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The day China sneezed

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IT is a long time since the Minister of Health proclaimed his ministry's priority as "health, health and health". For people like me, it seems like another age.

Mercifully, up to now Severe Acute Respiratory Syndrome has not become a pandemic, but much depends on the control measures taken by all nations, including ours, with reported cases to prevent its spread.

Health checks must be scrupulously stringent, but are they? Or is it just another case of lackadaisical examination at the points of departure and arrival?

Tourism, though important, must be made secondary; health primary. We must be dead serious about tackling this killer bug and there must be no attempt again even to think of managing the news.

Openness is the best policy.

For SARS has transformed many lives, forcing them to think every moment of how to avoid catching this highly infectious and sometimes fatal disease and how to prevent this virus from being passed on unwittingly.

It won't be easy. Here's a play on the increasing centrality of Zhongguo's economy in Asia and the world: When Guangdong sneezes, the rest of the region catches SARS.

The correlation between colds and inter-dependent economics in the original saying ("when the US sneezes, the rest of the world catches the flu") has now been shown to be not merely incidental. The details of the spread of SARS are still fuzzy, but they follow a rough map of the trade, investment, tourism and manpower flows in the region.

The first exhalation of the deadly coronavirus probably occurred in the whereabouts of a farm somewhere near Canton around November last year. Then it hitchhiked across the factories and offices of the special economic zone before hopping on a plane at the airport, which plies the multinational salarymen and entrepreneurs in and out of one of the most heavily foreign-invested areas on the planet.

Its first stop was probably Hong Kong, whose high-density population and extensive economic connections ensured that it was just a cough away from similarly populated and economically connected centres nearby - chiefly Singapore.

At the same time, it feverishly spread through frequent-flier miles across the Chinese economic and community diaspora worldwide, all the way across to Toronto, Canada.

Some day a gripping book will be written about this germ which, never seen before in humans or animals, rode on the contrails of jet age globalisation. It has so far infected more than 4,500 in 25 countries and killed more than 220 since the Chinese New Year; and which, as breaths were held behind surgical masks across East Asia, was finally contained by a miracle treatment.

In the meantime, we have to cope with the depredations of Attila the Virus the best way we can. Like the horsemen of the famous Hun, SARS has the advantage of speed: the speed of infection abetted by air travel and cross-national economic linkages, the speed with which it overcomes human immune systems, and perhaps most worryingly, the speed of global communication and information, and with it misinformation, rumour, innuendo and falsehoods designed to leave you extremely wary of stepping out of your closet.

As fast as SARS travels, though, I am sure that the contagion will eventually be stanchd. About 30 laboratories world-wide are now tinkering with the newly-identified virus's genetic make-up.

Even if the pessimists are proved right in thinking that a cure will never be found, the statistics will eventually regress to a vanishing point. With modern medical facilities, SARS has a 4-6 per cent fatality rate (or more than nine out of ten survive); our doctors think that you have a one in 25,000 chance of catching the disease.

At worst, SARS will be here to stay. But all things being equal, including the march of medical science, it won't be much worse than the other potentially fatal infectious diseases out there, such as tuberculosis and influenza, which periodically raise their ugly heads to keep the World Health Organisation busy. In the big picture of epidemiology, SARS is not going to be anything like the Black Death of the Middle Ages.

We are certainly not dealing with a pestilence of biblical proportions. But my Attila allusion is not far off the mark in terms of the burgeoning fear that SARS has induced.

It is essentially a fear of the unknown, spreading many times faster than the known progress of the disease and fuelled by the fervid grapevine of the electronic era.

If economic growth and development is largely about "expectations", then the expectation that many people are about to get sick and die is bound to cause great damage. Region-wide, the damage is now being done. The worst hit are the retail and tourism sectors. And the hardest hit countries are those that are highly exposed to them.

Restaurants and hotels are emptying out, airlines and travel agents have lost bookings. In Hong Kong and Singapore, the stock markets have dived. Singaporeans call the SARS outbreak the country's worst crisis since independence.

Because fear is fed by excess misinformation and a dearth of information, governments' first gut reaction in dealing with disease eruptions is to clamp down on word-of-mouth by disinformation. This can actually work - if the disease is confined to a limited catchment, if health authorities act fast enough and, most critically, if the government has a monopoly on information, which an unknowing but anxious public has no choice but to trust.

That was exactly what China did as the disease burst out from its epicentre in Guangdong. It pretended that everything was "under control".

But none of the criteria for successful disinformation applied: SARS flew out of China on numerous scheduled and charter flights, Beijing was slow to admit that its health services might not be able to cope and even slower to realise that it does not have the same monopoly on information as it does on politics.

Awareness came, but belatedly. Window dressing was the order of the day until well into the month. On April 4, the Chinese Centre for Disease Control and Prevention issued a public apology for the Government's tardiness in owning up to the disease. But the cat had already sprinted out of the bag.

On Sunday, the health minister was sacked, ostensibly for covering up the number of SARS deaths and cases in Beijing. Even then, it was international pressure and the bad image of an aspiring economic powerhouse in totalitarian denial that persuaded the Chinese Government to come clean.

The irony of disinformation is that there can be a severe backlash if that is what it is shown to be - a sophisticated attempt to bluff your way out of trouble. Open and rapidly communicative economies such as Singapore

and Hong Kong don't even bother to quell the fear factor, and err on the side of over-reaction.

On the other hand, Malaysia tends to err on the side of over-caution. In previous disease outbreaks, such as the Coxsackie and viral encephalitis, information curtailment can be argued to have worked to stem panic - the pathogens did not spread too far and wide. But SARS is different.

It has been imported from outside and its detection and control is being undertaken against the clamour of the world's attention. The health authorities cannot assume to restrict information for the good of the public.

It would be folly for the Health Ministry to follow China's example. There were sloppy attempts early on to manage information, but the media's careful uncovering of the incidence of the disease has done more to assuage public concern.

Instead, every precaution must be taken, with enough visibility to show that the Government is both earnest and effective in dealing with the potential scourge.

In case people forget, the Prime Minister, Datuk Seri Dr Mahathir Mohamad, is a physician, not a PhD holder in mediaeval history. I should think he is more concerned about SARS than most of his colleagues, and he said so during his brief appearance at the Umno Supreme Council meeting last week.

I think we shouldn't have dropped our ban on the entry of all people from China and Hong Kong, bar the exceptionally and absolutely essential. Our friendship for the Chinese people remains firm. This is an exceptional case and Beijing will understand that this is a temporary measure.

In Hong Kong, despite extensive infection control precautions, more than a dozen doctors and nurses fell ill each day over the previous week. Dr Justin Wu, who treats SARS patients in Hong Kong, avoids contact with people, including his wife, to guard against passing the disease to others.

Having seen the infectiousness of the disease at first hand, Dr Wu is convinced that SARS will spread across the world, and he has been right on the money.

He warned that "when the epidemic turns pandemic, there is nowhere on earth to hide". Malaysia and other nations must therefore take elaborate precautions to curb the spread of the disease to an absolute minimum.

I worry a lot when it comes to health because I have a feeling that there are no mild cases of SARS.