

# COMBATTING GENOCIDE: PART III

In the struggle to survive the genocidal plans and designs of the U.S. Government, Black and other oppressed people are daily uncovering new facts and information vital to their survival. Since the early part of this year, much more information about Sickle Cell Anemia, a disease that particularly affects Black people (98% of its victims are Black) has been uncovered. In keeping with our policy of informing and educating our people to any threat to our survival, we presented this information to the people in the April 10, 1971 issue of our newspaper. (See Article entitled, "Black Genocide").

Not only have we begun an educational campaign around Sickle Cell Anemia, but we have also instituted a program to test people (free of charge) for the Sickle Cell Disease or trait. This is being done throughout our free health clinics located throughout the country. And, as a further outgrowth of all this, the Black Panther Party has founded a research foundation to discover more information about Sickle Cell Anemia and even a cure for the disease.

Since the initiation of our educational campaign around Sickle Cell Anemia, many groups and individuals have begun genuine efforts to research Sickle Cell Anemia (and other little-known and related blood disorders) that are truly in the People's interest. Among them is a group of Black medical students

abnormal blood condition which occurs predominantly in Black people. There are two forms of Sickle Cell Anemia - Sickle Cell Disease and Sickle Cell Trait. The red blood cells contain an abnormal hemoglobin called Hemoglobin S, which causes them to take on an abnormal shape resembling a sickle. These sickled cells have a much shorter life span than normal cells because they are rapidly destroyed. The rate of destruction exceeds the rate of production and thus anemia results. The destruction of the red cell is called hemolysis. Therefore, we say SCA is a hemolytic anemia.



Normal, donut shaped, red blood cells.



Red blood cells taken from a patient in a sickle cell crisis. Three of the cells are sickled and the other stretching away from its normal.



This information should be known and part of a person's medical record, as soon after birth as possible.

## ORIGIN OF SICKLE CELL ANEMIA AND G6PD DEFICIENCY

BY DON WILLIAMS

Blacks living in the malaria belts of Africa, particularly Eastern, Western and Central Africa have for centuries been exposed to malaria. Malaria is an infection caused by a parasite that destroys the red blood cells. There is evidence to indicate that African individuals carrying sickled cells

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# ORIGIN OF SICKLE CELL ANEMIA AND G6PD DEFICIENCY

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Blacks living in the malaria belts of Africa, particularly Eastern, Western and Central Africa have for centuries been exposed to malaria. Malaria is an infection caused by a parasite that destroys the red blood cells. There is evidence to indicate that African individuals carrying sickled cells and/or having decreased amounts of the enzyme G6PD in their red blood cells are more resistant to malaria.

Thus, as a process of natural selection (only the strong survive), Blacks came to bear these red blood cells which provided protection against a dreaded and deadly parasite. When Blacks were imported by the American Slave System to America where malaria is virtually non-existent the advantage of having Sickle Cell Trait or Glucose 6-Phosphate Dehydrogenase Deficiency was eliminated and an asset became a liability.

## DEFINITIONS

### WHAT IS ANEMIA?

Anemia is a lack of hemoglobin, the red coloring matter of blood. Hemoglobin supplies all of the body tissues with oxygen.

### WHAT IS SICKLE CELL ANEMIA?

Sickle Cell Anemia is an inherited

program to test people free of charge for the Sickle Cell Disease or trait. This is being done through our free health clinics located throughout the country. And, as a further outgrowth of all this, the Black Panther Party has founded a research foundation to discover more information about Sickle Cell Anemia and even a cure for the disease.

Since the initiation of our educational campaign around Sickle Cell Anemia, many groups and individuals have begun genuine efforts to research Sickle Cell Anemia (and other little-known and related blood disorders) that are truly in the People's interest. Among them is a group of Black medical students from Stanford University School of Medicine, in Stanford, California. They have organized the Mid-Peninsula Sickle Cell Foundation, under the direction and leadership of Brother Don Williams.

The students credit the Black Panther Intercommunal News Service and the articles, information on Sickle Cell Anemia, with providing the impetus to begin working to apply their skills for the people's survival. The first result of their efforts has been a brochure, containing information for the people about Sickle Cell Anemia and a related blood disease that also victimizes Black people particularly, known as G6PD (Glucose 6-Phosphate Dehydrogenase) Deficiency. G6PD, like Sickle Cell Anemia, is a blood deficiency affecting the red blood cells.

Because we are constantly searching for new information and ways to combat the genocidal plot of the U.S. Government, we reprint here excerpts from their brochure, TWO COMMON DISEASES OF BLACKS:



Normal, donut shaped, red blood cells.

Red blood cells taken from a patient in a sickle cell crisis. Three of the cells are sickled and the other stretching away from its normal, donut shape.

