

Tuberculosis Threat Coming From Unvetted Refugees

Those with a narrow focus tend to fixate on terrorism threats coming from unvetted refugees. But there's an equally grave security and safety risk from the myriad diseases that accompany the refugee invaders and so-called unaccompanied alien children.

Tuberculosis (TB) is one of these diseases: It is an airborne infectious disease spread by coughing or sneezing. There are about 13 million people in the US that have been exposed to TB and could develop the disease.

Even Africa has attempted to educate people about public health measures to avoid spreading TB, and its public service announcements advise citizens to cover their mouths when coughing or spitting, and to increase ventilation in crowded places. Yet, there are no such campaigns here in America.

To acknowledge the dangers of TB and other highly contagious diseases would be tantamount to warning Americans of the many dangers of the refugee invasion which our elites are trying to hide from the general public.

Americans seem to prefer pestilence to prevention and in general, are slow to react to potential danger until it has already manifested, and so we have not instituted such a preventive campaign.

After 20 years of decline, US TB rates are increasing. This can only be traced to America's massive invasion of immigrants from TB hot-spots around the world. Four immigrant-mobbed states—CA, NY, TX, and FL have half the nation's TB cases.

The Center For Disease Control (CDC) allows immigrants to enter the US without screening or treatment for latent TB.

There are many more people with latent TB—one-third of the world's people!—that actually show symptoms of the disease—and the latent cases could become active at any time.

Treating TB is no treat: It is labor intensive and difficult to effectuate. It requires patients with active TB to take drugs daily over a 6-month period, and the doses must be administered by a health care worker who must watch the patient swallow every dose. If the patient can't come to a clinic, the health care worker must go to the patient.

Treating active TB in routine cases averages \$17,000 for full treatment, but can run up to \$430,000 when patients are resistant to drugs, in which case multiple drugs must be administered. Moreover, about 5% of patients assumed to be successfully treated will have a recurrence of the disease.

TB doesn't attract media attention like the over-hyped infectious Zika and Ebola diseases get. Consequently, only about half the funding authorized to develop better drugs for treating TB are actually spent for this purpose, showing how lackadaisically the threat is being treated.

Besides TB, the invaders also bring in yellow fever, measles, whooping cough, bubonic plague, diphtheria and many other diseases that were on their way to eradication only a short time ago.

The Book of Revelation prophesizes that one-third the world's population will die of "plagues" during the "end-times": Could these latent TB cases and other disease outbreaks from immigrant invaders be what is referred to?

Playing politics with public health issues like TB could be a potent killer of American citizens, just as the A.I.D.S. virus proved to be...

E-Mail Sidney Secular: Success_Express@yahoo.com