

## Necrológio/Obituary

## Antônio Carlos Silveira (★1948 †2011)

In 1978, I met Dr. Antonio Carlos Silveira for the first time. He was already the Director of Chagas' Disease Division in the Department of Eradication and Control of Endemic Diseases of the Superintendence of Public Health Campaigns (SUCAM), Ministry of Health. We worked together in SUCAM from 1979 to 1985. Dr. José Taquarussu Fiusa Lima was our Superintendent.

One of the most striking facts of that administration certainly was the extension of the activities of Chagas' disease control to the whole region of the country known to be endemic because until then, only 25% of this area was covered. The first national survey of prevalence of Chagas' infection and the triatomine entomological survey, identifying the vectors and its geographical distribution in the country, had just been concluded.

Resources of FINSOCIAL were available, and it was decided to apply them on expanding the coverage of control activities of this dreadful disease, which affected millions of Brazilian people, to the whole area, characterized as endemic.

Antonio Carlos was the one who formulated the strategies, planned, organized, and coordinated the execution of this great mission, which involved hiring and training of hundreds of servers.

He was helped in this task by his colleague, great friend, and substitute in the direction of the Division of Chagas' Disease, Dr. Tadayasu Sakamoto.

The strategy used was the selective application of insecticide, first by locality and then by infested housing. Started with organochlorine insecticide (BHC), which was later replaced by a pyrethroid, disease control was extremely successful as evidenced by the decline in vector-borne infection in the recently concluded second national survey of prevalence of Chagas' infection and by the elimination of its main vector, *Triatoma infestans*, as attested by international organizations.

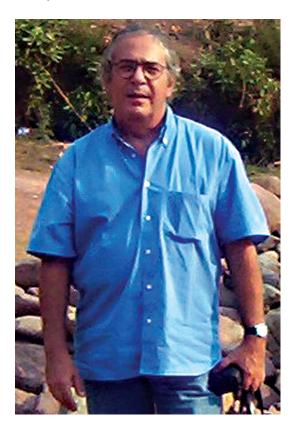
The experience was initially exported to other countries in South America and then to those in Central America, often with the advice of Antonio Carlos, this great health officer.

He was born in Porto Alegre, Rio Grande do Sul, and graduated in medicine in the University of that State in 1973. He made two important postgraduate courses at the National School of Public Health, Oswaldo Cruz Foundation: an update on endemic diseases and other specialization in public Health.

I was always impressed, in our professional relationship, by his competence, keen intelligence and objectivity of expression, integrity, and dedication to work.

He began his career in the Regional Directory of SUCAM in Rio Grande do Sul. In Brasilia, he was director of the Division of Chagas' Disease, besides other important positions in SUCAM, National Health Foundation, and Ministry of Health.

He was an adviser of the World Health Organization (WHO) and the Pan American Health Organization (PAHO). At WHO, he was a member of the Technical Coordination Group "Epidemiological Surveillance of Chagas' disease and Information Systems" from 2007 to 2010 and member of the Steering Committee on Chagas' Disease, in the Tropical Diseases Research from 2004 to 2006. At PAHO, he was an adviser in the "Southern Cone Initiative for Elimination of *Triatoma infestans* and Control of Transfusional Transmission of Chagas' Disease," in Argentina, Bolivia, Chile, Paraguay, Peru, and Uruguay; in the "Central American Initiative for Elimination of *Rhodnius prolixus* and Control of Transfusional Transmission of Chagas' Disease," in Honduras, and in the "Andean Initiative to Control Vectorial and Transfusional Transmission of Chagas' Disease." He also was an adviser to the Inter-American Development Bank, in Bolivia, for the control of Chagas' disease between 2004 and 2006.



He participated in two medical-dental missions of the Ministry of Foreign Affairs of Brazil in nine countries in Asia and another nine in Africa, collecting information about health conditions in those countries.

Despite being a highly respected professional in health services, he published books and many articles in national and international scientific journals on Chagas' disease and on other vector-borne diseases.

I am convinced that Antonio Carlos leaves a big gap in public health in Brazil and Latin America. His early death after a severe illness, which he faced bravely, deprives us of leaving with one of the greatest leaders of Chagas' disease control in the American continent since the discovery of this disease in the last century.

A few days before his death, he received a significant and well-deserved honor of the Secretariat of Health Surveillance, Ministry of Health, at the opening of the  $11^{\rm th}$  Exhibition of Successful Experiences in Epidemiology (EXPO-EPI).

Antonio Carlos Silveira definitely is part of the gallery of the great Brazilian sanitarians. Thousands of people, especially the most humble, failed to become infected, get sick, and die in Brazil and in many Latin American countries owing to the work of this eminent Brazilian doctor.

His family, friends, and colleagues mourn the departure but we are conscious of having lived with one great benefactors of mankind.

Brasília, December 3, 2011

Pedro Luiz Tauil

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