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**SPEECH BY ENCIK OTHMAN WOK, MINISTER FOR SOCIAL AFFAIRS,
AT THE OPENING OF THE "COMBAT INFECTIOUS DISEASES"
CAMPAIGN AT THE PASIR PANJANG COMMUNITY CENTRE ON
FRIDAY, 14 JANUARY 1977 AT 8.00 P.M.**

1 The "Combat Infectious Diseases" Campaign was launched in September 1976. The Exhibition was first held at the Singapore Conference Hall and it attracted large crowds who were lining up to gain admission. I was told that the focus of attraction was on the photographs on display, particularly on venereal diseases. I hope that those who attend the Exhibition will pay as much regard to the other infectious diseases which are on exhibition as they are equally important to understand and to prevent.

2 The six diseases that are highlighted in this Exhibition are venereal diseases (VD), tuberculosis, dengue haemorrhagic fever (DHF), leprosy, malaria and food-borne diseases. It is important for us to appreciate the causes, symptoms, control and prevention of these diseases. Medical health in Singapore is of a very high standard and all these diseases can be cured through early detection. However, the saying that 'Prevention is Better than Cure' still holds good in this respect. It would be better if the people in Singapore can take preventive measures so that they do not contract these diseases. They can also help to eradicate the

diseases by notifying the authorities of any cases they know or going for medical treatment if they or members of their family should unfortunately succumb to these diseases.

3 VD is still a serious problem in Singapore. If unchecked, those who suffer from the disease will be a danger to the public as well as to themselves. Those with the disease, if untreated, will suffer a very painful death in due course. In Singapore the situation of VD is just as serious as other parts of the world. In 1975 more than 12,000 patients were seen for either investigation or treatment for VD. 8,560 patients were treated for the illness. However, this is only the tip of the iceberg for the true incidence of syphilis and gonorrhoea is much higher as many sufferers prefer to see private medical practitioners for treatment. The estimate is that the actual rate could be twice as high for syphilis and between 3 to 4 times for gonorrhoea. About 69.4% VD patients treated at the Middle Road Hospital in 1975 were in the age group of 15 to 30 years. Those between 20 to 24 years or about 40% are the highest risk group.

4 The ultimate success of the control of VD would depend on the co-operation of the general public. Preventive measures should be taken to avoid coming into contact with the disease.

5 Tuberculosis still remains a serious public health problem. The number of cases each year has remained quite constant, around 3,000 each year. Deaths account for about 450 cases a year and this makes tuberculosis a major cause of death in Singapore in the past 20 years. Again the co-operation of everyone in the community is essential in the reduction of the incidence of the disease. Early detection of the disease will help to check the spread of the infection. Children in particular should have BCG vaccinations to prevent infection.

6 Dengue haemorrhagic fever (DHF) is endemic in Singapore. This is a virus disease transmitted by mosquitoes and is a leading cause of hospitalisation and death in children. In the last 10 years there have been outbreaks of DHF in Singapore. In 1973 a large outbreak occurred in which 1,255 cases were identified with 27 deaths reported. There is as yet no vaccine for the prevention of DHF and the most effective method in prevention and control of the disease is the prevention of mosquito breeding. All of us should be conscious of this problem and should prevent mosquito breeding within our premises.

7 It has been estimated that there are a total of about 15 million cases of leprosy in the world. Only about 25% of all cases are being treated.

This is largely due to the lack of knowledge of the disease and the prejudice against leprosy patients. This has led to most patients being unwilling to seek treatment openly for fear of rejection by the community.

8 Leprosy can be cured and the deformities and disabilities can be prevented if early treatment is sought.

9 Another mosquito-borne disease is malaria. About 80% to 90% of the 300 to 400 cases of malaria reported every year are brought in by infected persons who have contracted malaria outside Singapore. Those who travel should take adequate measures to ensure that they do not get mosquito bites when visiting foreign malaria-infected areas. Again those who show the symptoms of having contracted the disease should go immediately for treatment.

10 Food-borne diseases such as cholera, typhoid and food poisoning are diseases which can be prevented through good hygiene. Whilst adequate measures are taken by the authorities to ensure that hawkers and other food handlers observe good habits, every individual should ensure that only clean food is consumed. As long as poor personal and food hygieness occur, there will be higher risks of contracting food-borne diseases.

11 The Exhibition will give you information on each of the six infectious diseases which are prevalent in Singapore. We should try and

recognise the signs and symptoms of these diseases and to take the recommended preventive measures. There is still no substitution for prevention rather than cure. There is no blessing greater than good health and all the material gains in life will be meaningless if we are not in a good state of health to enjoy the fruits of our labour.