

## Environmentalist fraud and manslaughter

In the name of banning DDT, GEF bureaucrats are consigning millions to death from malaria

Paul Driessen

Many chemotherapy drugs for treating cancer have highly unpleasant side effects – hair loss, vomiting, intense joint pain, liver damage and fetal defects, to name just a few. But anyone trying to ban the drugs would be tarred, feathered and run out of town. And rightly so.

The drugs' benefits vastly outweigh their risks. They save lives. We need to use chemo drugs carefully, but we need to use them.

The same commonsense reasoning should apply to the Third World equivalent of chemotherapy drugs: DDT and other insecticides to combat malaria. Up to half a billion people are infected annually by this vicious disease, nearly a million die, countless survivors are left with permanent brain damage, and 90% of this carnage is in sub-Saharan Africa, the most impoverished region on Earth.

These chemicals don't cure malaria – they prevent it. Used properly, they are [effective, and safe](#). DDT is particularly important. Sprayed once or twice a year on the inside walls of homes, DDT keeps 80% of mosquitoes from entering, irritates those that do enter, so they leave without biting, and kills any that land. No other chemical, at any price, can do this.

Even better, DDT has [few adverse side effects](#) – except minor, speculative and imaginary “risks” that are trumpeted on anti-pesticide websites. In the interest of saving lives, one would think eco activists would tone down their “ban DDT” disinformation. However, that is unlikely.

Anti-DDT fanaticism built the environmental movement, and gave it funding, power and stature it never had before. No matter how many people get sick and die because health agencies are pressured not to use DDT, or it is totally banned, Environmental Defense, Sierra Club, Greenpeace, Pesticide Action Network, and allied activist groups will never reform or recant.

Government agencies – including the US Environmental Protection Agency, National Institutes of Environmental Health Sciences, and Agency for Toxic Substances and Diseases Registry – will likewise continue pouring hundreds of millions of taxpayer dollars into anti-DDT research, in futile attempts to prove DDT causes some sort of meaningful harm. And the malaria death toll will continue to mount.

Worse, they have now been joined by the United Nations Environment Program, Global Environment Facility and even World Health Organization Environmental Division – all of whom share the avowed goal of ending all DDT production by 2017, and banning all use of DDT in disease control by 2020.

A recent GEF “study” demonstrates how far they are willing to go, to achieve this goal, no matter how deadly it might be. The study purported to prove DDT is no longer needed and can be replaced by “integrated and environment-friendly” alternatives: for example, mosquito-repelling trees, and non-chemical control of breeding sites and areas around homes that shelter insects.

The \$14-million study claimed that these interventions resulted in an unprecedented “63% reduction in the number of people with [malaria], without using DDT or any other type of pesticide.” However, as analyses by malaria and insecticide experts Richard Tren and Dr. Donald Roberts clearly demonstrate (see [Research and Reports in Tropical Medicine](#) and [AEI Outlooks](#)), the study, conclusions and policy recommendations are not merely wrong. They are deliberately misleading and fraudulent.

GEF did its 2003-2008 study in Mexico and seven Central American countries – all of which had largely ceased using DDT and other pesticides years before the GEF project. Instead of chemical sprays, these countries now employ huge numbers of chloroquine and primaquine (CQ and PQ) pills to prevent and treat malaria: 2,566 pills per diagnosed case in Mexico; 22,802 pills (!) in El Salvador; 50 to 1,319 pills per case in the other countries, according to 2004 health records.

It was these powerful drugs, not the “environment-friendly” GEF interventions, that slashed malaria rates. Indeed, they had begun to do so before GEF even arrived. This terribly inconvenient reality was further underscored by the fact that malaria rates were the same in “study” areas and “control” areas, where GEF did nothing – and that the number of malaria cases increased when the number of pills per case decreased. In other words, GEF could have gotten its same results using one bed net or one larvae-eating fish.

GEF’s fraudulent claims were then compounded by its insistence that the results and conclusions are relevant to other malaria-endemic regions. They are not. Malaria parasites in Latin American countries are *Plasmodium vivax*; in Africa and Southeast Asia, they are the far more virulent *P. falciparum*.

CQ and PQ are effective in preventing and treating *vivax*; they rarely prevent or cure *falciparum* malaria. Moreover, the eight Latin American countries have 140 million people. Sub-Saharan Africa has 800 million and a woeful medical and transportation infrastructure; Southeast Asia has 600 million people. Both have infinitely more malaria. Getting adequate medicines that work (far more expensive Artemisia-based ACT drugs) to 1.4 billion people would be a budgetary, logistical and medical impossibility.

But apparently none of these facts occurred to the bureaucrats who did this study. That’s hardly surprising, since the project was designed and directed, not by disease control experts, but by the UNEP and radical environmental groups – which also spent millions distributing and promoting the study and other anti-DDT propaganda all over the world, ensuring that they received substantial media attention.

Anti-pesticide fanatics know this “study” is fraudulent. They just have a very high tolerance for how many malaria cases, brain-damaged people and dead babies are “acceptable” or “sustainable.” They just don’t care enough to bother learning basic facts about malaria, CQ versus ACT, *vivax* versus *falciparum*. They need to get out of the malaria control policy business and let medical professionals do their jobs.

(To learn more about stopping malaria, see Tren and Roberts’ book [The Excellent Powder](#), Dr. Rutledge Taylor’s documentary film [“3 Billion and Counting,”](#) and the website for [Africa Fighting Malaria.](#))

The final report claims its authors submitted manuscripts to prominent peer-reviewed medical journals. However, nothing was ever published. That suggests that they lied, and never submitted any manuscripts; or they did submit papers, but the manuscripts were rejected as being shoddy, unprofessional, unscientific, or even on par with Andrew Wakefield’s fraudulent vaccine-and-autism work.

To cap it all off, the bogus GEF project appears to have been conducted using funds diverted from already insufficient malaria control budgets. The GEF, UNEP, Stockholm Convention Secretariat and radical environmental groups are using money intended for malaria control to launch anti-pesticide programs in countries plagued by malaria, and gain control over public health policies, insecticides and programs.

Overall, the GEF has spent over \$800 million on efforts to eliminate DDT and other “persistent organic pollutants” (POPs). It budgeted nearly \$150 million in 2007 alone on its campaign to ban DDT production and use – but spent a lousy \$22 million researching alternatives to DDT for vector control.

Until an equally effective and long-lasting substitute for DDT is developed – one that repels, irritates and kills mosquitoes – this vital weapon needs to remain in the disease control arsenal.

The GEF, UNEP, POPs Secretariat and WHO need to withdraw the study; discipline the people who perpetrated this fraud; retract World Health Assembly Resolution 50.13, calling for malaria-infested countries to slash their use of public health insecticides; and issue a statement making it absolutely clear that this “study” was erroneous and deceptive, and should not be considered in setting malaria policies.

Donors to the GEF and radical groups must be exposed. For activists and agencies to continue promoting this study or demand that malaria-endemic countries stop using DDT and insecticides, and adopt bogus “eco-friendly” GEF “solutions,” is gross medical malpractice – and deliberate manslaughter.

Malaria can be controlled, and even eradicated in many areas. We simply need to use every available weapon – including DDT, pesticides, nets, window screens, drugs and other interventions – in an orderly,

coordinated and systematic manner; and ensure that mosquito infestations, disease outbreaks, malaria control successes and problems are monitored and evaluated accurately and honestly.

If we do that – and end the anti-pesticide hysteria – we can get the job done.

Paul Driessen is senior policy advisor for the Committee For A Constructive Tomorrow and Congress of Racial Equality, and author of *Eco-Imperialism: Green power - Black death*.