## WHAT IS GLUCOSE 6-PHOSPHATE DEHYDROGENASE DEFICIENCY?

This too, is an inherited abnormality of the red blood cells. The abnormality is due to a lack of Glucose 6-Phosphate Dehydrogenase (G6PD). G6PD is an enzyme essential for the normal functioning of the red blood cells. When exposed to certain drugs the abnormal cells become leaky. Water enters the cells causing them to burst. This destruction is also called hemolysis. Thus, G6PD Deficiency is a hemolytic anemia also.

### WHAT IS A CARRIER?

A seemingly healthy person who carries an inherited defect that can be passed on to his children is called a carrier.

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# PART III

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## WHAT IS A 'CRISIS'?

When the sickling increases, the blood vessels become more jammed and therefore the symptoms become worse. Doctors call this a "crisis". Crises begin to occur early in life. The first may occur anywhere between the first four months and the first two years of life. They recur days, weeks or months apart for the rest of the person's life.

These "crises" are characterized by very severe pain of joints, back, stomach and bones with fever. They last from several hours to several days.

## WHAT ARE THE SYMPTOMS OF G6PD DEFICIENCY?

The person with G6PD Deficiency is free of symptoms until exposed to certain drugs. Upon exposure to drugs such as aspirin, antimalarials and antibiotics, symptoms and signs common to all hemolytic anemias develop; these are: weakness, yellow color of the white of the eyes and dark urine. In severe cases there may be stomach and back pain. These symptoms begin abruptly after exposure to the drug and end in about a week even though exposure to the drug may continue. The symptoms can be prevented entirely by avoiding exposure to the harmful drugs. Unlike Sickle Cell Disease, the symptoms of G6PD Deficiency can be present as early as the tenth day of life.

## DIAGNOSIS

### HOW IS SICKLE CELL DISEASE DIAGNOSED?

The person with Sickle Cell Disease will have the characteristic symptoms of anemia; he will be tired and weak. In addition he will suffer with episodes of mild to severe pain. Special examination of the blood will reveal the sickled red cells and Hemoglobin S.

## HOW IS SICKLE CELL TRAIT DIAGNOSED?

Usually the person with Sickle Cell Trait, that is, the carrier, does not suffer from symptoms due to the

sickling of cells. However, under certain circumstances he may experience a "crisis" similar to the person with Sickle Cell Disease. For example when the carrier is exposed to high altitudes or anesthesia before surgery he may undergo a "crisis". Therefore, it is important to diagnose this condition. The diagnosis can be made in the same way Sickle Cell Disease is diagnosed; through special examinations of the blood the characteristic sickled cells containing the abnormal Hemoglobin S are found.

## HOW IS G6PD DEFICIENCY DIAGNOSED?

The person with G6PD Deficiency will be unnoticeable until he is exposed to certain drugs. When this occurs he will undergo hemolytic crisis and suffer the symptoms characteristic of hemolytic anemias. (See above). Special examination of the blood will reveal the lack of the crucial enzyme Glucose 6-Phosphate Dehydrogenase.

## HOW IS THE CARRIER OF G6PD DEFICIENCY FOUND?

If a female has an affected brother one should suspect her of being a carrier since her mother is a carrier. Chemical examination of her blood will reveal whether or not she is a carrier of the defect.

## TREATMENT

### HOW IS THE PERSON WITH SICKLE CELL DISEASE TREATED?

There is no cure for Sickle Cell Anemia. Treatment consists of relieving the pain of a "crisis" with pain killers and adequate hydration from the blood vessels. Blood transfusions are sometimes needed. However,

ever, transfusions provide only temporary relief and can be dangerous. Therefore, transfusions should be given with caution.

## CAN SCA CRISIS BE PREVENTED?

NOT At the present time there is no known treatment which will prevent the occurrence of SCA Crises.

## WHAT ABOUT UREA?

Recently the newspapers and other portions of the media informed the public about a new revolutionary cure for SCA: the use of Urea to relieve the symptoms of SCA Crisis was hailed as the ultimate form of therapy. Even though the urea treatment modifications of it provide a promising future approach to the problem it still in the experimental stage. The urea treatment should be regarded with caution until more is known.

## HOW IS THE PERSON WITH G6PD DEFICIENCY TREATED?

When the person with G6PD Deficiency is exposed to one of the drugs that causes the destruction of the red blood cells (hemolysis) he suffers the symptoms of a hemolytic crisis. Therefore, the best treatment for G6PD Deficiency is prevention. That is, the person with G6PD Deficiency should not be exposed to those drugs that cause the destruction of their red blood cells. However, if exposure to such drugs does occur, the individual is treated primarily by removing the drugs responsible. If the hemolysis is severe then the individual is given blood transfusion. However, this is rarely necessary.

