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Tropical Medicine—New Vigor

There is a new intensity of interest in international health. An initial focus seems to be on biomedical research. New directions are being considered within our government; the Committee on International Health of the Institute of Medicine is preparing a report at the request of Congress; and a number of other groups, such as the Rockefeller Foundation and the Institute of Society, Ethics and the Life Sciences, are looking again at international health as an area ripe for new thinking and initiatives. Beyond this, the World Health Organization has recently launched a Special Programme for Research and Training in Tropical Diseases, and a goodly number of U.S. investigators are already involved in this major scientific assault on diseases primarily found in the tropics.

The idea of blending science and technology into an international initiative is by no means original. However, in this decade biomedical research has not been a major force in American foreign policy. It is true that a number of bilateral and international programs are well under way, but one is impressed that these most often derive from other efforts rather than muster the initiative in their own right. Thus, there remains a challenge to construct an effective and truly integrated alliance with foreign policy.

International health comprises a natural and comfortable combination of science and technology with humanitarian concern. It is a truism that neither health nor illness recognizes national borders, although it is also obvious that much disease has a definable cartographic distribution. But one might say that the somewhat descriptive field of geographic pathology is being broadened into "geographic medicine" through forces of political, social, and economic origin. The diseased and deprived whole human—not just the parasitic granulomas in his liver or the lepromas in his skin—is becoming of paramount concern. The existing scientific base in rapidly moving fields such as immunology, cell biology, and genetics could well serve as the foundation on which to forge a new initiative in tropical medicine. Indeed, the ultimate success of the enterprise may depend on attracting new investigators to work in fields such as tropical medicine—for example, through the creation of new faculty positions at institutions. Such an infusion of new scientific blood from a diversity of disciplines is important to this relatively neglected area of biomedical research.

In terms of support, perhaps what is required is not so much a great gush of money, but rather modest resources coupled with substantially enhanced authority and an opportunity to work in an international setting. This might increasingly take place within the framework of multinational organizations such as the World Health Organization. A "people intensive" approach in international health research may make very good sense not only in terms of biomedical science, but also from a humanitarian perspective. No longer may American scientists who work overseas simply retreat to our shores with a trophy room full of specimens and data; instead, they must construct continuing scientific linkages and mutually productive partnerships.

Although we will need to engage more of our best minds in research in tropical medicine, there is already a growing interest in the immunologic response to parasitic infections, and the study of relationships between cell competence and malnutrition is generating excitement. Indeed, for the newly trained investigator making his way, the scientific rewards are there. With wide scientific opportunity as well as international humanitarian appeal, it should be possible to generate renewed interest among "good people." If we put our minds to it, the next decade may well see research in tropical medicine come to the forefront in the search for new knowledge.—HOWARD A. MINNERS, *Associate Director for International Research, National Institute of Allergy and Infectious Diseases, National Institutes of Health, Bethesda, Maryland 20014*