



Sanctions against Iran: The Impact on Health Services

***Ali GORJI**^{1,2}*

1. *Epilepsy Research Centre, Institute of Physiology I, Klinik und Poliklinik für Neurochirurgie, Department of Neurology, Münster University, Münster, Germany*
2. *Shefa Neuroscience Center, Tebran, Iran*

***Corresponding Author:** Tel: +49-251-8355564 Email: gorjial@uni-muenster.de

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Dear Editor-in-Chief

U.S. sanctions have been a major feature of U.S. Iran policy since Iran's 1979 Islamic revolution, but United Nation and worldwide bilateral sanctions on Iran are a relatively recent development. The official aim of the sanctions is to force the Iranian to comply with international rules over its disputed nuclear program. An array of restrictions on banking, shipping, insurance, ports, trade, commodities and energy transactions and ventures have severed or complicated many of Iran's commercial ties to the outside world. The harsh sanctions have had an impact on all branches of the economy but are increasingly affecting vulnerable patients as deliveries of medicine and raw materials for Iranian pharmaceutical companies and medical equipment for hospitals are stopped. Although medicine is not included in the list of the sanctions, the difficulties in holding license for export of medicine, financial transaction, and shipment as well as fear of possible U.S. sanction by pharmaceutical companies and international banks, led to the shortage of specific drugs and medical facilities in last months. A sudden fifty percent rise in the price of drugs is another contributing factor to this crisis (1, 2). The impact is being felt by more than six million patients suffering from complex diseases such as hemophilia, multiple sclerosis, thalassemia, epilepsy, and various immunological disorders, as well as transplant and kidney dialysis patients and those being treated for cancer. Operating theatres in Iran are

running out of anesthetics, forced hospitals to resort to procuring merely older types of anesthetics no longer in use. Most of these patients cannot afford any interruptions or delays in medical supplies. There are reports of deaths in Iran over the past months due to the shortage of medicine. Sanctions, as a tool of coercive foreign policy, have been imposed on several nations, such as Iraq, Cuba, Libya and former Yugoslavia, over the past few decades. Although sanction objectives are rarely met, these sanctions nevertheless lead to a humanitarian disaster (3, 4). There have been many more sanctions-related deaths than casualties resulting from the US-Iraq war in Iraq. Infant mortality rose from 47 per 1000 live births during 1984-89 to 108 per 1000 in 1994-99, and under-5 mortality rose from 56 to 131 per 1000 live births (5, 6). An estimate of a minimum of 300,000 excess deaths among under five-year-old children alone was reported; three times more than the Hiroshima bombing (7). Due to declining hospital capacity, shortage of medicine, and lack of laboratory reagents in Cuba, mortality among those aged 65 and older rose by 15% from 1992 to 1993. Increases in the overall death rate by 10% and in the hospital mortality rate by 30% due to the breakdown of health services after sanctions imposed on former Yugoslavia was reported (8,9). The impact of sanction encompassed much more than restrictions on the availability of medicine. The weakened medical infrastructure strains the ability

of the health system to provide services and to respond to medical emergencies. Sanctions are silent killing, especially for those who are dealing with chronic diseases or emergency disorders; the needful are left abandoned. All these sufferings occurred in spite of the Universal Declaration of Human Rights and other human rights covenants, which guaranteed access to health services, medicine, food, and other essential goods to every human being.

Imminent medical resource shortage that is expected to occur within the next few weeks was noted by Iranian officials. In addition to drugs shortage, the provision of materials for health services, such as sutures and vaccines, should be considered (10). It is crucial to take actions today to prevent another humanitarian disaster. Immediate appropriate actions of both Iranian authorities and the international community can help save thousands of lives. The simplest way to achieve this is to ensure that medicine as well as medical and laboratory supplies and the associated banking transactions are indeed exempt from sanctions. Billions of dollars of Iranian assets abroad have been seized or frozen by the Western countries. As an alternative, the international community may use these assets to acquire *medicine* and medical supplies and send them to Iran to prevent a *humanitarian* crisis. More attention should be given to establish uniform operational criteria and definitions for exemptions of *medicine* and *medical* products from *sanctions* in the future.

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