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G6PD Deficiency: The problems encountered by a G6PD deficient individual can be avoided if he and his doctor are aware of his defect. The symptoms of G6PD Deficiency can be avoided by not using the drugs (anti-malarials, certain antibiotics, aspirin, etc.) that cause a crisis in these individuals. This information (as with sickle cell anemia) should be known and part of a person's medical record, as soon after birth as possible.

Sickle Cell Anemia: There is no known cure for sickle cell anemia, nor is there an adequate treatment to relieve or prevent the sufferings of its victims. Until recently, it was not even required that Black people take tests to determine whether or not they had sickle cell trait or disease. There is still no program or concrete effort by the U.S. government to prevent or deter the growth of, or find a cure for this disease. The reasons for this are obvious. The U.S. government has no interest in the survival of Black people.

## WHAT CAN BE DONE

CONTINUED FROM LAST PAGE

# COMBATTING GENOCIDE: PART III

If a campaign is not launched and maintained, our people will be ignorant of this government plot for Black Genocide.



People can contribute their time, effort and money toward educating other people and finding a cure for these deadly diseases. The Black Panther Party plans to expand the sickle cell testing services of its free clinics to include testing for G6PD. Within two weeks, the Sickle Cell Anemia Research Foundation poster, with an information and donation box (see example on the back page of this issue) will be in stores, businesses and the People's Free Health Clinics all over the country. Interested individuals or organizations should contact the Black Panther Party Branch or Chapter in your local area for further information. Or, you may write to Dr. Bert Small, Chairman of People's Free Medical Research Clinics and the Sickle Cell Anemia Research Foundation, c/o P.O. Box 8642, Emeryville, California 94608.

ALL POWER TO THE PEOPLE

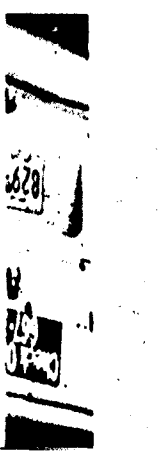
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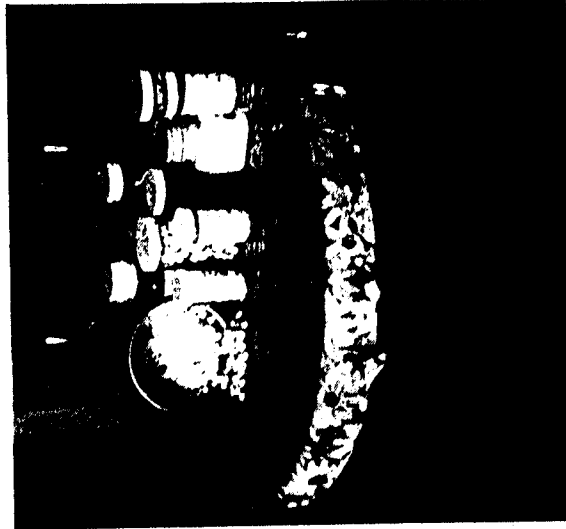
R TO THE PEOPLE

All of us, the poor and oppressed People, the forgotten and dispossessed, are JOHN AND MAE SMITH.

# MORE WITNESSES OF BLACK GENOCIDE

Mr. and Mrs. John Smith of 254  
Bruce Street in Baltimore (Maryland)  
are witnesses to the genocidal nature  
and actions of U.S. government  
agencies which are supposedly  
concerned with the "health" and "wel-  
fare" of Black People, as well as all  
the People. Despite the fact that both  
John and Mae Smith have contributed  
to the wealth of local capitalists, as  
part of the working-consuming masses,  
and Mr. Smith served in the U.S.  
Armed Forces, when they became sick  
and were no longer useful, they were  
cast aside with no regard for their  
lives or survival. From the time the  
Smiths first began to require frequent  
medical attention and subsequently be-  
came dependent upon public assistance,  
their lives took on a steady downward  
path. Their very survival is tied up in  
the red tape of insensitive and bureau-  
cratic government agencies.

In June of 1970, John Smith in-  
jured his spine, after a fall that oc-  
curred as a result of stumbling over  
a street fire hydrant. This injury  
resulted in a serious change in Mr.



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useful, they were cast aside with no  
regard for their lives or survival.

Smith's overall physical condition.  
He suffered uncontrollable shaking, re-  
stricted movement of his arms, legs  
and head, and great pain accompanying  
the slightest movement. This condition  
became so bad that John Smith was not  
even able to get around in the wheel-

chair to which he had been confined.  
Later, he took another fall, in fact,  
through a window of his home and suf-  
fered even greater injury.

