

## Foreword

## Message from Deputy Editor-in-Chief Gabriel M Leung — International Trade and Global Health Protection

It was external trade that first prompted the collection and reporting of surveillance data at the foreign ports from which the US imported goods. So established *Bulletin of the Public Health*—the first precursor to the US Centers for Disease Control’s *Morbidity and Mortality Weekly Report* (<https://www.cdc.gov/mmwr/index.html>). That was in 1878—during the fourth year of Guangxu Emperor’s 35-year reign as the penultimate monarch of our country’s dynastic legacy. History would have it that it is during a time of Sino-American trade tension, 141 years later, that the Chinese equivalent *China CDC Weekly* was born last month.

China’s signature global trade and development partnership—the Belt and Road Initiative (BRI) launched in 2013 by President Xi Jinping—provides a compelling *raison d’être* for this latest scientific outreach in the form of a new real-time periodical for public health protection along the Silk Road Economic Belt and the 21st-century Maritime Silk Road. It was not so long ago that another continental trade bloc, the European Union, sponsored the pilot issue of European CDC’s *Eurosurveillance* (<https://www.eurosurveillance.org/>) in 1995, two years after the Maastricht Treaty came into force.

If international trade should provide the initial motivation to monitor disease trends and track agents, vectors, and the movement of hosts, the ultimate goal must be to protect health, prevent disease, and promote wellness amongst partnering countries. Where there is nothing quite so toxic to health as the toxicity of poverty, trade has lifted hundreds of million out of poverty in China over the past four decades alone. By the same token, commercial and by extension geopolitical determinants can equally pose massive public health challenges, by omission or by commission.

Infectious epidemics provide the most vivid example. Pathogens respect no borders, as H5N1 (1) and SARS (2) had recently demonstrated in Hong Kong since 1997. In addition to our longstanding status as one of the world’s busiest trading ports, first of clothing, toys, and watches, then latterly of financial, legal, and MICE\* services, Hong Kong’s role as a global commercial hub also made us vulnerable as an epicenter of disease outbreaks. Roads linking otherwise remote villages have accelerated the spread of emerging infections with development. Mega airports, shipping container ports, and super highways—infrastructure characterizing the prosperity of global commerce—are conduits for superspreading events at global proportions. The SARS epidemic, with patient zero originating from Foshan in neighboring Guangdong province, in November 2002 subsequently seeded the province-wide spread but did not transmit outside of Chinese borders until it hit Hong Kong and quickly went on to re-export the virus to Canada, Singapore, and Vietnam (3).

While infections are often associated with gripping immediacy that capture the public’s fear and imagination, non-communicable diseases (NCDs) impose the largest disease burden by far (4). Microbial triggers of NCDs, particularly cancers, are increasingly established. Much more importantly, however, NCDs are caused by lifestyle and behavioral factors that are contemporaneously and inter-generationally (epigenetically) acquired. These have been shown to “spread” assortatively amongst peer groups and in complex social networks (5). Such social links between populations are anticipated corollaries of trade that are now accelerated by technology. Perhaps of greatest relevance to the incidence of NCDs, trade and balance of payments between nations ultimately drive consumption patterns thus lifestyle.

Finally, climate change is the most vexed challenge with the direst potential impact that could pose an existential threat to some populations in the medium term and all eventually. Here a non-dichotomous third way other than prosperity vs sustainability must be found. Countervailing geo- and national politics will interfere that would require wise politicians, Virchow’s “practical anthropologists”, to neutralize thereby protecting the public’s health.

I have outlined why and how trade and health are inextricably intertwined. While the challenges are enormous and can appear overwhelming, we hope that *China CDC Weekly* will in time provide a popular platform to

\* Meetings, incentives, conferences and exhibitions

communicate with our partners worldwide and to help us all in preventing and mitigating these public health challenges before they become another statistic that goes into our reports.



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