

NEWS ITEMS

This department will carry information that can be obtained concerning institutions, organizations and individuals, scientific or other meetings, acts of legislature and other activities, and any and all other similar matters that may be of interest to leprosy workers. For the most part such matter is collected and submitted by the Contributing Editors, though in part it derives from other sources. All readers are invited to cooperate with the editorial staff by sending in anything of this nature which they consider of interest.

North Africa.—Dr. Edmond Sergent, director of the Institute Pasteur of Algeria, states in a recent letter that, on the whole, North Africa is not heavily infected with leprosy, save some regions in Morocco. He gives the figures as recorded in official reports for recent years, which in all instances are apparently those of new cases discovered.

ALGERIA		
Year	Number of cases	Population
1922	4	5,806,094
1923	3	5,806,094
1924	2	5,806,094
1925	2	5,806,094
1926	6	6,063,496
1927	3	6,063,496
1928	1	6,063,496
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Total (seven years):	21	

TUNIS		
Year	Number of cases	Remarks
1929	6	All from the city of Tunis
1930	4	All but one from the city of Tunis
1931	4	All from the city of Tunis

MOROCCO				
Districts	1928	1929	1930	Totals
Chaouia	33	48	47	128
Rabat	0	0	5	5
Gharb	2	4	4	10
Fès	46	59	139	244
Taza	20	11	0	31
Oudjda	0	5	0	5
Marrakech	5	30	39	74

MOROCCO—Continued				
Districts	1928	1929	1930	Totals
Chiadma	0	1	10	11
Abda	0	3	2	5
Doukkala	29	50	69	148
Tadla	0	0	1	1
Casablanca	0	0	1	1
Totals	135	211	317	663

[*Comment.*—It would be interesting to know whether the increase in the last set of figures is due to an increased incidence of leprosy in Morocco, or increased activity in detecting patients.—EDITOR.]

Courses in Brazil.—A course of instruction in leprosy was given by Dr. H. C. de Souza Araujo at the Institute Oswaldo Cruz in Rio de Janeiro from October 5 to November 10, 1931. The course occupied 20 days of 5 hours each, during which period visits were made to the various anti-leprosy organizations of the capital and Sao Paulo. The topics dealt with were history, geographic distribution, epidemiology, etiology, pathology, clinical features, treatment, and prophylaxis. This was the third such course given by Dr. Araujo, and 31 students were enrolled. [*Rev. Med.-Cir. Brazil*, 40 (1932), No. 1.]

Sapucainha oil in Brazil.—Brazil may soon provide its own oil for the treatment of leprosy, in the opinion of Dr. H. P. Rolfs, director of the agricultural and veterinary college at Vicosa, Brazil, according to an Associated Press dispatch from that place, dated July 18, 1932. For several years Dr. Rolfs has been experimenting with various plants and trees indigenous to Brazil, and he has found that the sapucainha tree produces a fruit the seeds of which yield a medicinal oil equal to chaulmoogra, generally used in leprosy treatments.

Plans for Indo-China.—Dr. P. Hermant, recently appointed Inspector-General of Hygiene and Public Health of French Indo-China, writes briefly of plans for the development of leprosy work in that country. At the present time there are several leprosy villages supported by the government in different parts of the country, none of them of large size and none with a resident physician. Dr. Hermant plans to develop as far as possible an anti-leprosy campaign, features of which will be the instruction of workers and the establishment of a central institution for the treatment of isolated patients. This is to be at Quy-Hoa, Annam, where there is a small asylum at present. The financial stringency prevents the undertaking of any large scheme, but it is expected that early in 1933, the Annam lepers will be concentrated at Quy-Hoa. They will be

under medical supervision and will be cared for by French and native Sisters. Dr. Hermant intends to follow very closely the development of the new institution and to work on international lines as suggested by the recent Manila conference.

New focus in China.—Dr. James L. Maxwell reports a hitherto unknown centre of leprosy in central Asia discovered by a medical expedition to the independent tribes of the Sino-Tibetan border in which he took part.

The area lies in the Chinese province of Szechuan, north of the Yangtse river between latitudes 102 and 104 east and longitudes 27 and 29 north. This mountain region is inhabited by independent Nosu (Lolo) tribes with a scattering of Chinese in the larger villages. The incidence of leprosy appeared to be high in view of the large number of cases seen by members of the expedition while traversing the country, and this was confirmed by inquiries among some of the leading men of the tribes. Both the tribes folk and the Chinese living among them are affected.

