

NEWS ITEMS

Africa, Liberia, Ganta.—Dr. G. W. Harley reports that in the acute shortage of chaulmoogra oil he is investigating the use of oil from a local tree, the odor resembling that of *Hydnocarpus* oil. As the oil is edible, he feels justified in going ahead with clinical experiments.

Nigeria, Garkida.—Dr. and Mrs. Lloyd R. Studebaker suffered during the past year the loss of a son, Melvin, in California, from spinal meningitis, following the loss in 1942 of their little daughter Joan. Dr. and Mrs. Studebaker hope to return to this country for furlough in the late spring of 1944. Dr. Studebaker will be replaced by Dr. Howard A. Bosler, formerly of Garkida. Emphasis has been placed on agriculture and all who are able are encouraged to farm. A new, very well equipped clinical laboratory was opened. It is proposed to construct new ward buildings to care for patients who need hospitalization.

Nigeria.—Sudan Interior Mission. Two new leprosy stations are in the process of formation in Northern Nigeria, one at Egbe, Kabba Province, and one at Omu Aran, Ilorin Province.

Cameroons, Elat.—The medical work of this station, including that for leprosy, has been almost strangled during 1943 by the absence of almost all medicines. First, shipping space was not available, and later a ship containing a very large supply of medicines was sunk. Another supply was dispatched in November, 1943 and presumably reached Dr. H. L. Weber. In searching for a substitute for chaulmoogra oil, Dr. Weber came upon an oil called "caloncoba." This is extracted from the seeds of a prickly, spiny fruit which the Africans call "the brother-in-law" of the porcupine. Its full scientific name is *Caloncoba echianta*. The oil can only be expressed under heat and high pressure, otherwise it is too thick to flow. The seeds contain from 25 to 45 per cent of oil. Since this oil is a cognate of chaulmoogra Dr. Weber believes it holds promise of value as a substitute.

Congo Belge, Kapanaga.—Dr. Arthur L. Piper reports a considerable building program, and he looks forward to further expansion in 1944. There are over 300 patients in residence, in spite of almost complete lack of chaulmoogra oil. A shipment of oil has subsequently presumably reached him.

Portuguese East Africa, Inhambane.—Dr. C. J. Stauffacher reports a heavy strain both within and without the colony because of rising prices. He is nevertheless hoping, with the concurrence and advice of the Government, to build a specialized hospital building, which his colony has not hitherto possessed.

China.—Shortly after the isolation of the headquarters of the Chinese Mission to Lepers, directed by Rev. T. C. Wu, in Shanghai, a group of interested persons in Chungking formed an Ad Interim Committee to act in behalf of that Mission and to receive funds from the Mission to Lepers, London, the American Mission to Lepers, and general China relief agencies. Prominent in the leadership of this Committee were Mr. George Fitch, American adviser to the China YMCA, Prof. Wallace Crawford, of the West China Union University, and Mr. Glenn Fuller, Treasurer of the Methodist Mission in China. The American Mission to Lepers has placed a lump sum at the disposal of this Committee for use at its discretion and, in addition, has greatly increased grants to several China stations upon the advice of the Committee. The Mission is thus aiding directly eight services in leprosy work in Free China. One of these was opened for the first time in 1943, and one emerged after more than a year behind enemy lines.

Shanghai.—Dr. Lee Huizenga, well known missionary of the Christian Reformed Church, was heard from in October by a message through the Red Cross, and again through the return of his daughter on the *Gripsholm*. His leprosy

clinic was reported to be still going on under Chinese direction, although Dr. Huizenga and his wife were interned. The National Leprosarium of the Chinese Mission to Lepers was also reported to be going on, although in a desperate situation for food.

Kityang, Kwangtung Province.—Dr. Marguerite Everham writes as follows: "Since the summer of 1939 when Swatow, our port city 35 miles away, was occupied, we have been 15 miles back of the lines, with occasional bombings and threats of occupation and constant uncertainty of what the future holds, and extraordinary problems of safety, food, drugs, finance, and staff to maintain our hospitals." Two free leprosy clinics were bombed and the work was then combined at a new location five miles west of the Bixby Memorial Hospital. Treatment has been reduced to the giving of injections only, but is still being carried on.

Pichieh, Kweichow Province.—Sister Margarete C. Welzel, of the Friedenshort Deaconess Mission, whose mission station is located several miles from the leprosy colony, has been detained in her station by the Chinese government and the colony is being operated by representatives of a Friends' Ambulance Unit.

Kutien, Fukien Province.—Dr. Harold N. Brewster has reported almost complete stoppage of leprosy treatment due to lack of chaulmoogra oil. He gives the impression that there is an acute shortage of the oil throughout the country and that even the Chinese government had been unable to secure any.

India, Assam, Kangpokpi.—It is learned through the American Baptist Foreign Mission Society, New York City, that the leprosy colony at this station, which was practically abandoned on account of war operations for an extended period, was to be reopened in the late fall of 1943.

Akidu, Kolair Lake area.—Upon a recent request from Dr. H. A. Wolverton, the American Mission to Lepers has made grants for a small building and equipment, and for the maintenance of an extension of leprosy work from this center.

Virgin Islands, St. Croix.—A plan is in formation between the American Mission to Lepers and the St. Croix Committee to place a full-time social worker at their disposal for work in the colony here.