

Abstract: This April 24, 2003 interview features journalists based in Beijing, Hong Kong, Singapore and Toronto discussing the viral outbreak of SARS, sudden acute respiratory syndrome.

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Guests:

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Stuart Loory 00:07

Welcome to Global Journalist on KBIA. This is the program that says mid-Missourians, indeed many Americans are interested in international news. I'm Stuart Loory of the Missouri School of Journalism, coming to you again from London. After all the attention we have paid to the Iraq war and worldwide terrorism, it's hard to imagine that we are now afflicted with a situation that may cause even greater death and destruction. And that's the arrival in the world scene of the SARS virus. SARS stands for sudden acute respiratory syndrome. Here's a virus that breaks all the known rules for how a germ spreads. It's a type of germ that should only live without nurture for three hours, but in fact, the SARS virus lives up to 24 hours on a pen or a piece of medical equipment. Unlike the AIDS virus, which is only transmitted in the most intimate situations, this one can travel from one infected person to another easily. Some specialists think it can kill more than AIDS has done, and much more quickly. We're going to drop our coverage of Iraq today for the first time in many weeks and concentrate on SARS. With me are journalists from the parts of the world most directly involved right now. In Beijing, Christopher Bodeen, a correspondent for The Associated Press; in Hong Kong, Reginald Chua, editor of the Asian Wall Street Journal; in Singapore Yo Ai Hun, a freelance producer for the Discovery Channel and Channel Newsasia, and in Toronto, Canada, Karen Palmer, a public health reporter with the Toronto Star. Let's start with Christopher Bodeen. Christopher, SARS was first spotted in Guangdong province in southern China. And it since spread from there through a large part of China and into the rest of the world. What is the situation in China now? Is there any panic? Is there any great concern? Holidays have been canceled, schools have been closed? What's going on?

Christopher Bodeen 02:22

Well, the situation took a rather radical change over the last weekend when the government finally came out and conceded the cases in Beijing were much, much higher, about 10 times greater than they had previously let on. Whether this was a deliberate cover up or simply a

mishandling of the information, well, most people have their own opinions on those things. But after those revelations came through, the situation in Beijing became much more, much more sharp, much more intense. People started to wear face masks, we hadn't seen that in large numbers before. Over recent days, we've had panic buying in stores as people start to stock up on things like rice and canned foods. So both in order to avoid having to go to those places in the future and also out of fear that there would be shortages as we worry about how long this will go on. People are fleeing the city by train and by plane. The airports are full. Rumors continue to spread about possible large-scale quarantines and even shutting off the entire city. And while the government has been more forthcoming with some information, particularly in providing these basically daily updates on new cases and new deaths, there, it's still hard to get answers about what is really going on here and what the program is.

Stuart Loory 04:01

Christopher, that's a grim story that you're telling, particularly what you say about people fleeing the city. There's obviously a danger there that infected, infected people are fleeing and perhaps spreading the virus.

Christopher Bodeen 04:17

There is that worry and then that's the worry that was behind the cancellation of the week-long holiday. Five days of that holiday has now been restored but people have been told not to travel or rather tour companies have been told not to take people from province to province. Whether or not this helps spread the virus further we're not sure. The people we spoke with, some college students were leaving Beijing by plane this morning, and they seemed quite aware. They were talking about sort of quarantining themselves for several days after they get home, into their home provinces, and only then would they start to have contact with friends and relatives. So hopefully, the greater supply of information is starting to have an effect and people are taking, taking more precautions and perhaps this will avoid a situation like I just described.

Stuart Loory 05:10

Reg, your, a just a little ways from Mainland China. How is all this being taken in Hong Kong?