Chinese Mission to Lepers.—This organization was formed in 1926, chiefly by public-spirited and progressive Chinese citizens, primarily to attempt the development of a broad program and an organized effort on the part of the people of China to approach the tremendous leprosy problem of the country. Previously no such effort had been attempted, for the not inconsiderable work of missionary institutions has to do only with the localities in which they are severally located. With funds raised entirely by subscription, the Chinese Mission is aiding in the establishment of leprosaria and is carrying on an educational campaign. The projected leprosy conference in Shanghai is in line with this latter objective.

Japanese leprosy eradication plan.—A copy of a plan for eradicating leprosy from Japan, issued by the Public Health Bureau of the Japanese Ministry of the Interior in October, 1930, has been received by the JOURNAL. Because of the activity of leprosy work in Japan, which has now assumed more than one phase, this plan is printed, in condensed form.

The advanced lepers in Japan number at least 15,000, and the slightly affected cases, if carefully investigated, would be over twice that figure. In the score of years since leprosy prevention work was begun, accommodations for nearly 5,000 lepers have been provided. During these years the leprosy prevention idea has been propagated among the people and the result is the diminution of leprosy.

There is but one eradication plan, to isolate all lepers from the community and accommodate them in the leprosariums. This is not only for public health but also for the welfare of the lepers. During the past years the authorities of Japanese leprosariums have endeavored to improve the conditions and the results are gradually becoming better. There is no hospital atmosphere. Patients are comfortable and happy, and seem to consider that they live in their own villages.

Suppose that there is adequate accommodation in the institutions and all lepers in the country are admitted, and that new cases as they develop in the future are also properly accommodated, thus making complete isolation of the lepers, in a period of ten years the majority of the lepers can be suppressed, and before 20 years leprosy in Japan may be eradicated.

If ten years additional provisions for 10,000 cases are made, these together with those already established will total 15,000 patients,—the present figure of Japanese lepers. Therefore, in ten years almost all leprosy in Japan will be suppressed. If the additional accommodations are for only 5,000 lepers, thus making provision for a total of 10,000, the period of extermination of the disease will be 50 years, and the expenditure will be doubled. Consequently, the fundamental policy of leprosy prevention is to make the accommodation complete as soon as possible.

Some well-to-do lepers as yet have not had the benefit of leprosariums. They live at home, socially outcast and miserable, inaccessible to medical treatment and a danger to their families. For such lepers there might be an area beside the leprosarium where dwellings could be rented, or where land could be rented to those wishing to build houses at their own expense. A plan for such a district for well-to-do lepers is now in progress near one of the Government leprosariums.

With the aim of leprosy extinction, the plans for the extension of leper accommodation are as follows:

1. **Twenty-year Plan.** If the present figure of lepers in Japan is 15,000, new establishments for 10,000 should be provided in addition to the present 5,000 in order to accommodate all the lepers. If all are thus isolated in ten years, after another 10 years the number of lepers will almost disappear. This plan will approximately cost Yen 37,000,000 besides the budget of the present system.

2. **Thirty-Year Plan.** In addition to the existing establishments, new accommodations of 500 persons should be provided each year

for a period of 20 years. As the number of patients decrease year after year, in 20 years all lepers may be completely accommodated, and a further ten years will see the suppression of lepers. This plan requires approximately Yen 40,000,000 besides the present budget.

A fifty-year plan is also set forth. These plans have been computed on the basis of an expenditure of Yen 1,550 per person for building accommodations, and annual expense of Yen 365 per year for maintenance.

Patients in Japanese official leprosaria.—A total of 3,632 patients were in the several official leprosaria in Japan in August, 1932. The numbers that these are supposed to accommodate and the numbers actually in them are shown in the following tabulation:

<i>Institution</i>	<i>Rated Capacity</i>	<i>Actual Number</i>	<i>Difference</i>
Aisei-En (National Leprosarium at Nagashima)	400	452	+ 52
Zinsei Byoin (First District Leprosarium)	1,000	1,088	+ 88
Hokubu Hoyoin (Second District Leprosarium)	340	325	— 15
Sotojima Hoyoin (Third District Leprosarium)	550	591	+ 41
Oshima Ryoyojo (Fourth District Leprosarium)	435	431	— 4
Kyushu Ryoyojo (Fifth District Leprosarium at Kumamoto)	690	715	+ 25
Miyako Ryoyojo	60	30	— 30
Totals	3,475	3,632	+157

Subsidies to private leprosaria in Japan.—The Home Department of the Japanese Government has allotted a total of Yen 31,082 for subsidies for 1932 to the private leprosaria in Japan. These, with the allotments made, are:

	Yen
I-Hai-En, Tokyo Prefecture, operated by the American Presbyterian Mission	3,316
Sei Barunaba Tin, Gumma Prefecture, the Dispensary of the St. Barnaba's Mission to Lepers	13,595
Fukusei Byoin, Shizuoka Prefecture	3,830
Jinkyō Byoin, Minobu, Yamanashi Prefecture, a Buddhist asylum	1,970
Kumamoto Kaishun Byoin, Kumamoto	4,777
Tairoin, Kumamoto	3,794
	—M. Ota.

