera is spread through contaminated drinking water. But people can also catch it by putting their hands in their mouth without washing them.

Cholera causes severe diarrhea and dehydrates its victims. An afflicted person could lose up to 10 liters of body fluid in an hour, Dr. Coello says.

"People die very quickly because of the shock," he says.

Children and the elderly are most vulnerable to death from cholera because they have more difficulty recovering from dehydration or fighting off an infection. Rural residents have little access to antibiotics or medical treatment like intravenous fluids. When a person gets cholera, it isn't apparent at first. Because the disease initially lies dormant, the infected person doesn't know to be careful about not contaminating others.

"If someone travels to El Salvador and there is a cholera outbreak there, there is a little bit of time when they get back before they develop symptoms," Dr. Coello says. "They can get the bacteria and return here even before they develop the symptoms."

Typhoid and hepatitis are also transmitted by contaminated water.

Dr. Israel Giron, area health director for the region that includes the state of Intibuca, where Santa Lucia is located, says he has already dispatched workers to the border to teach people how to avoid contracting diseases.

The Santa Lucia Health Committee, instrumental in setting up the Cincinnati clinic, is doing the same.

"Villages (near) Santa Lucia may get the worst cases because they are the closest to the border and in the worst conditions," says committee President Elias Diaz. "It could be very easy to spread."

Mr. Diaz predicts other health problems stemming from the lack of food in coming months.

Mitch wiped out local bean crops. The price of beans is soaring already. The price of corn, not damaged by the storm but likely to be in high demand, is expected to follow.

Farmers can't plant more beans again until June. They'll harvest them in August. If the accompanying rains wipe out Mitch-weakened bridges and roads before then, there will be little chance of getting food trucked in for a long time.

"We are going to have more and more malnutrition and diseases as a result," Mr. Diaz says.

### **Death's breeding ground**

The mosquitoes sting like fireants.

Twice as big as the kind Cincinnatians swat every summer, these mosquitoes are potential killers. They start biting at sunset and don't stop until dawn.

Even before Hurricane Mitch, the lowlands at the northern coast and its banana plantations were breeding grounds for the malaria-transmitting bugs. Now, even more mosquitoes thrive in the brown lakes of muddy water standing three weeks after torrential rain and flooding. They feed on the homeless shack dwellers who live in the medians of roads and the refugees stranded on banana plantations in El Progreso and across the Rio Ulua in La Lima.

Officials fear the proliferation of mosquitoes could lead to an outbreak of malaria, an infectious disease that destroys red blood cells, causing chills, fever and severe anemia.

Nearly 100 bites cover the arms and face of 13-year-old Benitos Bertin, one of 360 San Isidro villagers left trapped on the Naranjo Chino banana

camp of Cincinnati-based Chiquita Brands International. It was one of about a dozen villages flooded when the levees broke on the Rio Ulua.

Benitos says he feels fine, no fever.

But not all the children are as lucky.

Many already have fevers, some are vomiting and experiencing diarrhea, the adults say.

Relief workers are trying to get the villagers moved to El Progreso, where they can be put in crowded, but sanitary shelters.

They also need pesticides to kill mosquitoes and more medicine to help prevent the spread of malaria, says Daniel Castro, national director of the Christian Medical Society of Honduras.

"My main concern now is what is going to come and the epidemical situation we're going to face," Mr. Castro says. "People in the poor areas have no sewer systems. Water from sinks and showers doesn't drain. This creates swamps on back patios. Now the situation is going to get worse."

Mr. Castro, who leads about eight medical brigades or teams of international physicians through Honduras each year, says the two doctors remaining from the recent brigade treat about 500 patients a day.

### **Epidemic situation**

Meanwhile relief efforts collide within the Emergency Commission headed by the Roman Catholic Church.

While some volunteers clamor for stranded refugees to be brought to shelters, others worry they would bring diseases with them. "An epidemic situation could start if we bring them here," Mr. Castro says.

Dr. Coello, about to join the small ranks of Mr. Castro's brigade, advises him to quarantine the villagers into separate schools to avoid further contamination.

It might be too late for some shelters. Dr. Doug Perry, an eye doctor formerly of Cincinnati, and his wife, Maxine, have been treating conjunctivitis, a contagious eye infection, in shelters in El Progreso.

The couple moved two years ago from Florida to El Progreso, where they live and work at a clinic run by Medical Ministry International. They closed their eye clinic for two weeks following the hurricane because no one could get to them.

Dr. Perry agrees there is a need to centralize the food and relief distribution. "But from the medical point of view, we should separate the people," he says. "Infectious diseases breed on proximity." Standing barefoot on his broken-stone patio, where two skinny dogs lie listless, Mr. Ramos listens patiently to Dr. Coello.

Dr. Coello advises him to boil his water if he can't get chlorine because the rain can wash contaminants into the water supply and cholera can be carried over the border by travelers from El Salvador.

Mr. Ramos says he knows he needs to be careful. But he makes no promises.

Walking down the mountain path toward Santa Lucia, Dr. Coello pauses to view the San Miguel Volcano in El Salvador. Reflecting on the conversation with Mr. Ramos, Dr. Coello sighs. "He's not going to boil the water."