



cruzi, being the natural reservoirs, the opossums and small rodents, these with a seroprevalence of between 8 - 62%, thus demonstrating that zoonosis is an important geographical contribution for this disease to spread, being the main problem that is not really known what is the magnitude of the problem in the human being [8].

The importance of this disease transcends, not only in the search for endemic American countries, in 2007 the World Health Organization presented an international program for the eradication of Chagas disease, in just 3 years, which generates a continuous conflict. Although the experts in tropical diseases assure that the infection rate has been reduced from almost half a million people a year to a few 50,000, it is still a disease that represents a monumental challenge for current medicine, one of the main reasons for this. It is the permanent existence of a natural reservoir in the environment, another would be the inexistence of an economical and efficient diagnostic method, that although a great advance has been achieved, the battle is still arduous and long [9,10].

One of the main objectives of this work is to highlight the lack of information and research on the proper management of Chagas disease, there are few works that demonstrate a clinical relevance of the diagnosis of this disease, we can highlight two of them that highlight the importance of screening for this disease in Stroke, the first written by FJ Carod Artal and his team in 2003, in which they found that 81.6% of patients diagnosed with Chagas disease presented vascular risk factors, for example that cardiomyopathy was more frequent in patients with Chagas disease and stroke (45.58% vs 24.69%) as well as 38.23% of patients with stroke were diagnosed with this disease [11,12], meanwhile Leonardo C. Paixao and His team in 2009 identified that in 201 patients studied, showing an odds ratio of 7.17, compared to the odds ratio of a history of stroke or ischemic attack. transient of 6.98, thus demonstrating that Chagas disease is an independent risk factor for stroke [13].

Another relevant aspect is the transformation of the disease thanks to globalization and the movement of populations around the world, especially migration to non-endemic places of affected populations, an example of this is what is happening in Spain, at work. Joaquin Gascón and his team presented in 2007, in their work presents a guide to diagnosis, management and treatment of Chagas disease in non-endemic areas, proposing as the main cause of appearance of these diseases the movement of populations migrating from America to European countries [14], which contrasts with what was found by Morven S. Edwards in 2018, who together with his team identified neonates infected by vertical transmission, highlighting that endemic cases in the United States of America are practically nil, but the incidence of vertical transmission path is increasing due to the migration of a greater number of central populations and South American [15].

The main problem of this abandonment and ignorance is what Dr. Chagas mentioned at that time, the research and searches for information on this disease, always indicate and point to a poorly fed, vulnerable and abandoned population, embraced by a poverty that does not they chose but have to endure [16], and we can add that despite the efforts of international organizations, the great increase in the disease as a risk factor and the migration of sick populations, it remains a poorly studied disease and the development of an ideal treatment is still a long way from being possible.

Materials and Methods

The General Death Database: 1979-2013 [17] and the Hospital Discharge Database for Morbidity in Public Institutions, 2004-2013 [218a] [15].

affects the heart and lastly and demonstrating its chronic importance that affects the heart.

Discussion

The fatality rates so high that this condition presents at the national level, are nothing more than the reflection of inefficient strategies or incapable of correcting the real problem from the roots, being only makeup artists, in the specific action program for the prevention and control of Chagas disease 2013-2018 proposed by the Mexican Ministry of Health in its sectoral health program, it exposes a mortality rate for Chagas disease nationwide from

0.02 to 0.03 per 100,000 inhabitants, making special emphasis in 2012 and 2013 [19], which, in contrast to what is presented here, is an error in the perspective of data perspective, by the health secretary, since when focusing on the mortality of a disease so specific and underdiagnosed and calculating it with the general motility, its importance is neglected, presenting very low levels, one of the probable solutions to this problem would be to change the focus to the case fatality rate as presented here to make a data crossing between the patients killed by chagas in 10 years and sick patients in those 10 years, this would enhance the disease and allow it to be given greater importance.

The solution is not only the correct diagnosis of this disease, nor the effective treatment, the real solution is a comprehensive work that is addressed at a preventive, diagnostic and therapeutic level.

Chronic heart disease in patients with Chagas disease is not only the most common, it is the most lethal of all, thus demonstrating that correct preventive control in these patients is not only for therapeutic purposes, but a primary and essential axis of effective and comprehensive treatment of Chagas disease

In order to bring down this crisis, it is necessary to follow a plan, first carry out a correct education of all health workers at the national and international level, so that there is a correct and early diagnosis of this disease, and thus the treatment is in time and correct form and this encourages an increase in research to improve treatment.

The main problem during the preparation of this work was the search for adequate and current bibliography, this is explained by the general lack of interest at national and international level for this disease, since for the pharmaceutical companies it does not represent an economic gain.

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