

# Who is responsible for the Ebola virus case in Spain?

Kelly Taylor  
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Last week, Spanish nurse Teresa Romero became the first person to contract the deadly Ebola virus outside of West Africa.

Romero had been treating Spanish missionary Manuel Garcia Viejo, 75, who was repatriated after contracting the disease in Sierra Leone. He died on September 25. Romero, whose condition is now described as “stable but critical” after suffering multiple organ failure, began receiving the experimental drug ZMapp last Friday.

Almost immediately after the case hit the headlines, Madrid’s Popular Party (PP)-appointed regional health chief, Javier Rodríguez, sought to blame Romero for contracting the disease. Accusing her of concealing information from doctors and not taking safety precautions seriously enough, he said, “You don’t need a master’s degree to explain to someone how to put on a [protective] suit. But some people learn faster than others.”

After an announcement that two hair stylists were in isolation after coming into contact with Romero, he spouted, “She can’t be that bad if she went to the beauty salon.”

Romero’s husband, Javier Limón, has called for Rodríguez to “show some personal honour and resign.”

“I beg you, speaking with the ignorance of a welder, to explain to me how to put on a protective suit, since unfortunately my wife did not get a master’s degree in such matters. Teresa had a half-hour or so to learn it from a colleague, but she also has a willingness to serve others and a humility that you yourself lack,” Limón said.

Limón condemned the authorities’ tardy response, pointing out that Romero had said an infected glove may have touched her face when she was removing her suit. She alerted the monitoring teams to her high

temperature. By the time the authorities responded six days later and placed her in an isolation unit, she had been in contact with numerous others who are all now in isolation units. Limón said that had the correct training and precautions been taken, his wife would not be fighting for her life and he would not be in an isolation unit.

The World Health Organisation released a statement on October 9 saying Romero “had treated the patient on two occasions on 24th and 25th September 2014. On both occasions she is reported to have worn appropriate personal protection equipment (PPE).”

Rodríguez has now said that his statements were “unfortunate” and that Romero was “an accredited professional with more than 15 years’ experience and a woman with an unparalleled commitment to service. She, like many other excellent professionals, volunteered to treat the missionaries suffering from the Ebola virus, and she deserves all my respect for that.”

He has not resigned.

There is huge anger among health care workers at the dangers they face due to massive cutbacks. Last Friday, nurses protested by throwing surgical gloves at PP prime minister Mariano Rajoy, who was visiting the Ebola isolation unit. Doctors and nurses have called for an investigation into hospital protocols and procedures, with a view to pursuing negligence claims against the state for failing to provide adequate protection.

Dr. Juan Manuel Parra, who treated Romero before her illness was made public and who is also in isolation, condemned the government and medical officials for the lack of training and concern for health workers. He said he only discovered he had treated an Ebola patient after hearing news reports, and that his protective gear was virtually useless, describing how “my sleeves were short at all times.”

Another doctor, Santiago Yus, with more than 30 years' experience in intensive care, told *El Mundo* he had only received a 10-minute briefing and been told to study some photos on a wall before treating the Ebola patient: "Tomorrow or the day after tomorrow I will be expected to treat the Ebola patient and nobody has even taught me to put on the protective suit.... I am not ready, I am not trained. And it's the same with my colleagues."

Both the current PP and the previous PSOE (Socialist Workers Party) governments in Spain have implemented draconian austerity measures over the last five years that have seen deep cuts in health care. Last year, this included the closure of the infectious disease ward at Carlos III hospital, where Romero worked and is now being treated. It had to be reopened urgently to accommodate patients being brought back to Spain for treatment.

In 2012, the government excluded undocumented migrant workers from accessing free health care services. The European Centre for Disease Control (ECDC) in its October 10 report pointed out that a possible source of infection "is a chain of transmission along the routes used by undocumented migrants who end up on the southern shore of the Mediterranean and attempt to reach Europe by sea. Although the probability of this event is very small, the consequences of an outbreak in a detention centre or on board ship at sea could be dramatic."

Faced with persecution, exorbitant health care bills and deportation, what motivation would migrants travelling illegally have to present themselves to the authorities for treatment?

The ECDC report provides a damning indictment of the profit system and its inability to manage such outbreaks. "With nearly 8,300 cases and more than 4,000 deaths reported from West Africa by early October 2014, it is clear that the control measures implemented so far have failed to control the outbreak," it states. "All evidence and predictions indicate that the outbreak will continue to grow and spread geographically in affected countries if control efforts remain unchanged."

The October 9 WHO report states that the number of infected health care workers (HCWs) "continues to be an alarming feature of this outbreak.

"As of 8 October, 416 HCWs are known to have

developed EVD [Ebola Viral Disease] (74 in Guinea, 201 in Liberia, 11 in Nigeria and 129 in Sierra Leone, and one in Spain). 233 HCWs have died as a result of EVD infection (38 in Guinea, 95 in Liberia, five in Nigeria, 95 in Sierra Leone)."

The WHO confirmed the current outbreak on March 22, with cases being reported from December 2013. However, it elicited very little concern from the Western powers, as the disease had never left poverty-stricken Africa. Despite the nominal independence of the countries at the centre of the epidemic—Guinea, Sierra Leone and Liberia—they are all dominated by giant corporations and banks based in the imperialist centres, which extract vast profits from their mineral wealth and other natural resources. None of the countries are able to provide even the most basic health care for the masses.



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