

WMA DECLARATION OF MONTEVIDEO ON DISASTER PREPAREDNESS AND MEDICAL RESPONSE

Adopted by the 62nd WMA General Assembly, Montevideo, Uruguay, October 2011

In the last decade, the attention of the world has been drawn to a number of severe events which seriously tested and overwhelmed the capacity of local healthcare and emergency medical response systems. Armed conflicts, terrorist attacks and natural disasters such as earthquakes, floods and tsunamis in various parts of the world have not only affected the health of people living in these areas but have also drawn the support and response of the international community. Many National Medical Associations have sent groups to assist in such disaster situations.

According to the World Health Organization (WHO) Center for Research on the Epidemiology of Disasters (CREDE), the frequency, magnitude, and toll of natural disasters and terrorism have increased throughout the world. In the previous century, about 3.5 million people were killed worldwide as a result of natural disasters; about 200 million were killed as a result of human-caused disasters (e.g., wars, terrorism, genocides). Each year, disasters cause hundreds of deaths and cost billions of dollars due to disruption of commerce and destruction of homes and critical infrastructure.

Population vulnerability (e.g., due to increased population density, urbanization, aging) has increased the risk of disasters and public health emergencies. Globalization, which connects countries through economic interdependencies, has led to increased international travel and commerce. Such activity has also led to increased population density in cities around the world and increased movement of people to coastal areas and other disaster-prone regions. Increases in international travel may speed the rate at which an emerging infectious disease or bioterrorism agent spreads across the globe. Climate change and terrorism have emerged as important global factors that can influence disaster trends and thus require continued monitoring and attention.

The emergence of infectious diseases, such as H1N1 influenza A and severe acute respiratory syndrome (SARS), and the recent arrival of West Nile virus and monkey pox in the Western hemisphere, reinforces the need for constant vigilance and planning to prepare for and respond to new and unexpected public health emergencies.

The growing likelihood of terrorist-related disasters affecting large civilian populations affects all nations. Concern continues about the security of the worldwide arsenal of nuclear, chemical, and biological agents as well as the recruitment of people capable of manufacturing or deploying them. The potentially catastrophic nature of a "successful" terrorist attack configures an event that may demand a disproportionate amount of resources and healthcare professionals preparedness.. Natural disasters such as tornadoes, hurricanes, floods, and earthquakes, as well as industrial and transportation-related catastrophes, are far more common and can also severely stress existing medical, public health, and emergency response systems.

In light of recent world events, it is increasingly clear that all physicians need to become more proficient in the recognition, diagnosis, and treatment of mass casualties under an all-hazards approach to disaster management and response. They must be able to recognize the general features of disasters and public health emergencies, and be knowledgeable about how to report them and where to get more information should the need arise. Physicians are on the front lines when dealing with injury and disease-whether caused by microbes, environmental hazards, natural disasters, highway collisions, terrorism, or other calamities. Early detection and reporting are critical to minimize casualties through astute teamwork by public- and private-sector health and emergency response personnel.

The WMA, representing the doctors of the world, calls upon its members to advocate for the following:

- To promote a standard competency set to ensure consistency among disaster training programs for physicians across all specialties. Many NMAs have disaster courses and previous experiences in disaster response. These NMAs can share this knowledge and advocate for the integration of some standardized level of training for all physicians, regardless of specialty or nationality.
- To work with national and local governments to establish or update regional databases and geographic mapping of information on health system assets, capacities, capabilities, and logistics to assist medical response efforts, domestically and worldwide, when needed. This could include information on local response organizations, the condition of local hospitals and health system infrastructures, endemic and emerging diseases, and other important public health and clinical information to assist medical response in the event of a disaster. In addition, systems for communicating directly with physicians and other front line

health care providers should be identified and strengthened.

- To work with national and local governments to ensure the developing and testing of disaster management plans for clinical care and public health including the ethical basis for delivering such plans.
- To encourage governments at national and local levels to work across normal departmental and other boundaries in developing the necessary planning.

The WMA could serve as a channel of communication for NMAs during such times of crisis, enabling them to coordinate activities and work together.