## N° 1680.

# BELGIQUE ET PORTUGAL

Convention concernant les questions sanitaires dans les colonies du Congo belge et de l'Angola. Signée à Saint-Paul de Loanda, le 19 juillet 1927.

## BELGIUM AND PORTUGAL

Convention regarding Sanitary Questions in the Colonies of the Belgian Congo and Angola. Signed at Sao-Paulo de Loanda, July 19, 1927.

## <sup>1</sup> Traduction. — Translation.

No. 1680. — CONVENTION BETWEEN BELGIUM AND PORTUGAL REGARDING SANITARY QUESTIONS IN THE COLONIES OF THE BELGIAN CONGO AND ANGOLA. SIGNED AT SAO-PAULO DE LOANDA, JULY 19, 1927.

BELGIUM and PORTUGAL, being equally desirous of protecting their colonies, the Belgian Congo and Angola against epidemic and infectious diseases;

Taking into account the provisions of the International Sanitary Convention, signed at Paris on

January 17, 1912, and in particular Articles 6, 41, 52 and 53 of this Convention;

And in view of the recommendations made by the first Congress on Tropical Medicine held at St. Paul de Loanda in 1923, and of the conclusions of the International Conference held in London in 1925 on the steps to be taken to combat sleeping sickness;

While maintaining the Convention of September 3, 1923, for the protection of the river frontier, Have decided to conclude a new Convention and have appointed as their Plenipotentiaries for this purpose:

## HIS MAJESTY THE KING OF THE BELGIANS:

M. Martin Rutten, Governor-General of the Belgian Congo;

M. Félicien Cattier, Vice-Chairman of the Board of Directors of the Overseas Bank, Honorary Professor at the University of Brussels;

#### THE PRESIDENT OF THE PORTUGUESE REPUBLIC:

M. Antonio Vincente Ferreira, High Commissioner of the Republic and Governor-General of the Province of Angola;

M. Ernesto Julio de Carvalho e Vasconcelos, Vice-Admiral, Director-General of the Ministry for the Colonies;

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

## Article I.

The communicable diseases to which this Convention applies shall be divided into four categories:

(a) Pestilential diseases: plague, cholera, yellow fever and smallpox; and very dangerous epidemic diseases, that is to say diseases taking a rapid course with very high mortality; bacillary dysentery, typhus, relapsing fever (Obermeyer's spirochete) and cerebro-spinal-meningitis;

(b) Highly infectious epidemic diseases of rapid development but generally with low mortality; chickenpox and varioloid infection, influenza, pneumococcic infections,

measles, typhoid fever, amoebiasis;

<sup>&</sup>lt;sup>1</sup> Traduit par le Secrétariat de la Société des Nations.

<sup>&</sup>lt;sup>1</sup> Translated by the Secretariat of the League of Nations.

(c) Infectious diseases which do not spread to any extent but form small, easily controlled centres: erysipelas, puerperal septicaemia, anthrax, glanders, hydrophobia, diptheria, mumps, trachoma, acute anterior poliomyelitis;
(d) Communicable diseases of generally slow development, tuberculosis, leprosy,

sleeping-sickness, relapsing fever (tick-fever produced by Dutton's spirochete).

### Article II.

If, in the course of an epidemic caused by any disease in group (b), there should be noted an unusually high mortality and an increased infectivity of the virus, the provisions laid down for the diseases in group (a) shall be applied.

## Article III.

The administrations of the two Colonies may, by common consent, modify the classification of the communicable diseases specified in Article I by omitting diseases, transferring diseases from one group to another and, if necessary, adding other diseases not specified in the present Convention.

## Article IV.

The Belgian Congo and the Angola Administrations shall exchange, through their Medical Services, monthly bulletins regarding the appearance and spread in their respective territories of all diseases mentioned in Article 1. These bulletins shall also mention, if possible, the number of cases and shall specify the area affected. They shall also indicate whether the outbreak tends to increase or diminish.

If the bulletins refer to any communicable disease included in group (a) of Article 1, or any disease which has assumed the dangerous character mentioned in Article II, they shall be sent weekly by telegraph and shall indicate, in addition to the number of cases, the number of deaths and the localities in which these deaths occurred. If the bulletins refer to plague, they shall state whether the outbreak was preceded or accompanied by rat-plague, the percentage of infection among captured animals and their death rate.

#### Article V.

Apart from the bulletins mentioned in the preceding Article, the Government of the infected country shall issue a notification of diseases as provided in section 1, Part 1 of the Paris International Sanitary Convention of 1912.

## Article VI.

Each Administration shall assist the other in despatching medical missions to any part of its territory in which a dangerous epidemic exists. These missions may make enquiries as to the measures adopted, and may consider, in conjunction with the sanitary experts of the infected colony, the joint steps which should be taken to protect the uninfected country.