Reginald Chua 05:19

Well, it's because it's sort of a sort of, you know, Kubler Ross stages of with it. We've seen initially, denial; we've seen the anger. We've seen — frankly we're a little worried you might be getting to reach a fatigue, people start thinking this, you know, it's just too much to try and avoid. I think what's happening is that people have been very angry initially, the sort of response that we saw here, sort of a denial to the serious problem and suddenly a real panic, to come around to it to deal with and now it does seem like the government is very serious. We are getting more data out. We are seeing sort of much more stringent measures in place. You know, primary schools have been delayed, the reopenings and so on. What we've seen very clearly is a very big change in lifestyle people walking around, cutting back social engagements, you know, the amount of hand washing that goes on now. So there's this social impact. There's I think a recognition that whatever happens in Hong Kong needs to be tied to the mainland. How the mainland deals with this, how it gets a grip on the risk is critical for Hong Kong because the border is one way or another going to remain porous: whatever happened in China is gonna have some impact on Hong Kong. And finally, of course, the economic impact — regardless whether this is fixed in three months or six months or longer, it's clearly taking a toll already. That's probably sort of the biggest and most tangible impact on Hong Kong right now.

Stuart Loory 07:11

And Yo Ai Hun, about Singapore? Is there any indication of panic there?

Yo Ai Hun 07:18

Now? No, not at the moment I mean initially like the first week or two week of April, I think we were a bit more nervous. But the last week or so, the last seven days, the government come up with a whole lot of measures basically to shore up confidence and to basically tell the people there is something can do about it, it is not a legally valid, you know, way to attack you. Today, for instance, the National Parliament put in measures to fight SARS. For example that can that all students will be given thermometers. By June every household will be given thermometers. Measures on how to prevent it from spreading. Because over the last weekend, it was an little bit of panic because a wholesale market was infected. And so it was the first time that cases what was the what's the fear of it being inside of the community. And so over the last few days, there's been a lot of announcements and and then just taken to say, Okay, this is what we can do. Let's have it prevented from spreading further in the community. So I think right now, people are more assured, confident and I think because it in the last week, the first week of April, there was so much sort of bad news because of kind of tide of Arabian, and I think they're OK, you're gonna fight back, we're gonna fight back and we're not going to lose this battle.

Stuart Loory 08:56

Karen Palmer, if I may ask you, the United States Centers for Disease Control, has reported cases in most of the states in the Soviet Union, Soviet Union, excuse me, most of the states in the United States. But yesterday, they issued a warning to Americans traveling to Toronto, that they should be careful and not go there if they really didn't have to. Why are they picking up Toronto like that?

Karen Palmer 09:34

Well, I think there is a perception that there is community spread in Toronto. That seems to be my understanding, at least of the situation. In Asia is that they're having trouble sort of linking cases back to you know, how did these people actually get it? Where did they actually get it from? In the last couple weeks, we have had some speculation here that that we may also have had some community spread in a religious group where there was a doctor treating someone who had SARS and may have spread it and this group may have spread it and that because of that, there may not have been an obvious link back to our original case. They've since sort of said that's not entirely true. They've had a quarantine period that just ended yesterday, of that they had only six cases. So they're starting to sort of say now, it's not out of control. You know, it seems to be far, far more in line than we had originally thought. I think the CDC is simply trying to keep their own people, you know, safe and, you know, I can understand that. My understanding of the CDC recommendation is that they ask people to bring masks and be prepared, but not necessarily to wear them.

Stuart Loory 10:45

Hmm. Karen, you're a public health reporter and you have covered stories concerning diseases and the spread of diseases I'm sure before how is this disease different from other harsh viral diseases?

Karen Palmer 11:05

Well, I think what makes SARS so different is that it's just such a big unknown. You know, with something like measles, for example, they know what the incubation period is, they know what puts you at risk for getting it. They know how to keep you safe from it. With something like

tuberculosis, which this was an in Toronto at least we initially thought our SARS case was a tuberculosis case. TB moves very slowly there's, you know, you can do something if people get exposed to it. There are drugs that treat it there are prophylaxis, there are things like that, with SARS, there are none of those things. And they're sort of you know, taking a look at all their their epidemiological tools and sort of saying, Okay, what do we even know for sure what the incubation period is, and you've seen it sort of change over the course of the outbreak? First, they thought it was about three days and they thought it was five now they're up to 10. There's some speculation in Asia that it could be 12 days, you know, they're not entirely sure when are you infectious and you know, if the symptoms are fever, headache, all these things, what is it the one that you get where it's like, boom, you have to stay out of the public because this is what makes you contagious to other people? You know, they don't really know how to treat it, which is kind of scary. They don't really know what's what's working, what's not working. Initially, they thought that an antiviral would work. Now they're saying, oh, that doesn't work at all. They thought maybe steroids would be helping another thing. Actually, we think the steroids are making it worse. There's some talk of using thalidomide, maybe giving that a try, you know, like, it's just such an unknown.