Research subsidies in Japan.—At a recent meeting, the Anti-Leprosy Society of Japan decided, as one of its undertakings, to grant subsidies for leprosy research. Because of its limited budget only five such subsidies were granted, involving a total of Yen 3,700, out of thirty applications for a total of Yen 40,520.

1. To Seizo Kawamura and Mamoru Uchida, of Kyushu leprosarium (Kyushu Ryoyojo), Yen 200. Subject: Influence of chaulmoogra oil and other oil preparations on rat leprosy.

2. To Ihoe Sakakibara, of Kyushu leprosarium (Kyushu Ryoyojo), Yen 400. Subject: Study of the active principle of chaulmoogra oil.

3. To Naoya Takahashi and Nobuo Mizokami, of the North District leprosarium (Hokubu Hoyoin), Yen 1,500. Subject: The application of the therapeutic preparation "TR" and its chemical study.

4. To Shichizo Kato, Kumamoto Medical College, Yen 600. Subject: Study of the fat metabolism in leprosy and of the fat substance of chaulmoogra oil.

5. To Yukichi Satani and others, Osaka University Medical College, Yen 1,000. Subject: Therapeutic effects, especially of heavy metals, on leprosy.

The Educational Department of the Imperial Government included one subsidy for leprosy work among the monetary grants for natural science subjects for 1932. This was to Professor Toyochi Otabaro, of the Kumamoto Medical College, for a "Study on leprosy."

—M. OTA.

Japanese Dermatological Association.—At the 32nd congress of the Japanese Dermatological Association, held in the Medical Institute of the Hokkaido Imperial University, Saffaro, July 16 to 18, 1932, the following papers on leprosy were read:

(1) On leprous pemphigus, by Yeiso Yamazaki.

(2) On leprous baldness, especially its histological study, by Yuzo Tohyama and Shun Ishizu.

(3) Roentgenological study on the leprous change in the bone, by Yoshinobu Hayashi.

(4) Blood gas amount in the leprosy patients, by Hiroshi Negishi.

(5) Second note on the cultivation of leprous bacilli using leprous nodules as material, by Masao Ota and Saburo Sato.

(6) Findings in Japanese monkey inoculated with leprous tissue and on the pure culture of acid proof bacteria obtained from the

animal's organs, by Takahashi Hashimoto, Shuichiro Kinoshita, and Seishi Yamaguchi.

(7) Acid proof bacteria obtained from water by cultivation, by Takahashi Hashimoto and Tsukichi Sugisawa.

(8) Complement fixation reaction using cultivated leprosy bacilli extract as antigen, by Masao Ota and Takeo Ishibashi.

(9) Complement fixation reaction in leprosy serum, M. K. R., Kahn's reaction and its modified method, by Kazuo Tanaka.

(10) Experimental treatment of leprosy by intradermal injection of mixed ethyl esters of hydrocarpus-oil, with histological observation, by Naohide Ogawa.

(11) Therapeutic effect on leprosy of sodium salt of aurothio-phenol m-carbonic acid, by Yukichi Satani, Tadayasu Tanimura and Hideo Minami.

(12) Rat leprosy in the north-eastern district of Japan, and the pure cultivation of its causative organism, and animal experiments, by Shuzo Asami.

(13) Animal experiment of inoculation of *Mycobacterium phlei*, by Tetsutaro Tsuchida. —M. Ota.

Leper relief in Chosen and Formosa.—The Chosen Leper Relief of the Government-General, has been organized, according to a local newspaper article. Mr. Imaida, Vice-Governor-General, is the President; Mr. Ikeda, Director of the Police Bureau, is Vice-President; and the Chiefs of the Sanitary and Social Affairs Sections are Directors. The Headquarters of the Association will be established in the Government-General Offices, with branches in all parts of Chosen. This organization is expected to render great help in the relief of sufferers from leprosy in Korea. The latest investigation puts the number of lepers there at 8,000, not counting those who have not been brought to notice. Those actually in the hospital on Little Deer Island and at the three other leprosaria are only 2,500. It is understood that arrangements have been made by the Association to establish a large asylum having a capacity for 2,000 inmates as its initial work. Expenditures totalling Yen 1,640,000 are contemplated for 1933-1935, of which Yen 110,000 will be from the State treasury, Yen 170,000 from local funds, Yen 280,000 from a grant-in-aid, and an estimated Yen 330,000 from public subscriptions.

