SANITARY PROTECTION AMONG THE REPUBLICS OF PERU, BOLIVIA, AND CHILE

The Minister of Public Health and Social Assistance of the Republic of Perú, the Minister of Labor, Hygiene, and Social Security of the Republic of Bolivia, and the Minister of Health, Security, and Social Assistance of the Republic of Chile, meeting in the city of Arica, Chile, from the 24th to the 26th of May, 1946, and inspired by the common desire to furnish to their respective populations the means of bettering their sanitary conditions and to protect them from possible epidemic aggressions propagated across the national frontiers, approved ad-referendum the following "International Sanitary Convention," subscribed by the three Republics mentioned, in conformity with Paragraph 2 of Article 7 of the Pan American Sanitary Code, and in accordance with the Third Consultative Reunion of the Ministers of Foreign Relations of the American Republics celebrated in Rio de Janeiro in January, 1942, and in accordance with the Agreement of Lima dated April 4, 1946:

PRELIMINARY PROVISIONS

The objectives of the present Convention are:
(a) Anti-malarial sanitation in the frontier zones of Perú and Chile;
(b) The control of infectious and contagious diseases liable to be propagated across the borders of the three signatory countries; and
(c) The training and interchange of technical personnel of the signatory countries.

CHAPTER I

SECTION I.—MALARIA

Article 1.—The Supreme Governments of Perú and Chile agree to carry out an anti-malarial campaign in the border zones of both countries, the geographical extent of said zones to be that which is considered appropriate by the respective Sanitary Services.

SECTION II.—SMALLPOX

Article 2.—The Supreme Governments of Perú, Bolivia, and Chile agree to carry out intensive and permanent vaccination campaigns, until a high index of immunity is achieved.

Article 3.—To require a Vaccination Certificate from each individual, except in those cases which the Sanitary Authority of the place of origin will determine and certify.

Article 4.—To require, for international travel, a Vaccination Certificate after the third month of age.

Article 5.—To recognize the validity of the vaccination certificate for a period of five years, and of the certificate of re-vaccination for a period of three years.

Article 6.—To accept provisional certificates of vaccination in cases of emergency travel to be duly certified by the Sanitary Authority of each country; these
Certificates will have a validity limited to ten days, and must be changed for a definitive Certificate within this period the results of the vaccination being noted.

Article 7.—To recommend the control of carriers and the eventual destruction of virus in clothing and in home-made textiles.

Article 8.—To take into account the use of desiccated virus as the virus of choice in vaccination campaigns in rural areas.

SECTION III.—YELLOW FEVER

Article 9.—To carry out intensive campaigns until the *stegomyia* mosquito (*Aedes aegypti*) is exterminated in endemic yellow fever zones and in those in which, due to the presence of *stegomyia*, there exists the possibility of the introduction and propagation of the disease by the invasion of infected vectors or of cases in the incubation period.

Article 10.—As immediate measures, in view of the possibility of the transportation of vectors by airplanes, they agree to require of the airlines the systematic and regular disinsectization of passenger and cargo planes by means of the procedures, and with the periodicity, specified as follows:

a) The fumigation of the interior of airplanes with 5% solutions of DDT, or with more effective substances, applied with pressure pumps in a maximum interval of thirty days, when the planes are grounded and empty, in the airports of Lima, La Paz, or Santiago, the effectiveness of the fumigation being certified by the Sanitary Authority of each country, including the identification of each airplane treated;

b) The establishment of the obligation of the international airlines to adopt a method of fumigating the interior of airplanes, including all compartments, based on the use of aerosols, on beginning a flight from the last airport before entering a bordering country; and

c) The obligation expressed in Paragraphs a) and b) of this Article apply also to civil aircraft which are not used for commercial transport, the disinsectization procedures to be applied or controlled by the Sanitary Authorities of the country from which a plane leaves for a neighboring country.

SECTION IV.—EXANTHEMATIC TYPHUS FEVER

Article 11.—To introduce the use of the Cox-type vaccine, or similar vaccines duly approved by the Sanitary Authorities as the principal and permanent prophylactic measure, requiring Vaccination Certificates exclusively of persons who travel between endemic zones and who in the judgment of said Authorities, represent a potential danger in the propagation of exanthematic typhus fever.

Article 12.—To organize intensive campaigns of disinfestation by the use of DDT or superior substances, and to establish the interchange of experimental studies on methods of application.

Article 13.—To establish Certificates of Disinfestation for persons suspected of being carriers of parasites, these certificates to be valid for one month.

Article 14.—To establish the differentiation between exanthematic ("classical" or historic) typhus fever and murine typhus by means of scientifically proven methods.

Article 15.—To intensify campaigns against murine typhus.

SECTION V.—BUBONIC PLAGUE

Article 16.—To maintain and enlarge the existing Anti-Plague Services in each one of the signatory countries in accordance with their needs, and to carry out
anti-rat and anti-flea campaigns for the purpose of avoiding the propagation of other diseases transmitted by these vectors.

GENERAL PROVISIONS

Article 17.—The Signatory Governments agree to amplify and improve their frontier Sanitary Services, giving them sufficient resources, competent personnel, and adequate installations for the efficient carrying out of the provisions of this Convention.

