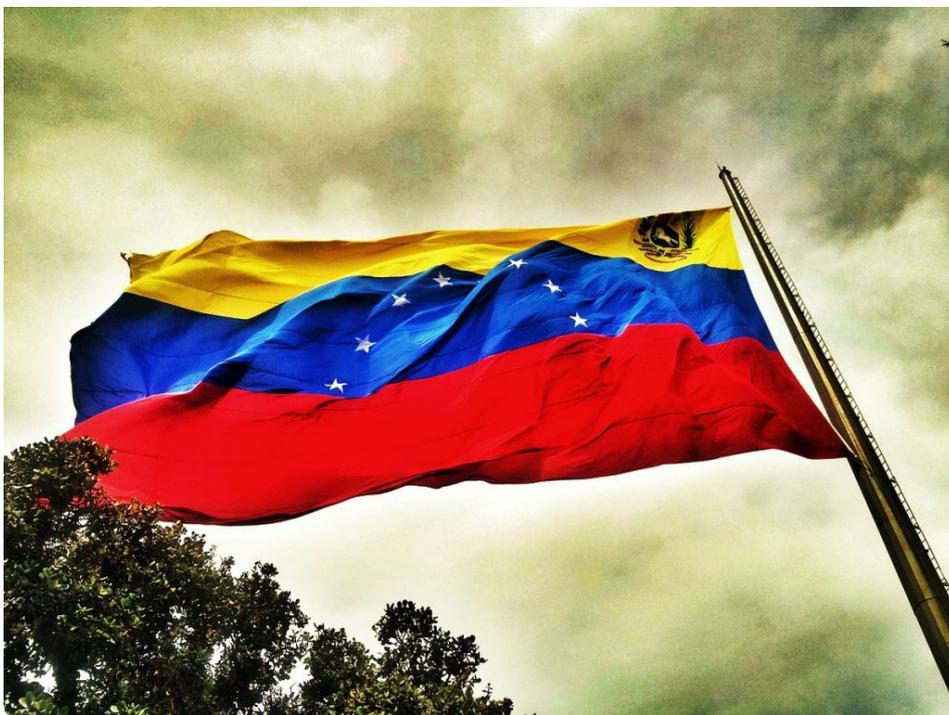


Venezuela Poses Health Risk in the Americas

The economic and political dimensions of Venezuela's collapse have dominated headlines, but the country is also being undermined by a healthcare crisis that could spread to all of Latin America. The situation in Venezuela demonstrates how failed government and economic collapse can lead to the unchecked spread of infectious disease, creating headaches across a region and beyond.



In a report published in the journal *Lancet Infectious Diseases*, lead author Dr. Martin Llewellyn of the University of Glasgow and colleagues size up the problem:

“The re-emergence of diseases such as malaria in Venezuela has set in place an epidemic of unprecedented proportions, not only in the country but across the whole region...”

“Based on the data we have collected we would urge national, regional and global authorities to take immediate action to address these worsening epidemics and prevent their expansion

beyond Venezuelan borders....

“These diseases have already extended into neighboring Brazil and Colombia, and with increasing air travel and human migration, most of the Latin American and Caribbean region (as well as some US cities hosting the Venezuelan diaspora, including Miami and Houston) is at heightened risk for disease re-emergence.”

Malaria is the leading disease threat, but cases of Chagas disease and dengue fever have also risen drastically in Venezuela and the surrounding region in recent years. There is also the potential for epidemics of Chikungunya and Zika, the report’s authors say. In 2014 there were an estimated 2 million suspected cases of chikungunya in Venezuela, more than 12 times the official estimate.

Chagas disease is a leading cause of heart failure in regions where it occurs, and malaria and dengue can lead to death if left untreated. Zika can cause health complications such as nerve damage and spinal cord inflammation. During pregnancy, it can cause congenital abnormalities in the developing fetus. The most recent study estimated that there now over 2,000 cases of Zika virus per 100,000 people in Venezuela (2% of the population). (Source: “Life-threatening, insect-borne diseases spike in Venezuela, report says,” ABC News, Feb. 21, 2019,” <https://www.nbcnews.com/news/latino/life-threatening-insect-borne-diseases-spike-venezuela-report-says-n974216>)

(For the recommendations of the Centers for Disease Control and Prevention (CDC) on travel to Venezuela, see “Health Infrastructure Breakdown in Venezuela,” <https://wwnc.cdc.gov/travel/notices/warning/health-infrastructure-breakdown-venezuela>.)

The Llewellyn report also conveys a sense of the desperate lengths to which the failed Maduro government will go to stifle efforts to right the situation in the country:

“Venezuelan clinicians involved in this study have also been threatened with jail, while laboratories have been robbed by militias, hard drives removed from computers, microscopes and other medical equipment smashed.”

Venezuela used to be one of the wealthiest nations in Latin America and was a leader in the public-health arena – so much so that in 1961 the World Health Organization certified it as the first country to eradicate malaria.

However, from 2010 to 2015, cases of malaria rose by 359%, from 29,736 to 136,402. By the close of 2017 they had grown to 411,586, as mosquito control efforts went by the wayside, a shortage of antimalarial drugs became chronic, and there was a mass exodus of healthcare workers from the country. (Source: “Venezuela crisis threatens disease epidemic across continent – experts,” The Guardian, Feb. 21, 2019, <https://www.theguardian.com/global-development/2019/feb/21/venezuela-crisis-threatens-disease-epidemic-across-continent-experts>)

The malaria outbreak is a sobering example of how political and economic dislocation can trigger a public-health crisis. As the Venezuelan economy collapsed, people flocked to the region near the southern border with Brazil, in order to dig for gold in wildcat mines. Unfortunately, pockets of malaria had survived in the jungle there, despite its official elimination nationwide.

The mining camps, with their pits of stagnant water, were an ideal breeding ground for mosquitos, and malaria soon ran rampant at many of the mines. And because work in the mines was transitory, workers returned home with malaria, and wide areas of the country were reinfected with malaria.

If you'd like to read my personal accounts investigating the spread and threat of the Zika virus which includes visits to Cuba and Argentina's three-country border region of Argentina,

Brazil, and Paraguay, please download the the free monograph pamphlet, "Zika," here: <https://www.cumber.com/zika/>

The Llewellyn report concludes with this call to action:

"We call on the members of the Organisation of American States and other international political bodies to apply more pressure to the Venezuelan government to accept the humanitarian assistance offered by the international community in order to strengthen the buckling health system. Without such efforts, the public health gains achieved over the past 18 years could soon be reversed."

We still don't know whether the Maduro government, with its military and bureaucratic backing, will continue to cling to power and take the country deeper into chaos, or whether Juan Guaidó, leader of the democratically elected National Assembly and "interim president," will prevail. For a good background on the crisis in Venezuela and the options available to the international community to address it, read or view the testimony of Marcela Escobari, senior fellow of the Brookings Institute Center for Universal Education, before the US House of Representatives Committee on Foreign Affairs on Feb. 26, 2018, available here: <https://www.brookings.edu/testimonies/made-by-maduro-the-humanitarian-crisis-in-venezuela-and-us-policy-responses/>.

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