



Written by [Warren Mass](#) on April 27, 2009

World Unnerved by Spread of Swine Flu

On April 27, Napolitano told reporters that the World Health Organization is operating at level three, with level six a full pandemic. She said officials at the WHO were meeting that day to consider whether to raise the level.

Many nations around the world have taken precautionary measures. In Asia, Singapore, Hong Kong, Japan, Taiwan, and China all made plans to screen and/or examine passengers arriving from Mexico.

The European Union health commissioner advised Europeans to avoid nonessential travel to Mexico and the United States, but Dr. Richard Besser of the CDC said that including the United States in the advisory seemed unwarranted at this time.



One of the most outspoken members of Congress about this crisis is Rep. Eric Massa (D-N.Y.), a member of the House Homeland Security Committee who on April 25 called for “an immediate and complete closure of the Mexican border until the H1N1 Swine Virus is contained and controlled.” Massa was the first member of Congress to make such a recommendation. In a [follow-up statement](#) posted on his website on April 27, Rep. Massa said:

The H1N1 virus is a cause for concern and I again call on the public to pay attention to the new reports being issued by the Center for Disease Control and World Health Organization.... The epicenter of this outbreak is still in Mexico and while we now have several confirmed cases in the United States, we must consider all options to help reduce the number of new cases entering our nation. I’m glad that the White House has issued a travel advisory and is conducting passive screening at the border, but I think we should consider stronger measures at the border. I am in favor of using all tools available to reduce the spread of Swine Flu.

Controlling our borders and preventing anyone or anything that might be potentially harmful from entering the United States is, of course, one of the few legitimate functions citizens should expect of their federal government. However, citizens must be vigilant that overly ambitious government officials do not use the threat of a health crisis to increase the size and scope of government beyond limits set by our Constitution. A look back in time confirms that such an outcome is likely. Consider this excerpt from an article, “Uncle Sam and the Bogeyman,” by the late Robert W. Lee, published in *The New American* magazine for May 7, 1990:

In early February 1976, an Army recruit died at Fort Dix, New Jersey, of what some medical authorities thought was a strain of flu similar to what caused the terrible influenza outbreak of 1918-1919. The trainee’s condition had been incorrectly diagnosed by his doctor a few days earlier as a common respiratory disease. Although urged to stay in his barracks, the young man



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went on bivouac, during which he collapsed. Despite the unusual circumstances, his case was used to stir up a national Swine Flu frenzy. Congress appropriated tens of millions of dollars for a program to develop a vaccine and set up a liability program to reimburse vaccine makers in case the vaccine itself caused problems.

Many competent authorities questioned the very existence of Swine Flu, and some reports at the time indicated that up to 25 percent of those inoculated would suffer ill effects of one sort or another. Prior to voting against the Swine Flu legislation, Congressman Larry McDonald (D-Ga.), a medical doctor, stated during debate on the House floor that the panic was completely unjustified. Nevertheless, President Gerald Ford signed the program into law.

The civilian population was cajoled to participate in the vaccination program. Military personnel were threatened with court martial for refusing to be immunized. By mid-1977, legal claims filed against the government for deaths and injury resulting from the vaccine — not the flu — totaled more than \$300 million. By January 1978, more than 1,000 claims totaling \$1.5 billion had been filed. An entire new legal speciality developed around Swine Flu lawsuits, and litigation continues to this day.

Meanwhile, only six cases of the actual flu were recorded by federal health authorities. The power (and inclination) of our central government to manufacture a crisis, spend millions of dollars “solving” it as counterproductively as possible, and protect powerful special interests at taxpayer expense had again been demonstrated.

This is not to minimize the potential health danger of the flu that currently has struck many individuals in Mexico. However, a combination of common sense, consultation with competent private medical professionals, and — where appropriate — the imposition of local quarantines by city and state health officials, is most certainly a preferable option than federally mandated inoculation programs. Federal involvement almost always increases costs while decreasing the quality of healthcare.

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