Having been a veteran, Mr. Smith  
thought he was eligible for medical  
care and other veteran's benefits, and  
that at least his medical needs could  
be met. After his examination at the  
Veteran's Hospital, he was simply sent  
home. He had neither been told what  
was wrong nor whether or not he was  
eligible for veteran's benefits. Finally,  
Mr. Smith turned to the State Wel-  
fare Agency. When Mr. Smith applied  
for welfare, he was told to return to  
the V.A. hospital to apply for Ve-  
teran's benefits. Since Mr. Smith was  
not receiving any medical treatment or  
medication, he frequently went to Bon  
Secour Hospital, especially when the  
pain became extremely bad. Six months  
later, he was suddenly notified by the  
V.A. that since his injury was not  
service connected, he was not eligible  
for any kind of treatment. From June

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Black Panther - Nov 20 1971

San Francisco. In Santa Clara County, California, 90 PERCENT of the Black population are Black.

hearings to fight this move, Angela's attorney, Margaret Burnham, has enough evidence to prove most unenlightened whites could not get a hearing in Santa Clara County. Besides, a local Black newspaper reported that in ten years Santa Clara, he had heard of one case in which a Black on the Jury. Santa Clara County is ruled by old, very rich, white citizens. Angela lives the "settlers" of other words, Angela has a chance to be tried by rich, white racists.

question that we must ask, "FREE ANGELA!"

FOR THE PEOPLE

# FUND

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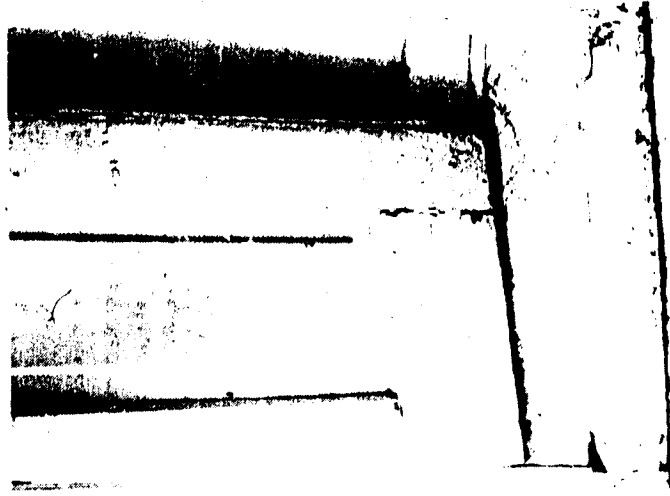
MINISTRY OF INFORMATION, BLACK PANTHER PARTY,  
Box 2967, Custom House, San Francisco, CA 94126

# MORE WITNESSES OF BLACK GENOCIDE

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of 1970 until February of 1971, John Smith did not know from what he was suffering nor his chance of recovery. He was sent from the Welfare Department, to Social Security, to the Veteran's Administration, to the hospital, in an endless circle of confusion.

Mrs. Mae Smith, like her husband, has hardly survived the insensitivity and inefficiency of governmental agencies and hospitals. Mrs. Smith is herself, an epileptic. She has lost sight in one eye. She has, therefore, not been able to work since 1964. On one occasion, when she had a seizure, Baltimore pigs decided she was drunk and took her to Spring Grove State Hospital, while her husband had no knowledge of her whereabouts for an entire week. Mrs. Smith stated that every trip to the hospital or welfare department meant another round of ridiculous questions by racist doctors and social workers.

Mrs. Smith receives a meager \$14.00 a month from the Welfare Department. This must be divided among rent, food, gas, electric and other



\$14.00 a month must be divided among rent, food, gas, electric, etc.

household and personal needs. Because of the expense in transporting Mr. Smith from the hospitals to the government agencies and back, the Smiths found themselves without any food. Finally, they were told by the Welfare Department that they had "ex-

hausted" all government and charity channels to get any aid. A Brother from the community, who was the Smiths' good friend, decided to contact the Black Panther Party. For several days, after that, Comrade Henry Lee, of the Black Panther Party, went to the Smith home, brought them food and cooked for them. John and Mae Smith are now awaiting Social Security payments on a claim which was made two months ago.

The Smiths give an unfortunately clear example of the genocidal treatment Black People receive throughout the racist and fascist United States. The Smiths have toiled at that labor which pigs such as Richard Nixon exalt as "honorable". Why then are they subjected to endless red tape and inferior medical services, when they are ill and hungry? Is it not clear that this oppressive system considers Black lives of no value. All of us, the poor and oppressed People, the forgotten and dispossessed, are John and Mae Smith, in one form or another. When they ignore, when they oppress John and Mae Smith, it is all of us who suffer.

ALL POWER TO THE PEOPLE