Stuart Loory 12:27

Yeah, just for the benefit of our listeners. thalidomide is the the drug which has such potential for causing birth defects. What about in China? Christopher Bodeen. What kind of treatment are they doing there? Are they doing any experimentation are they coming up with with any good medications?

Christopher Bodeen 12:53

We we hear a lot and and if I just take the opportunity to to emphasize China's problem here is not so much their their lack of medical expertise it's really their crisis management and and lack of investment in public health. But as far as as working on a cure, they've been stressing international cooperation. exchanging ideas there's a there's a conference on right now in Beijing with participants from Hong Kong and Taiwan talking about what has worked and what hasn't. China has the additional treatment aspect of traditional Chinese medicine. And a lot of people have been turning to that both as a form of prophylaxis and also as a as a way of treatment. They say that has been effective in treating some of these symptoms of SARS, not curing the disease, but some of the symptoms such as high fever, cough and some breathing difficulties.

Stuart Loory 13:53

When you say traditional Chinese medicine you're talking about what we in the United States would call untraditional medicine.

Christopher Bodeen 14:02

Mostly use of herbs, herbal drugs and that kind of thing. Herbal drugs and some, some even some more unusual treatments dried. I don't know exactly what what are in these but dried dried insects or sea horses and things like that. The main thing about traditional medicine is that it takes a while to take effect. It's much less of a shock to the system than some Western treatments. But again, to emphasize that's only treating some of these symptom. As far as the actual cure for SARS, we haven't been given anything from on that.

Stuart Loory 14:40

Okay, we have to take a break now. This is Global Journalist on KBIA. I'm Stuart Loory. We'll be right back. Welcome back to Global Journalist. You may listen to this program again, ask

questions or make comments by going to [www dot global journalist.org](http://www.globaljournalist.org) or in mid-Missouri, by calling 573-882-9641. Before the break, we were talking to Christopher Bodeen. about using traditional Chinese medicine to try to handle the symptoms. What about in Hong Kong and Singapore? Reg, how are cases being handled in Hong Kong?

Reginald Chua 15:27

Well, Hong Kong was the one that came up I think with the with with the original, you know, ribavirin and the quote steroid treatments, which I think are now being questioned. They're also working on using taking blood from from from patients and then injecting into other patients on the theory, I think that you develop antibodies. I think frankly, nobody really knows what works and what doesn't work right now. That sort of adds a bit to the to the scare effect. I think what's interesting is the speed at which the medical community is really working on this. And I that's the one big change that has occurred in the, in this outbreak versus, you know, other outbreaks in the past. I mean, took years to figure out what caused AIDS. In this case, you know, we've got scientists around the world nailing this down, at least we think they've nailed it down, in a matter of weeks. So that's the one thing I think that gives people cause for some optimism that, that we'll be able to, to, if not, you know, deal with this, firmly at least be able to sort of ring fence it able to, to, to have some form of treatment in a in a reasonable period of time.

Stuart Loory 16:45

And Yo Ai, how about in Singapore, any is any research being done any investigation to try to come up with the proper treatment?

Yo Ai Hun 16:56

The researchers here have broken the genetic code of the virus. So they're working on a diagnostic kit at the moment. Again, the treatment, it's pretty similar to Hong Kong, I think using antibiotics, (unintelligible) is the main one, as well as using a serum of recovered patients injecting it to patients at the moment. Of course on on the underground, a lot of people use the Chinese medicine, in fact, so last last month or so, a lot of Chinese herbs have been basically grabbed from the store. I mean, the price has gone up to three times and based on the belief in, I think, on the grounds that these herbs can help to at least prevent the virus from spreading also, on the ground — yes, people, you know, sort of sort of grabbing sort of vitamin C's and, and that sort of things. But again, I think like what Reginald said, you know, we are quite glad that you the medical community is actually looking very hot already about around the clock to try to find a diagnostic kit, first and foremost, and then working towards a cure, which I guess would be a couple of years time.

