N° 1370.

POLOGNE ET TCHÉCOSLOVAQUIE

Convention sanitaire. Signée à Prague, le 5 septembre 1925.

POLAND AND CZECHOSLOVAKIA

Sanitary Convention. Signed at Prague, September, 5, 1925.

¹ Translation.

No. 1370. — SANITARY CONVENTION BETWEEN THE POLISH REPUBLIC AND THE CZECHOSLOVAK REPUBLIC. SIGNED AT PRAGUE, SEPTEMBER 5, 1925.

The Polish Republic and the Czechoslovak Republic, being desirous of protecting public health within their territories, have agreed to conclude a sanitary convention, and for this purpose have appointed as their Plenipotentiaries:

THE PRESIDENT OF THE POLISH REPUBLIC:

Dr Zygmunt Lasocki, Envoy Extraordinary and Minister Plenipotentiary of the Polish Republic at Prague;

THE PRESIDENT OF THE CZECHOSLOVAK REPUBLIC:

Dr Václav Girsa, Envoy Extraordinary and Minister Plenipotentiary of the Czechoslovak Republic at Warsaw;

Who, having exchanged their full powers, found in good and due form, have agreed upon the following Articles:

I.

OBLIGATIONS OF THE CONTRACTING PARTIES IN THE EVENT OF AN OUTBREAK OF INFECTIOUS DISEASE WITHIN THEIR RESPECTIVE TERRITORIES.

Article T.

Each of the Contracting Parties shall notify the other Party, as far as possible by telegraph, of the first case of cholera or of plague reported within its territory, and of any strongly suspected cases.

Further, each of the Contracting Parties shall likewise inform the other Party of the first case of cholera or plague which is subsequently observed in a new district.

The two Contracting Parties shall likewise notify each other of any spread of typhus fever or relapsing fever having an epidemic character.

The notification should give the following particulars:

- (1) Name of disease, and form in which it appears;
- (2) Place and date of outbreak;(3) Origin and source of disease;
- (4) Number of cases and deaths;
- 5) Locality or administrative unit infected;
- (6) Action taken.

The disease shall be indicated by its recognised Latin scientific name.

¹ Translated by the Secretariat of the League of Nations.

Article 2.

In addition to the immediate notifications provided for in Article I, the two Contracting Parties shall also send reports, at least once a week, on the subsequent course of the disease notified, the measures taken, and any circumstances which may be of epidemiological importance.

The weekly reports should correct any errors or inaccuracies which may have found their way into previous reports.

Article 3.

In addition to the reports provided for in Articles 1 and 2, each Contracting Party undertakes to communicate regularly to the other all publications issued by the central health authorities concerning the state of public health, and particularly the progress of any infectious diseases.

If, within the territory of one of the Contracting Parties, a disease which does not usually break out and never assumes an epidemic form there, should break out or assume an epidemic form, the said Party shall be obliged to give the other Party all particulars in its possession.

Article 4.

When one of the Contracting Parties is informed of the outbreak of one of the diseases specified in Article I within a district belonging to a neighbour of one or both of the two Contracting Parties, and has taken all necessary measures, it shall be bound to notify the other Contracting Party immediately, giving at the same time information as to action taken and the circumstances which have given rise to such action.

Article 5.

The notifications provided for in Articles 1, 2, 3, and 4, shall be transmitted directly by the central health authorities of the informing Party to the central health authorities of the other Contracting Party, independently of the diplomatic channel.

The Party infected shall also make a similar notification to the Health Section of the League

of Nations at Geneva.

Article 6.

The present Convention may, by common consent, be extended to other diseases not specified in Article 1.

Article 7.

Should either of the Contracting Parties think fit to attach a medical officer to its diplomatic staff in the capital of the other Party, the Central Health Department of the latter Party shall afford this officer all necessary facilities that will enable him to keep in touch with the epidemic situation in the country and with all other questions affecting the public health of his own country.

II.

Measures to be taken with regard to infected areas.

Article 8.

Each of the Contracting Parties shall be entitled to take, with regard to areas infected by a disease specified in Article 1, the measures provided for in Articles 10 to 18, provided that these measures are applied only to travellers and goods coming from the affected areas, and that the conditions mentioned in Article 9 are fulfilled.

