ABSTRACT OF MALARIA INFORMATION IN
MEDITERRANEAN BASE SECTION * HEADQUARTERS ANNUAL REPORT 1943

Page No.

1 The control of Typhus and Malaria, diseases prevalent in this area, was discussed and decisions made as to the necessary preventive measures required. In conjunction with these meetings, conferences for Medical Officers in the area dealing with Malaria, Typhus and Venereal Diseases were arranged.

15 French Civilian Anti-malaria program in Oran Department was carried on during the months April thru October, 1943, by an organization consisting of a director, his civilian employees, and collaborating civilian doctors, working in cooperation with the American Army. The director for the Oran Department was appointed and paid a salary by the Civilian Anti-Malarial organization of Algeria, in Algiers. The Director's expences and all other mony spent for civilian malaria control in Oran Department, were met from American Army funds available to the MBS Surgeon.

In addition, all transportation, tools, equipment and supplies (except drugs) were supplied this civilian organization by requisition on American Army supply depots and agencies. Drugs were supplied (when available) by N.A.E.B., through the civilian anti-malaria organization of Algeria.

Dr. Georges Rehm of Mascara, appointed by the Algiers agency as director for the Oran Department, was placed under contract to the MBS Surgeon on 12 April 1943. This was done to make it possible to advance money from American ary funds to Dr. Rehm for his expenditures. Cash advances were made, as needed, in amounts of 50,000 francs each. A committee was appointed by the MBS Surgeon to advise on operations of this civilian agency. This committee included Dr. Rehm, and a representative of the French Army and a representative of the American Army. This committee met weekly.

Within the Oran Department, collaborating doctors were located in 18 localities: L' Hillil; Inkerman; Marnia; Oued Taria; Pont de l'Isser; Saint Lucien; Sebdou; Bou Hanifia; Le Telagh; Ain Tedeles; Mercier-Iacombe; Ain-el-Arba; Beni Saf; Er Rahel;Perregaux; Relizane; Rio Salado; and Saint Cloud. These doctors were to administer anti-malaria drugs, supervise small scale mosquito control projects in their localities, and furnish Dr. Rehm with reports of malaria incidence in their communities. Malaria is not a reportable disease in Algeria.

During April and May, Dr. Rehm was unable to requisition supplies and equipment, due to an error in wording of the American Army order authorizing his operations. During this time the necessary supplies and equipment were drawn on the authority of the MBS Surgeon, and turned over to Dr. Rehm. Later, he was able to requisition directly. In October almost all the equipment drawn for civilian malaria control during the season was turned back to the Army.

This civilian agency was authorized to spend up to 500,000 francs per month; actually their expences never exceeded 70,000 francs in any one month.

16 Dr. Rehm was able to secure enough laborers for mosquito control in only a few localities. He always had adequate supplies of totals, equipment and supplies (except drugs), but his labor problems were never solved. Most of the season, he was unable to secure adequate supplies of drugs for treatment of malaria cases.

Drugs for suppressive medication were never available. Mosquito control

operations were, in many localities, either seriously hampered or rendered impossible by hostile municipal officials or influential local colonials.

As a result of the above circumstances, it was necessary for the American Army to assume full responsibility for mosquito control operations in those areas where troops were stationed.

In summary it was felt that all in all considerable was accomplished in conjunction with civilians to improve health standards and prevent communicable disease.

* * * *

ABSTARCT OF MALARIA INFORMATION IN
MEDITERRANEAN BASE SECTION * (CENTER DISTRICT PROV) *
HEADQUARTERS ANNUAL REPORT 1943.

Page No.

4 6. Insect Control.

a. ----- Constant vigilance has kept insect-borne disease wlth bounds, however, and our record, especially in comparison with other Allied troops, has been good.

b. Malaria control is the province of the Malariologist working under the technical direction of this section. Two units, the 2655th Malaria Control Detachment and the 11th Malaria Survey Unit have done the actual field work. (At the end of the malaria season the 11th Malaria Survey Unit was replaced by the 13th Malaria Survey Unit). A very extensive program was carried out in the district in cooperation with the British Medical Section, including the maping of mosquito breeding areas, surveys of military and civilian population, ditching, draining, and spraying. Effectiveness of these measures was shown in the low malarial rate for the district during the malarial season.