Stuart Loory 18:13

It Karen, this virus and this disease has gotten a reputation for being a serious killer. Is that being overplayed? Or is it indeed such a lethal disease? And if so, why?

Karen Palmer 18:32

That's actually really interesting question. We just had an expert here in Canada, yesterday, say, you know, I think it's being a bit overblown. In Toronto, we've had 16 deaths now. And because of where our outbreak started, it was mostly in a hospital. These are people who were already in the hospital for other conditions. And that's mostly who it's affecting, people who had heart problems. People had underlying medical conditions and as this doctor was saying, you know, in the eight weeks that we've seen it here in Ontario, you would expect to see, you know, about 200 people die in car crashes, you would expect to see about almost 2,000 people die of smoking-related diseases. So is it, you know, as virulent, as horrible as we're making it out to

be? Even the flu, you know, could kill more people than then just 16 in eight, eight weeks. So I think the the prevailing thing here is that, you know, the problem is that it's virulent and we don't know really, how to stop it and how to treat it and all these things. They're not so much. They don't seem to be so much concerned with the mortality rates.

Stuart Loory 19:31

The people who are dying, what is the cause of death? What are they dying from?

Karen Palmer 19:35

Well, SARS is certainly contributing to it, but we've had lots of people who have, like I said, heart conditions. One of the people who died was 99 years old, you know, so there could have been a lot of things going on there. The median age for our deaths has been about 74. The youngest person who died was 43. And he, I mean, this isn't what I consider serious, but he was a diabetic and he also had high blood pressure and just even that, I guess can make your system you know, weak enough that the pneumonia can just get in there and take over.

Reginald Chua 20:06

I think in Hong Kong, the thing that worries people is that we've seen incidents now of, you know, people who otherwise healthy and younger people in their 30s and early 40s were also dying. And I think this has sparked a bit more of concern and a bit more panic that, you know, it's either perhaps more virulent here, or you know, there's something that's that's unexplained yet. There's also the the whole Amoy Gardens housing complex, which, where the disease seems to have spread through, you know, bad sewage system, which hasn't seemed to have been the case and other infections as well. So it's all it's the big sort of unknowns that are really causing the panic rather than the absolute number of of deaths.

Stuart Loory 20:52

Christopher would you say the same thing is happening in China?

Christopher Bodeen 21:00

It's it, they also have a very, very hard time sort of nailing down what what causes the illness and how its transmitted. It's interesting the comparison with Hong Kong, Beijing is a very dry climate. Colder now going into a warm season. And you have to sort of wonder about the environmental factors here. Lifestyles are very different in Beijing, not quite so concentrated, a lot more open air, far less sort of ventilation systems and units where where the sort of environment where a virus could really thrive. So we just don't know. They have, the cause of death is often given us as edema and that sort of thing here. We don't really know about other contributing factors. Chinese scientists have suggested, however, that there could be not just Chinese, I'm sorry, also WHO people have been here have suggested that it could be the corona virus and then other sort of factors. They talk about something carried by chlamydia and and the like that could make it worse. So that's being looked into but they're far from a solution here.

Stuart Loory 22:16

Let's talk a little bit about the the economic impact, which has been on the minds of a lot of people and Reg, you brought that up as far as Hong Kong is concerned. But there were stories in Toronto yesterday and also in the New York Times about the serious economic impact that this is likely to have on Canada. Karen, how big a concern is that?

Karen Palmer 22:40

Well it's huge actually I mean, I've never seen our politicians as furious as they were yesterday when they learned that the WHO or the World Health Organization had issued a travel warning against Toronto they just came out drove sort of saying this is completely unnecessary. This is totally unfair. You know, they were just livid. We've, I mean, I think Almost sounds terrible to complain when we've only been going through it as long as we have, and China has been going through it for a lot longer, but we've been losing conferences and, you know, several thousand people that were supposed to come to the city, you know, at one conference they estimated would have brought in about \$20 million. You know, and I think people are just, you know, rather be safe than sorry, you know, gee, it sounds like a bad situation, I might as well just avoid it altogether.

