

Fever Named After Blackwater

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FALLUJAH, Mar 26 (IPS) – Iraqi doctors in al-Anbar province warn of a new disease they call “Blackwater” that threatens the lives of thousands. The disease is named after Blackwater Worldwide, the U.S. mercenary company operating in Iraq.

“This disease is a severe form of malarial infection caused by the parasite plasmodium falciparum, which is considered the worst type of malarial infection,” Dr. Ali Hakki from Fallujah told IPS. “It is one of the complications of that infection, and not the ordinary picture of the disease. Because of its frequent and severe complications, such as Blackwater fever, and its resistance to treatment, P. falciparum can cause death within 24 hours.”

What Iraqis now call Blackwater fever is really a well-known medical condition, and while it has nothing to do with Blackwater Worldwide, Iraqis in al-Anbar province have decided to make the connection between the disease and the lethal U.S.-based company which has been responsible for the death of countless Iraqis.

The disease is most prevalent in Africa and Asia. The patient suffers severe intravascular haemolysis — the destruction of red blood cells leading to kidney and liver failure. It also leads to black or red urination, and hence perhaps the new name ‘Blackwater’.

The deadly disease, never before seen in Iraq on at least this scale, seems to be spreading across the country. And Iraq lacks medicines, hospitals, and doctors to lead a campaign to fight the disease.

“We informed the ministry of the disease, but it seems that they are not in a mood to listen,” a doctor from the al-Anbar Health Office in Ramadi told IPS, speaking on condition of anonymity. “We are making personal contacts with NGOs in an attempt to get the necessary medicines.”

The three doctors who spoke to IPS in Fallujah and in Ramadi in al-Anbar province that lies west of Baghdad, seemed sure that the Iraqi government would do little to face the plague.

“They have not even made any announcement so that people can take precautions,” one of the doctors from Fallujah told IPS.

The doctor said a patient usually suffers three stages of malarial infection. “First is the cold stage where the patient will have chills and shaking, the second is the hot stage when fever takes over, and the third is the sweating stage.”

Doctors in Fallujah say the new complication of the disease that may develop from malarial infection can be treated in its early stages, but is difficult to control when complications

develop. Drugs currently being used to treat the disease include Chloroquin, Mefloquin, Pyrimethamine, Suladox, Halfotrin and Primaquine.

Patients seem unaware of the seriousness of the disease, though doctors tell them it is essential to buy medicines from private pharmacies because they are not available at general hospitals.

“Many have died within the past two weeks in my town,” Mahmood Nassir, a schoolteacher from Saqlawiya, north of Fallujah, told IPS. “We know it is a deadly disease, but what can we do about it? We have no government to refer to, and everyone in the Green Zone (the government district of Baghdad) is too busy preparing to escape with their share of the money they stole from us.”

Talat al-Mukhtar is an Iraqi doctor now studying abroad. IPS asked him to comment on the Blackwater fever outbreak in Iraq.

“Malaria is endemic in Iraq, mainly in the northern part. However, it is prevalent in the milder forms; the severe form had been reported but not at an epidemic level.”

Dr. Mukhtar said this form of malaria requires a “triple-drug treatment programme because it is an aggressive infection.” He said the patient “requires meticulous medical and nursing care, and might even need time in an intensive care unit, as it can easily lead to kidney and liver failure.”

Like the other doctors IPS spoke with, Dr. Mukhtar was clear that the Iraqi ministry of health needs to take a proactive role before the disease spreads further. “These cases of severe fever that follow haemolysis should warrant immediate action from the ministry of health to investigate thoroughly these cases and assess whether they are malaria or other conditions.”

Dr. Mukhtar added, “Considering the poor health situation and poor resources in Anbar province, even though clinical judgment is important, laboratory tests are not easily verified, and many other diseases can give the same clinical picture. That is why standard lab investigation is needed, may be with the help of WHO (World Health Organisation).”

The disease seems too sensitive for journalists to talk about.

“There was a great deal of anger when we wrote about cholera in Iraq last summer,” a journalist in Fallujah told IPS. “Neither the government nor the occupation forces would accept our covering such a story.”

IPS was not allowed to take pictures at the Fallujah General Hospital. A doctor refused to disclose how many may have been infected or how many may have died.

The spread of this condition follows the outbreak of other diseases. According to the WHO, as of Oct. 3, 2007 cholera outbreaks in Iraq had spread to nine of 18 provinces, and roughly 30,000 people had fallen ill with acute diarrhoea, with 14 deaths.

An Oxfam International report released last July showed that the humanitarian disaster in Iraq is compounded by a mass exodus of medical staff fleeing chronic violence and lawlessness. The report said the lack of doctors and nurses is breaking down a health system now on the brink of collapse.

The report said many hospitals had lost up to 80 percent of their teaching staff.

Ali, our correspondent in Baghdad, works in close collaboration with Dahr Jamail, our U.S.-based specialist writer on Iraq who has reported extensively from Iraq and the Middle East

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