## Article VII.

The two Governments shall convene, in Belgian or in Portuguese territory as circumstances warrant, conferences of health experts to consider the improvement of protective measures in the two colonies, and to enable medical officers to co-operate more closely in this respect.

In the interval between these sessions, the medical officers of the frontier districts shall exchange all useful information and may arrange meetings whenever they consider it necessary to exchange views.

## Article VIII.

The two Governments shall complete as soon as possible the network of observation posts and sanitary posts on each side of the frontier. For preference these posts shall be situated near routes used by natives, so that the latter should not be able to pass from one colony to the other without being examined by the sanitary authorities and should not be obliged to go too far out of their way to seek these authorities.

#### Article IX.

No native shall be allowed to cross the Belgo-Portuguese frontier unless he be provided with a passport or a booklet containing, in addition to the information necessary to establish his identity, a statement to the effect that he is not suffering from any of the diseases specified in Article I, or that circumstances exist as defined in Article XI allowing of a short stay.

The passport or pocklet shall be prepared by the health authorities of the last place at which the holder resided in his country of origin, and shall be  $vis\acute{e}$  in the country of destination when the emigrant enters or leaves the country. The passport or booklet must be  $vis\acute{e}$  by the health authorities of the country of origin every time the holder leaves the country, unless the journey be repeated within three months following the date of the first visa.

#### Article X.

The following shall not be allowed to pass from one colony into the other:

(a) Any person suffering from any of the diseases in groups (a), (b) and (c) specified in Article I.

(b) Persons thought to be suffering from open tuberculosis, tuberculous or mixed leprosy, tripanosomiases who have not been treated or in whom examination has revealed the presence of parasites in the peripheral blood;

(c) Any persons coming from a zone which has been officially declared infected with one of the diseases in group (a) specified in Article I or group (b) in the circumstances defined in Article II, unless the sanitary authorities of the country of destination consider that quarantine measures will be sufficient.

#### Article XL.

Persons with closed tuberculous lesions, persons suffering from nervous leprosy, tripanosomiases whose blood has been recently blanched, may be admitted into the country to which they wish to proceed but only for a short period to be determined by the medical authorities of that country.

#### Article XII.

When natives of one of the Contracting Parties are found infected with infectious diseases in the territory of the other Party, the medical authorities who have diagnosed these diseases shall endeavour as far as possible, when repatriating the natives, to hand over the latter to a representative of the medical authorities of the other country.

Should that be impossible, the medical authorities of the former country shall transmit to those of the latter all the information they are able to collect concerning the identity and place of residence of the diseased natives.

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#### Article XIII.

Both Governments shall instruct their medical services to devote all possible attention in the frontier region of the two territories:

(a) To smallpox vaccination:

 (b) To the curative and prophylactic treatment of sleeping sickness;
 (c) To improvement works for the destruction of insects belonging to the glossina and anopheline species and other dangerous insects;

(d) To taking a census of and isolating lepers;(e) To all other measures to prevent the infection of uninfected territory. The two administrations shall come to an agreement to organise medical missions simulta-

neously in the same area on either side of the common frontier, and to take joint steps effectively to combat sleeping sickness.

#### Article XIV.

In August of each year the Administrations of the two Colonies shall exchange the following maps, tables and statistics concerning the districts lying along their common frontier:

- (a) A map showing the distribution and incidence of sleeping sickness in the various zones;
- (b) A map showing the zones infested with tse-tse flies and the relative density of the latter;
- (c) A statistical table showing, by zones, the approximate number of diseased persons and their ratio to the total population;
- (d) A report on migrations of natives and all other circumstances favourable to the communication of disease;
- (e) A note explaining the administrative and other measures adopted to combat sleeping sickness and all the diseases specified in the present Convention, and the results of these measures.

#### Article XV.

The two Governments shall cause their medical services to study simultaneously the question of the campaign against venereal disease, including syphilis, gonorrhoea, soft chancre and venereal granuloma, with a view to co-ordinating measures for combating these diseases.

#### Article XVI.

Any disputes between the Parties concerning the interpretation of this Convention shall be settled by arbitration.

## Article XVII.

The present Convention shall be ratified and the instruments of ratification shall be deposited in the Ministry of Foreign Affairs at Lisbon.

In faith whereof the Plenipotentiaries have signed the present Convention.

Done at São Paulo de Loanda, July 19, 1927, in four copies, two copies being transmitted to each Signatory State.

Antonio Vicente Ferreira.

Ernesto Julio de Carvalho e Vasconcelos.

M. RUTTEN.

F. CATTIER.