

Tourists to the Caribbean should pay 1 dollar each to help fight tropical diseases of poverty

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Away from the beaches, resorts, and cruise ships of the Caribbean, there lies a hidden underbelly of poverty and with this poverty comes endemic neglected tropical diseases (NTDs). In an editorial in this month's *PLoS Neglected Tropical Diseases*, the journal's Editor in Chief, Professor Peter Hotez (George Washington University and Sabin Vaccine Institute) proposes that a modest US \$1.00 airline or cruise ship tax or a tax on tourist entry could provide a funding mechanism for the Caribbean countries to control these NTDs.

Almost 22 million visitors come to the Caribbean annually, where they spend an estimated US\$21.6 billion. And yet, says Professor Hotez, "despite the enormous amount of wealth infused into the Caribbean economy every year through tourism, very little if any trickles down to the poorest people in the region who suffer daily from chronic, debilitating, disfiguring, and stigmatizing NTDs."

Four Caribbean countries in particular have a high burden of NTDs: Dominican Republic, Guadeloupe, Haiti, and Jamaica. For example, out of a population of 8.1 million people, Haiti is estimated to have 3.8 million cases of whipworm (trichuriasis), almost 800,000 cases of hookworm, and 560,000 cases of the parasitic disease lymphatic filariasis, which can cause elephantiasis.

In addition to lymphatic filariasis, the Caribbean region also has high rates of schistosomiasis and of the intestinal worm hookworm. These diseases were most likely introduced into the Caribbean through the Atlantic slave trade and even today such infections still occur almost exclusively among people living in poverty or people of African descent.

It is tragic, says Professor Hotez, that the burden of these NTDs is so enormous, given how cheap it

would be to control them. For example, a project in Leogane, Haiti found that giving two drugs (DEC and albendazole) every year to the whole community led to near elimination of lymphatic filariasis after five rounds of treatment. DEC costs pennies, while albendazole is donated free-of-charge by its manufacturer GlaxoSmithKline.

"Given that industry is either donating the NTD drugs, or they are available as low-cost generic drugs," says Professor Hotez, "these last vestiges of American slavery could be controlled or eliminated for a ridiculously small amount."

In addition to his proposal of a \$US 1.00 tourist tax, Professor Hotez puts forward several other possible funding mechanisms, including increased funding commitments by local governments, or donations from North American and European governments and private foundations.

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