Chikungunya epidemic on the French Island of Réunion: a “natural” catastrophe

By Françoise Thull and Pierre Mabut
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The epidemic that has raged on the Réunion Island since March 2005 has, according to official figures, affected 157,000 people, 20 percent of the population, with 77 deaths directly or indirectly attributed to the chikungunya virus. This very debilitating disease is transmitted by the Aedes Albopictus mosquito, which had only been present in Africa before appearing in Réunion at the start of 2005. The disease’s symptoms are bouts of high temperatures associated with pain or even paralysis of the body’s joints, forcing the patient to move in a bent position; hence the name chikungunya, which in Swahili means “he who walks bent over.”

The former French colony of Réunion, located in the Indian Ocean, 9,000 km from Paris, became an overseas French administrative department in 1946. Its two “capitals” are Saint-Denis in the north and Saint-Pierre in the south. The department is run by a government-appointed Préfet (the administrative head)—currently Laurent Cayrel—and all French laws apply there. As such, Réunion is part of the European Union and is classed as an underdeveloped region, thus benefiting from 1.5 billion euros in European credits. The territory also serves as a French military base.

The 2005 census recorded a population of 774,600 islanders, 56 percent of whom were under 30. The demographic growth of Réunion is four times higher than that of mainland France. At 38 percent, the unemployment rate is among the highest for all French departments. In November 2005, 35 percent of the active population depended directly or indirectly on minimum welfare benefits.

The chikungunya virus, identified for the first time in 1953 in East Africa, was initially classified as a benign disease, causing fatal infections only rarely, in vulnerable or old people, pregnant women and newborn children. But it has turned out that the disease is fatal and strikes the most diverse age groups. There is currently no vaccine or preventive treatment. Medical care for those affected is limited to anti-inflammatory medicines to relieve pain and paracetamol for high temperatures.

It was Dr. Patrick Pelloux of the French Emergency Doctors Union (AMUF; well known to French people for having alerted the French government during the 2003 heat wave catastrophe when thousands of old people died) who responded to the repeated attempts of journalists to draw attention to the chikungunya epidemic. He “sounded the alert” in a January 27 press statement, warning of “the intensification of the chikungunya epidemic in Réunion since December 2005 leading to a saturation of the emergency services.”

In Dr. Pelloux’s opinion, there are “very likely very many underestimated cases or those totally ignored.” He requested that medical reinforcements be sent to the island and that “a crisis meeting” be called at the Health Ministry. In its press communiqué, the AMUF announced that “faced with magnitude of the viral progression, we advocate the sending of medical teams.” It added that, “to address the question of the necessary reinforcements to avoid an explosive situation, it is urgent to act and to send reinforcements” because the “front line” emergency services on the island lack the necessary means. According to the AMUF, nearly 15 percent of emergency patients treated daily are diagnosed with chikungunya, compared to 10 percent the previous week. “This French department must have all the means to confront this unprecedented epidemic,” the organisation declared.

Dr. Pelloux also pointed out similarities between the reaction to the present crisis and the scandalous mismanagement of the heat wave in 2003, which in a few weeks cost the lives of 15,000 old people. The health authorities in France were severely condemned for not having reacted earlier to this crisis. The government claims that it is now doing everything that needs to be done.

However, the disease was not taken seriously before 2006, fully a year after it emerged. On January 1, 2006, Overseas Minister François Baroin was still declaring on France Inter radio that it was “a disease from which you don’t die, and which resembles a bad case of flu”—this while 25,000 new cases were being recorded each week. The population is
indignant over the government’s inaction.

It is now clear that there was a 10 percent increase in the island’s death rate last year, compared to the annual death rates recorded between 1999 and 2004. Philippe Quénel, an epidemiologist at the Public Health Institute (INVS), declared on February 17, 2006, in *Le Monde*, that “without a doubt there is an excess death rate due to chikungunya. The question is to know which part is attributable to the epidemic.” No death certificate issued in 2005 attributed the fatality to chikungunya. However, 77 deaths have been officially attributed to it, either directly or indirectly, since the start of 2006.

On January 30, French Health Minister Xavier Bertrand went to Réunion, where he promised extra resources, both human and material, to get on top of the epidemic and “not to let ourselves be overtaken by it.” A week earlier, he had again observed that the disease was contaminating “more than a thousand people a week.” According to the overseas minister, 30,000 cases had been recorded by that time, representing 5 percent of the population.

The true magnitude of the crisis only became apparent when government figures showing 12,400 cases had to be sharply revised upwards in January.

Faced with government indifference, volunteers mobilised on the island to create the “Réunion Island Against Chikungunya” association and demanded an explanation from the state and regional health authorities. The group also sought to inform the inhabitants about the most important issues concerning the disease, as well as about the environmental impact of the chemical pesticides used massively in villages, for the most part by inexperienced military aid teams, to eradicate mosquitoes. The inhabitants are extremely worried, but, lacking medical and preventive resources, it is difficult for them to combat this scourge.

Another organisation, “Act for Ourselves,” has reacted to the prime minister’s declaration, blaming the government’s failure to deal with the epidemic on the extremely rapid spread of the disease by organising its own study in order to establish the real number of people contaminated by the virus. Starting from the National Statistics Office (INSEE) census data for last year, it revealed that 248,000 people were infected by the virus; that is 32.02 percent of the population, 10 percent more than the official statistics.

Meanwhile, the virus is not only spreading in the Indian Ocean but has reached mainland France.

Faced with the magnitude of the crisis, the island has received four hurried visits by ministers: Health Minister Xavier Bertrand, Tourism Minister Léon Bertrand, Overseas Minister François Baroin and, finally, Prime Minister Dominique de Villepin, who spent the weekend of February 24 in Réunion. Villepin rejected the claim that he had underestimated the gravity of the epidemic by explaining that the new figures are due to “a devastating epidemic which considerably accelerated at the beginning of the year.... [T]he spread has taken us by surprise and exceeded the forecasts which were made by the experts.”

During his visit, the prime minister announced 76 million euros in aid to fight the epidemic. Sixty million is devoted to aid for companies, 9 million to research on the virus and 7 million for sanitary purposes. This is in addition to the 15 million euros announced last February to combat the disease.

The Réunion epidemic reveals, in a magnified way, the crisis of health care throughout France: overstretched hospitals, a lack of beds, a lack of resources and staff.

The island’s daily paper also points to the island’s “true crisis situation in public housing policy...whose daily consequences are severely felt by the people deprived of the right to housing.” Some 25,000 households have requested low-cost housing, while 24,000 dwellings have been deemed unfit for habitation, resulting in increasing overcrowding.

Réunion also suffers from a considerable lack of household drainage and sewage infrastructure. More than a third of the island’s housing is not connected to the sewage network. However, a local bylaw passed last November obliges all land occupants to eliminate from their property stagnant water, waste and overgrowth. “Failing which, the municipality will carry out the work at the expense of the owner and inflict a heavy fine.”

A large part of the population does not have sufficient means to protect themselves from chikungunya by following these guidelines for removing all things that contain water around houses in order to prevent the proliferation of a mosquito that is everywhere.

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