Stuart Loory 23:25

And people not in Toronto would rather be safe than sorry.

Karen Palmer 23:29

Right, exactly. I mean, people that were thinking about coming Toronto or visiting family in Toronto, I mean, even locally, restaurants are saying their business is down. People are staying in there. They're not wanting to chance it. So.

Stuart Loory 23:42

But Karen, you're a public health reporter. What do you think is, is the story being overplayed? Or do you think that the politicians are overreacting to all the criticism?

Karen Palmer 23:55

In terms of whether we should have a ban against you, right? You know, I think it may be a little bit reactionary. But then I sort of feel the same way, sometimes, as they probably do in Beijing about getting the clear picture of what's really going on here. I mean, when I came in yesterday, I saw that they issued a travel advisory, I was quite shocked, because the information we're getting here on the ground is that, you know, it's mostly contained to hospitals, and that they are quite sure that they have their arms around the people who were exposed in that area, and that they're keeping close enough eye on them and keeping them contained enough that they shouldn't be exposing it outside of their own household. And so when we heard you know, we had heard that there was cases from Toronto that went to Australia, and we had been told of (unintelligible) cases. And then we heard about the Philippines and a woman there who had been in Toronto died in the Philippines and her father also died. And we were told, well, they're not we're not considering them SARS cases either. There's a case in Pennsylvania that started here in Toronto, and that is actually the only, you know for sure. This is SARS case that we've been hearing about and now it's suddenly, you know that Australia is a case in Philippines is a case there's one in Pennsylvania that could be one in New York is possibly one in Baltimore. So I'm starting to feel like maybe we're not getting the truest picture of what's happening here in Toronto, either. Or, you know, the, you know, there's an obvious link to Toronto so that must be what it is, as opposed to, you know, looking for other sources of a potential SARS infection. I mean, it's really difficult things are really changing so fast and every day. There's, you know, it's like a hydra headed story where there's so many things to be covering a lot gets lost in the shuffle. And I know we were certainly a little surprised yesterday when when the World Health Organization sort of said, Oh, well, you know, no, Toronto, we feel it's out of control there because that's certainly isn't how I've been how I've been picturing it here.

Stuart Loory 25:43

Christopher, there have been reports in the paper that one of the reasons the situation was not aired sooner in China was because of the change in leadership there. And that the the leaders did not want any stories that were going to hurt their image in any way. You think this really happened?

Christopher Bodeen 26:08

Well, I think that may be a partial explanation. China went through the leadership process. So a change process about in early March. And at that time, we knew that the media was under order to not allow any bad news to interfere with that. It was a big deal to China — the first sort of a peaceful transition to a new new group of leaders in the in the communist era. But since then, it's it's really been harder to tell —a combination of sort of bureaucratic inertia, sort of secretive policies of the of the Communist government here, the lack of any clear leadership, the health minister was a sort of in that position for many years and had had the the confidence of the previous leadership and sort of been cruising and never really told the local health departments how they ought to handle it. And he has now been been removed from his Communist Party positions and we believe he will be removed as minister as well. The mayor of Beijing was also sacked.

Stuart Loory 27:18

Christopher, I'm sorry to interrupt you, but we have only a few seconds left. And I want to ask Reg Cjua. How is your newspaper handling this story? Where does it rank in comparison with Iraq these days or the other major stories?

Reginald Chua 27:34

This is absolutely the most important story not not just in Hong Kong, but all around Asia. If you just look at the you know, I mean, we're a business newspaper but and if we treated it simply as an economic story, this would be already be a huge story, but it's more than that because we're a newspaper for international business people.

Stuart Loory 27:49

Okay, Reg, I'm sorry but we are out of time. Our guests today have been Reg Chua, editor of the Asian Wall Street Journal in Hong Kong; Karen Palmer of the Toronto Star in Toronto; Yo Ai Hun, a television producer in Singapore and Christopher Bodeen of the Associated Press in Beijing. Our director is Pat Akers, and our producer is Sara Andrea Fajardo, and Augustine Tang. For all. I'm Stuart Loory. Global Journalist will be back next week.