

Biological Terrorism

Can Smallpox bio-warfare really happen?

As long as we have madmen like Osama Bin Laden and Saddam Hussien, and their “clones,” in this world, biological, chemical, atomic, nuclear and other warfare of mass destruction is a potential possibility. One fanatic person, with a pop-size canister of smallpox virus aerosol is enough to initiate a global epidemic of this deadly disease, which has been eradicated from around the world decades ago. The only declared reserves of the 120 smallpox viruses are supposed to be in 2 laboratories in the United States and Russia, but there is a suspicion today that Iraq might posses the smallpox virus as well. US President George W. Bush is making available smallpox vaccine to half a million healthcare workers, who would be the first ones most exposed to the smallpox virus if such a warfare should strike. For every 5 million vaccinated, an estimated 52 will have life-threatening complications, from which two will die. This risk is very small compared to the danger of developing smallpox, which kills at least 33% of those infected. It is obvious, and imperative, that the campaign being waged by the United States and the Great Britain, and their allies, against weapons of mass destruction in any country, and their final elimination from the face of the earth, succeed at the earliest possible time. Indeed, they deserve the world’s support.

Is there a do-it-yourself heart shocker?

Yes, there is. Seventy percent of cardiac arrests happen at home. Every restaurant, shopping center, theatres, and other public places, should be equipped with one, if we are to save more lives from heart attack and fatal cardiac rhythm disorder. The portable cardiac defibrillator is a unit that delivers electric shock to the heart when applied to the mid-chest and triggered with a button. This re-starts the heart beat. The window of opportunity for a successful cardiac “jump-start” is only about 3 minutes. For every one minute delay, there is 10% less chance for the heart to beat again after an arrest. After 10 minutes, the chance is practically zero. The new portable “do-it-yourself” home model is called HeartStart Home Defibrillator, manufactured by Philips Electronic, and costs about \$2,300. It requires a prescription from a physician. Obviously, the patient, who is disabled by the heart attack, cannot do it on himself/herself. The use of this device requires a quick 4-hour CPR training, which includes mouth-to-mouth resuscitation (to provide oxygen to the victim), a most vital, and indispensable, part of the CPR. Without breathing oxygen into the patient every 5 seconds or so, other measures, including defibrillation, will fail. But the very first thing for a relative or a bystander to do when someone is having a heart attack is to call 911 for emergency

help, while another person, if available, starts CPR immediately, if the victim is not breathing or has passed out.

Are our school-age children overweight?

More than 30% of the school-age children are overweight, says the American Academy of Pediatrics. This fact appears to be true even in Asian countries like the Philippines. Type 2 diabetes, which is weight-related, among these children is increasing. In the past, Type 1 diabetes, due to malfunctioning pancreas, was the predominant type of diabetes among children. Today, it is Type 2 diabetes, obviously due to the fact that there are presently more overweight school-age children. And, of course, overweight in children is mostly due to overeating, or more accurately, she we say, over-feeding by us, the parents. As we have stated before, let us stop killing our children because of love.

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