According to another newspaper article the Japan Leprosy Association, at its 5th Conference recently held, submitted to the minister of the Oversea Department and the Governors-General of Chosen and Formosa an appeal for more extensive official efforts toward leper relief in these regions. This petition states that there are 20,000 and 10,000 lepers, respectively, in Korea and Formosa, and that in the former country the Government institution accommodates only 750, and that in the latter country only 100. —A. G. FLETCHER.

Developments in Formosa.—The leprosy problem in Formosa, Japan, has remained practically untouched until within the past decade. There are estimated to be 5,000 cases of leprosy in the island, an incidence of approximately one per thousand of population. The English Presbyterian Mission in the South and the Canadian Presbyterian Mission in the North have done some out-patient work, and the latter in 1926 opened a special dispensary, utilizing for this purpose an abandoned church building. After a few years' experience with this Dr. Gushue-Taylor, superintendent of Mackay Memorial Hospital, realizing the inadequacy of out-patient treatment, commenced an effort to establish an in-patient institution, to be called the Happy Mount Leprosy Colony. In the meantime the Government built a leprosy hospital, with a capacity of 100 patients, which was opened late in 1930.

Toward the Happy Mount enterprise her Majesty The Dowager Empress of Japan graciously donated Yen 5,000, and the Japanese Government of Formosa contributed Yen 25,000. The balance necessary for buildings and equipment has been and is being raised by collection in Formosa and abroad. The estimated budget calls for Yen 200,000 to accommodate 200 patients. There has been organized a juridical personage, half and half of Japanese subjects and foreigners, to hold property and administer the colony. Forty-six acres of land have been secured. Twelve are cultivated to rice, and the remainder is good hill country. Eleven cottages, a church building, and a treatment center are being constructed. Each cottage houses four patients. All buildings are of brick and re-enforced concrete. The object is to admit patients in the earlier stages of leprosy, and as far as possible make them self-supporting.

—G. GUSHE-TAYLOR.

Leprosy conference in Manila.—On October 26, 1932, Dr. Jacobo Fajardo, Director of Health, convened a two-day open meeting on leprosy to which local physicians, members of the legislature, and representatives of the press were invited. The program included ten papers and talks, which with the open discussions dealt with a wide variety of topics, including the problem of segregation and care of leprosy cases in the Philippines and plans for epidemiological studies to be carried on there, the occurrence and significance of the tuberculoid type of lesion in leprosy, the persistence of the bacilli in the organs of patients who have become "negative" under treatment, the occurrence and causes of relapse, the present status of leprosy research in general.

Following these sessions an executive meeting of the leprosy Advisory Board was held to consider various general questions of administrative nature.

Disturbance at Culion.—On May 8, 1932, Manila and United States newspapers carried accounts of a disturbance in the Culion Leper Colony caused by a group of the younger inmates because of the strict regulations against marriage which had been enforced during the past few years. The disaffection, which was widespread, was controlled before any very serious developments took place. The ringleaders were removed to other stations, and after due consideration by the health authorities and social workers the regulations were modified to some extent.

Dissatisfaction in Bucharest.—One hundred and thirty lepers of a colony at Tichilesti threatened to march on Bucharest unless they received better food, according to an Associated Press dispatch from Vienna dated June 9. The situation was said to have arisen because grocers and farmers with long overdue bills against the Government have declined to deliver the normal quantity of supplies to the leper colony.

Personals.—Dr. John Lowe, for several years the medical officer of the Dichpali Leper Hospital, Hyderabad (Deccan), India, has transferred to the leprosy research laboratory at the School of Tropical Medicine in Calcutta. He holds the position previously occupied by Dr. John M. Henderson, who withdrew from leprosy work in 1931.

Howard I. Cole, Ph. D., the Chief Chemist of the Culion Leper Colony, returned to duty in September after a prolonged leave in the United States necessitated by ill health.

Dr. José O. Nolasco, since 1929 Assistant Chief Pathologist at the Culion Colony, has been serving as Acting Chief Pathologist since the resignation of Dr. H. W. Wade, who is now the Medical Director of the Leonard Wood Memorial, with headquarters still at Culion.