Article 18.—The Signatory Governments agree to the formation of a “Control Committee,” made up of a representative from each country and advised by representatives of the Pan American Sanitary Bureau and by technical personnel designated by the respective Governments.

The office of President of this Committee will be rotating and will last for one year.

This Committee will have as its objective that of bringing about and controlling the carrying out of the provisions of the present Convention. Also, it will select the locations of frontier sanitary stations, and will provide for the interchange of trimestral reports and of additional ones when circumstances require it, as well as to give publicity to the objectives of the present Convention.

The Committee will draw up its own statutes and will also draw up the corresponding regulations.

During the first two years of the existence of this Convention the Committee will meet semi-annually.

The cities of Tacna, Perú; La Paz, Bolivia; and Arica, Chile are selected as the sites of reunion of the Control Committee.

Article 19.—None of the signatory countries will accept sanitary certificates or vaccination certificates which are not issued by a competent Authority identified as such exclusively sanitary authorities officially recognized.

Article 20.—The official form of the Pan American Sanitary Bureau is adopted as the International Certificate of Vaccination.

Article 21.—The reciprocal supplying of vaccines and other prophylactic materials, in cases of emergency is agreed upon.

Article 22.—It is agreed to establish, as an indispensable requirement, the Certificate of Vaccination as a sanitary passport between endemic frontier zones.

Article 23.—The Conference recommends to the respective governments and to the corresponding sanitary organizations the advisability of carrying out yellow fever vaccinations on all passengers travelling from one of the signatory countries to a locality in another country participating in the Convention in which yellow fever is epidemic or endemic, and, inversely, on all susceptible passengers coming from epidemic or endemic yellow fever zones and travelling to areas in bordering countries in which the *Aedes aegypti* mosquito exists.

This recommendation is valid for any means of travel and should be applied within a minimum period of 7 days before the date of travel of the passenger.

Article 24.—The Signatory Governments agree to make a study of the endemic zones of their respective countries and to make epidemiological maps of these which will be kept up to date. These maps will be sent to the Superior Sanitary Authorities for the ends contemplated in Articles 22 and 23 of this Convention.

Article 25.—The Conference, taking into account the excellent sanitary work carried out by the Anti-Malaria Brigade of the Carabineros of Chile, recommends to the respective governments the study of the possibility of creating, in each country, a permanent service of police forces to perform anti-malaria sanitation, rural sanitation, and border sanitary control.
Article 26.—The Conference recommends to the respective governments the study of the possibility of the interchange of technical personnel of the frontier Sanitary Services, as well as the preparation of the corresponding personnel, and the interchange of materials, studies, data, or other practical methods of cooperation.

Article 27.—The Conference recommends to the respective governments the granting of carnets for the unrestricted crossing of the borders of the Republics of Perú, Bolivia and Chile, to the members of the Control Committee and to the sanitary personnel which this same Committee specifies.

Article 28.—The interchange of viruses and vaccines for experimental purposes, and the communication of results obtained, are recommended.

Article 29.—The Ministers of Health of Perú, Bolivia and Chile agree to obtain from their corresponding Governments the adoption of procedures of disinfection identical with those already specified for commercial airplanes, for the airplanes of the Armed Forces which cross the borders of the signatory countries.

FINAL PROVISIONS

Article 30.—The present Convention will take effect immediately upon the corresponding ratification by the respective Foreign Offices.

Article 31.—The present Convention will be of indefinite duration, and may be rescinded by any of the High Contracting Parties by the giving of an advance notice of six months.

Article 32.—Any one of the signatory countries may request the modification or amplification of the provisions of the present Convention, such a request to be the motive for the convocation of a new Conference among the three countries.

Article 33.—Immediately after the ratification of the present Convention by each one of the High Contracting Parties, its text will be officially forwarded to the Pan American Sanitary Bureau for transmission to the countries of the Americas.

The Minister of Public Health and Social Assistance of Perú, the Minister of Labor, Hygiene and Social Security of Bolivia, and the Minister of Health, Security, and Social Assistance of Chile, in complete agreement with the provisions established in the present Convention, will proceed to bring them to the consideration of their respective Supreme Governments for their ratification and placing in effect. To this end individual copies of this Document are interchanged and signed.

(Sgd.) DR. JULIO E. PORTUGAL
President of the Cabinet and Minister of Public Health and Social Assistance of Perú.

(Sgd.) DR. GERMAN MONROY BLOCK
Minister of Labor, Hygiene, and Social Security of Bolivia.

(Sgd.) DR. JUAN GARAFLULIC D.
Ministers of Health, Security, and Social Assistance of Chile.

Lavado de platos a máquina.—Presentan los autores técnicas que pueden aplicarse en la evaluación de las máquinas para lavar platos en los restaurantes, empleando *M. caseolyticus* como microorganismo de prueba y encontrando que un lavado de 10 segundos a 78° C es suficiente para producir la esterilización de los utensilios. (Mallmann, W. L.; DeKoning, Paul, y Zaikowski, Leo: Am. Jour. Pub. Health, 390 ab. 1947.)