"Ten get it, nine die"

Kari Huus

When 67-year-old Zheng Xumin developed a stubborn cough last year, he thought he had a cold. So the retired professor from Beijing took a month-long beach vacation, during which he may have spread tuberculosis far and wide, because upon his return to the capital Zheng was diagnosed with the disease. Six months later he was cured — and that made him one of the lucky ones. TB still kills about 250,000 people a year in China, most of them peasants. In the Chinese countryside, they have a saying: "Ten get it, nine die."

The Chinese government in Beijing is working to prove the saying wrong. With technical guidance from WHO, close supervision, and a US$55 million loan from the World Bank, the Ministry of Public Health has launched a programme aimed at halving the prevalence rate from the current 134 cases per 100,000 inhabitants by the year 2000. The "barefoot doctors" (rural health workers) are paid about US$1 for each TB case they detect, and for each patient who successfully follows a full regimen of drug therapy they receive a $10 bonus. The incentives are paying off: in the participating counties, as many TB cases were spotted in one quarter of 1992 as in all of 1991. Of those, 90% were cured.

Interruptions in treatment still appear to be the norm in many places not yet covered by the project: many TB sufferers quit taking costly drugs as soon as the symptoms disappear. In an impoverished mountain village 100 km south-west of Beijing, 32-year-old Wei Yidaow has had TB since 1989. Sporadically he takes rifampicin. But it costs $3.75 a bottle, and he can’t afford it: Wei and his parents live on only $240 a year. "He takes drugs for a while and he gets a little better," says the village doctor Zhang Shugui. "Then he stops." Meanwhile Wei is infecting others. His 62-year-old mother contracted TB six months ago and her chances of survival seem slim.

Many cases in China escape the attention of medical workers. Hundreds of thousands of peasants move to the cities each year, many without the required residence permits. Some are afraid to get caught, so they won’t register for TB treatment, according to one Beijing physician; or they have no fixed residence, so it’s difficult to supervise the treatment. The government’s project has been a success so far in the provinces where it has been started. It has now to master the challenges of reaching all the counties, and especially the poorest where disease rates are often highest.

Kari Huus in Beijing wrote this article for the 17 May 1993 issue of Newsweek. It has been slightly adapted, with the kind permission of Newsweek.

Health workers cover a lot of ground to offer treatment and advice to people in their homes.