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COMMENTARY

Give Us DDT

 By **SAM ZARAMBA**
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KAMPALA, Uganda -- Though Africa's sad experience with colonialism ended in the 1960s, a lethal vestige remains: malaria. It is the biggest killer of Ugandan and all African children. Yet it remains preventable and curable. Last week in Germany, G-8 leaders committed new resources to the fight against the mosquito-borne disease and promised to use every available tool.

Now they must honor this promise by supporting African independence in the realm of disease control. We must be able to use Dichloro-Diphenyl-Trichloroethane -- DDT.

The United States and Europe eradicated malaria by 1960, largely with the use of DDT. At the time, Uganda tested the pesticide in the Kanungu district and reduced malaria by 98%. Despite this success, we lacked the resources to sustain the program. Rather than partner with us to improve our public health infrastructure, however, foreign donors blanched. They used Africa's lack of infrastructure to justify not investing in it.


Today, every single Ugandan still remains at risk. Over 10 million Ugandans are infected each year, and up to 100,000 of our mothers and children die from the disease. Recently Ugandan country music star Job Paul Kafeero died of the disease, a reminder that no one is beyond its reach. Yet, many still argue that Africa's poor infrastructure makes indoor spraying too costly and complex a means of fighting malaria.

Uganda is one of a growing number of African countries proving these people wrong. In 2006, Uganda worked with President George Bush's Malaria Initiative to train 350 spray operators, supervisors and health officials. In August 2006 and again in February 2007, we covered 100,000 households in the southern Kabale district with the insecticide Icon. Nearly everyone welcomed this protection. The prevalence of the malaria parasite dropped. Today, just 3% of the local population carries the disease, down from 30%.

This exercise pays for itself. With 90% fewer people requiring anti-malarial medication and other public-health resources, more healthy adults work and more children attend school. When we repeated the test program in Kabale and neighboring Kanungu district this year, our spray teams required little new training and were rapidly mobilized. Our health officials at every level were able to educate our communities, implement spraying programs and evaluate operations. With each passing year, it will now be easier and less expensive to run the programs.

But DDT lasts longer, costs less and is more effective against malaria-carrying mosquitoes than Icon. It functions as spatial repellent to keep mosquitoes out of homes, as an irritant to prevent them from biting, and as a toxic agent to kill those that land. The repellency effect works without physical contact. And because we will never use the chemical in agriculture, DDT also makes mosquitoes less likely to develop

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resistance.

The U.S. banned DDT in 1972, spurred on by environmentalist Rachel Carson's 1962 book "Silent Spring." Many countries in Europe and around the world followed suit. But after decades of exhaustive scientific review, DDT has been shown to not only be safe for humans and the environment, but also the single most effective anti-malarial agent ever invented. Nothing else at any price does everything it can do. That is why the World Health Organization (WHO) has once again recommended using DDT wherever possible against malaria, alongside insecticidal nets and effective drugs.

We are trying to do precisely this. In addition to distributing nearly three million long-lasting insecticidal nets and 25 million doses of effective anti-malarial drugs, we will expand our indoor spraying operations to four more districts this year, where we will protect tens of thousands of Ugandans from malaria's deadly scourge. We are committed to storing, transporting and using DDT properly in these programs, in accord with Stockholm Convention, WHO, European Union and U.S. Agency for International Development guidelines. We are working with these organizations and to ensure support from our communities, and to ensure that our agricultural trade is not jeopardized.

Although Uganda's National Environmental Management Authority has approved DDT for malaria control, Western environmentalists continue to undermine our efforts and discourage G-8 governments from supporting us. The EU has acknowledged our right to use DDT, but some consumer and agricultural groups repeat myths and lies about the chemical. They should instead help us use it strictly to control malaria.

Environmental leaders must join the 21st century, acknowledge the mistakes Carson made, and balance the hypothetical risks of DDT with the real and devastating consequences of malaria. Uganda has demonstrated that, with the proper support, we can conduct model indoor spraying programs and ensure that money is spent wisely, chemicals are handled properly, our program responds promptly to changing conditions, and malaria is brought under control.

Africa is determined to rise above the contemporary colonialism that keeps us impoverished. We expect strong leadership in G-8 countries to stop paying lip service to African self-determination and start supporting solutions that are already working.

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