Article 9.

Only an administration unit — a district (powiat, okres) or an urban or rural commune —

may be declared an infected area.

A district may be declared infected: with cholera, when an epidemic focus has been formed; with typhus fever or relapsing fever, when it is spreading in epidemic form; with plague, when one or more non-imported cases have been observed.

Article 10.

Notification that a territorial unit has been declared infected, and that measures have been taken to prevent the introduction of the contagious diseases from the infected area, shall be made in conformity with the provisions of Article 5.

Article TI.

A district or an urban or rural commune which has been declared infected under Article 8 shall be considered free of all infection, in the case of cholera or of plague on an official declaration that five days have elapsed since the death or isolation of the last case; in the case of typhus fever and relapsing fever, if a decrease in the number of cases, or the defection of sporadic cases, permits of the conclusion that the disease has lost its epidemic character.

Article 12.

The following measures for preventing the introduction of the infectious diseases specified in Article I are recognised by the present Convention:

Official medical inspection and examination;

(2) Evacuation and isolation of cases or suspected cases;

(3) Disinfection and delousing of persons and luggage;

(4) Disinfection of goods, and, in the case of plague, destruction of rats; (5) Refusal of admittance to persons who have not been vaccinated;

(6) Health propaganda.

Article 13.

Persons coming from infected areas, and persons in whom symptoms of one of the diseases specified in Article I have been observed, or who are suspected of one of these diseases, shall be subjected to medical inspection and examination at the frontier.

Persons crossing the frontier in groups or in bands under unhealthy condition may be subjected by the health authorities to medical inspection and examination.

Persons suspected of cholera or plague may be subjected, if necessary, to bacteriological examination.

Article 14.

Persons who after medical examination are ascertained to be or are suspected of suffering from disease shall be isolated by the health authorities of the competent State for care in institutions established for this purpose, where they will remain until their complete recovery or until a final diagnosis has been made.

Persons in good health shall not be detained under observation.

Persons coming from infected areas, or having been in contact with persons suffering from one of the diseases mentioned in Article I, shall be subjected at the end of their journey to medical supervision for a period not exceeding in the case of cholera or plague five days, of relapsing fever eight days, and of typhus fever fourten days, from the date of their leaving the infected area or of the disease being detected at the frontier.

For this purpose, such persons may be required to report to the competent health authorities on arrival at their destination.

Article 15.

Employees of the health authorities, railway and navigation companies, the postal and telegraphic administration, and the Customs, shall not be subjected to health measures unless the persons in question are plainly suffering from one of the diseases specified in Article 1.

The same rule shall apply to persons crossing the frontier in possession of diplomatic passports or *lettres de mission* from one of the Contracting Parties.

Article 16.

Personal luggage coming from infected areas, with the exception of luggage belonging to persons mentioned in Article 15, may be subjected to disinfection whenever the health authorities shall think it necessary.

In the case of persons crossing the frontier in groups or bands, general disinfection or delousing may be ordered if medical inspection shows this to be necessary. In the case of typhus fever or relapsing fever, orders may be given for the cleansing by suitable means of the persons (baths and haircuts) and the luggage.

Article 17.

Goods shall only be subjected to disinfection when the sanitary authorities detect clear signs

of infection on them or their packing.

The following goods coming from a district infected by one of the diseases specified in Article I may likewise be subjected to disinfection, or their importation without previous disinfection may be forbidden:

(r) Clothing, linen, and bedding which have been worn or used.

When these articles are conveyed as personal luggage, or in consequence of the owner changing his place of residence, their importation shall not be forbidden, and the measures provided in Article 16 shall be taken with regard to them.

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- (2) Rags, with the exception of rags packed in hooped bales. The importation of the following may not be forbidden:
 - (1) Unused clippings, coming directly from textile factories, spinning-mills, ready-made clothing factories and bleaching-works, and also artificial wool and pieces of unused paper.
 - (2) Letters, post-cards, printed matter, books, pamphlets, commercial documents, etc., excluding postal packets containing articles mentioned in sub-paragraphs (1) and (2) of the second paragraph of the present Article.

The place and manner of disinfection shall be determined by the authority of the country of destination.

Disinfection shall be effected in such a way as to damage the disinfected goods as little as

possible.

The transit of goods through the territory of one of the Contracting Parties may not be forbidden if the goods are suitably packed. Such goods shall not be subjected to any disinfection.

Article 18.

Persons coming from districts infected with cholera may be required to submit to prophylactic vaccination against cholera. Admission to the country may be refused to persons who have not been vaccinated. Vaccination may be proved by a certificate issued by a medical officer in the country of origin.

When cases of cholera are detected among groups of persons arriving at the frontier, members of these groups may be compelled to undergo double vaccination against cholera. For this purpose, the said persons may be detained at the frontier station of the country of destination.

Permission to continue the journey may be refused to persons who will not submit to ν cc nation.

Article 19.

Being convinced that the measures taken to protect public health can only be effective if the public, and particularly the employees of railway and steamship companies, are to understand the purpose of these measures, the Contracting Parties undertake to give such employees all necessary explanations regarding the infectious diseases and the manner in which they spread, as well as the practical means of combating them; they also undertake to inform travellers and the population of contiguous territories of the importance of the health measures which have been taken.

III.

RAILWAYS AND OTHER MEANS OF COMMUNICATION.

Article 20.

Persons arriving at the frontier by railway and their luggage shall be treated in accordance with the provisions of Article 12 of the present Convention. The sanitary measures prescribed shall, however, be applied in such a way as not to impede railway traffic. For this purpose, the Contracting Parties shall be required to establish at the frontier stations suitable medical observation posts.

Article 21.

The Contracting Parties undertake.

- (1) To maintain the rolling-stock for use in frontier traffic in a perfect state of cleanliness, and to arrange, where necessary, for the disinfection, delousing and deratting of such rolling-stock.
- (2) To maintain a rigorous sanitary supervision of frontier stations and the approaches to such stations, to ensure that the stations shall be provided with good drinkingwater; to maintain in a state of cleanliness all lavatories in the trains and stations, and to ensure the cleanliness of refreshment-rooms and prohibit, during an epidemic of cholera, the sale of goods which might spread the infection.
- (3) To make the necessary arrangements, at the frontier stations administered by the Contracting Parties, to ensure that persons suffering from any of the diseases specified in Article I shall be isolated in good time, and that the sanitary measures required under the circumstances shall be duly taken.

The Contracting Parties undertake to keep each other informed of cases which have broken out, in accordance with the provisions of Article 28.

Article 22.

When a person suffering from one of the diseases specified in Article r is found in a train which has crossed the frontier, the carriage or compartment shall be disinfected by the competent authorities of the country, and the carriage shall if necessary be disconnected.

Passengers who have come into contact with the patient shall be subjected to medical inspection. Persons found to be in good health shall not be detained, but their luggage may be disinfected. In the case of typhus fever or relapsing fever, passengers and their luggage may be deloused.

Article 23.

The provisions of the present Convention shall apply equally, *mutatis mutandis*, to travellers, luggage and goods, transported by land, river, or air.

IV.

FRONTIER SANITARY OBSERVATION POSTS.

Article 24.

With a view to ensuring the application of the sanitary measures provided for in the present Convention, sanitary observation posts shall be established. These posts shall be provided with everything necessary for the isolation and treatment of patients, disinfection and delousing; they shall also be provided with baths.

When sanitary observation posts are established, the volume of passenger and goods traffic shall be taken into account in order that the application of sanitary measures may not affect the regularity of the traffic.

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Article 25.

The Contracting Parties shall, after agreement has been reached between the central health authorities of the two countries, determine the points on or near the frontier where, in the event of an epidemic, sanitary observation posts are to be established under the authorities of the country in whose territory they are situated.

The Contracting Parties may temporarily close the frontier to passengers and goods coming from a country or certain parts of a country at points where the establishment of sanitary obser-

vation posts would meet with serious difficulties.

This measure may only be taken to counteract the threat of an epidemic of one of the diseases mentioned in Article 1. The Contracting Parties undertake to give each other eight days' notice of their intention to apply this measure.

The Contracting Parties undertake, however, to facilitate the passage of travellers and goods through other sanitary observation posts.

Article 26.

No charge shall be made to travellers for medical aid given them in virtue of the present Convention at frontier sanitary observation posts, for the isolation in hospital of travellers suspected of a disease specified in Article I, or for expenses incurred through the application of the sanitary measures provided for in the present Convention. The expenses mentioned shall be a charge on the State in whose territory such measures have been taken, unless in virtue of local legislation they are a charge on the budget of autonomous bodies or other juridical or natural persons.

Fees for disinfection, delousing and deratting shall only be charged on goods which have been subjected to this measure in conformity with the provisions of the present Convention, and only up to the actual cost-price of the material used. The Contracting Parties shall inform each other within a suitable period of the amount of these fees.

V.

SPECIAL MEASURES TO BE TAKEN WITHIN THE FRONTIER ZONE.

Article 27.

A belt of territory consisting of districts (powiats, okres) contiguous to or situated within five kilometres of the frontier shall be considered the frontier zone.

Within a month from the date on which the present Convention comes into force, the Contracting Parties shall communicate to each other a list of such districts and a list of the health authorities established therein.

Article 28.

Apart from notifications exchanged between the Contracting Parties in virtue of Articles 1, 2, 3, and 4 of the present Convention, the health authorities within the frontier zones of the two Parties shall communicate to each other directly information regarding the health situation in their respective areas.

This information shall include:

- (1) The first case reported of a disease specified in Article 1;
- (2) The subsequent progress of cases notified (these reports should be made periodically, at least once a week);
 - (3) Action taken.

Further, the health authorities in the frontier zone shall communicate to each other at least once a week the particulars specified in Article I with regard to any other infectious diseases known to exist within the frontier zone.

Article 29.

Should there be an outbreak of cholera, plague, typhus fever or relapsing fever, or an epidemic of any other infectious disease, the health authority responsible for the infected area shall permit the health authority of the neighbouring area of the other Contracting Party to send an official to collect information on the spot with regard to the epidemic.

In such cases the health authority concerned shall notify the health authority of the infected area of the facts on which it is desired to obtain information on the spot. The latter authority shall on request fix the date at which the health authorities of the other Party may send the official responsible for making an investigation on the spot in conjunction with the local authority.

The frontier health authorities of both Contracting Parties shall co-operate for the protection of public health and the prevention of infectious diseases, and shall assist each other when requested.

Article 30.

The sanitary measures provided for in the present Convention for railways and other means of communication shall likewise apply to local railway traffic and local road and water traffic.

The Contracting Parties, however, undertake to facilitate frontier traffic by only applying such measures provided for in the present Convention as may prove indispensable.

Article 31.

In the event of an outbreak of cholera within the frontier zone the importation of raw fruit, vegetables, and dairy produce from infected frontier areas may be prohibited.

Article 32.

In the case of an epidemic of cholera, typhoid fever or dysentery, the Contracting Parties undertake to disinfect the drains of inhabited places, factories and industrial establishments before they run out into frontier rivers or other frontier waterways which supply water for the inhabitants and for domestic animals.

For this purpose, each of the Contracting Parties shall issue the necessary orders after consulting the other Party.

Article 33.

Failing any direct agreement, the Contracting Parties undertake to refer, by mutual consent, to the Health Section of the League of Nations with a view to the amicable settlement of any differ-

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ences which may arise in regard to the interpretation or application of the present Convention. Each Party shall have the right to choose, of it so desires, some other procedure for settling the matter in dispute.

Article 34.

The present Convention shall be ratified and the instruments of ratification exchanged at Warsaw as soon as possible.

'It shall come into force eight days after the exchange of ratifications, and shall continue in force for one year from the date of its denunciation by either of the Contracting Parties.

In faith whereof the above-named Plenipotentiaries have signed the present Convention and have sealed it with their seals.

Done at Prague in duplicate, in Polish and Czechoslovak, on September the fifth, One thousand nine hundred and twenty-five.

(L. S.) Dr Zygmunt LASOCKI.

(L. S.) Dr Václav GIRSA.