

NEWS AND NOTES

Information concerning institutions, organizations, and individuals connected with leprosy work, scientific or other meetings, legislative enactments and other matters of interest.

6 TRAVELING SKIN CLINICS IN THE PHILIPPINES

In July 1955 two special leprosy case-finding teams began operations in the provinces of Cebu and Iloilo under a system new to the Philippines. Each team consists of a physician, a nurse, a technician and a driver-clerk, who were given special training in Manila before being sent to the field. This project is being carried out under a tripartite agreement between the Philippine government, UNICEF, and WHO. The government supplies personnel and operating costs, by far the greater part of the expense involved; UNICEF supplied the vehicles (jeeps), special equipment (microscopes and instruments), and the antileprosy drug (DDS tablets); WHO gave technical advice, which is required when UNICEF enters into a medical project.

Case finding is based on four approaches: (1) examination of contacts of patients from each of the municipalities visited, known to be or to have been in the regional leprosarium; (2) large-scale examination of school-children; (3) operation of general skin clinics, in which some leprosy cases are found; and (4) "information" about known cases obtained from local officials and about suspected cases obtained from members of the public. The team stays but a few weeks in a given municipality to find cases, not attempting intensive, total surveys; the cases found are referred to the Rural Health Unit physician for continuation of the treatment after the team moves on.

In September a group representing the government, UNICEF and WHO visited these areas to ascertain what unforeseen problems had arisen during the first two months of operation, after which it was agreed that the present pilot operation should be extended to a few other areas under specified conditions. The WHO Regional Office for the Western Pacific is especially interested in this field operation, believing it to be of importance for other countries with similar problems.

8 PASO-WHO MEETING

The 8th meeting of the Directing Council, Pan-American Sanitary Organization, and the 7th meeting of the Regional Committee for the Americas, World Health Organization, was held in Washington in September last, attended by representatives of 19 of the 21 American republics and of France, the Netherlands, and the United Kingdom, and also by official observers of certain other countries, certain other agencies of the United Nations, and of some thirteen nongovernmental organizations.

Among the last, the International Leprosy Association was represented by Dr. J. A. Doull, at the request of Dr. E. Muir, and we have been privileged to have a copy of Doull's report.

Considerations of space forbid use of the entire report. One point of interest is that for the year 1956 a total of some \$8.7 millions was expected from various sources, including \$2,100,000 to be raised by assessment of member governments; and of that amount about \$6.4 was budgeted for field programs. Malaria and insect control was to have nearly one-half of the amount, and public health administration nearly one-quarter; other items were to have at most some 5-6%.

Regarding leprosy control activities, it is related that in 1950 the PASB sent Dr. Lauro de Souza Lima to survey the leprosy situation in Bolivia, Colombia, Ecuador, Paraguay, and Peru and to make appropriate recommendations, but that budgetary restrictions prevented further action at that time. In 1954 de Souza Lima again visited Paraguay and made certain recommendations on the basis of which Paraguay requested assistance both from UNICEF and the WHO. [See other news item about Paraguay.] For 1956 and for 1957 the budget of the PASB carries items of \$3,800 annually from WHO funds for a short-term consultant (\$1,300) and fellowship (\$2,500). UNICEF made a grant of \$20,000 in 1955 for supplies and equipment.

In 1955 an allocation of \$10,720 was made from WHO funds for leprosy control in the Caribbean area, to meet the cost of a short-term consultant (again de Souza Lima) who visited the region, including the Guianas, and some training fellowships.

Thus, in terms of financial aid, the participation of the PASO in leprosy control is small. There is, however, a great deal of interest on the part of staff members of the PASB and of representatives of several of the governments. In the discussion Dr. Gonzales, the assistant director, said that the government of Paraguay had requested the collaboration of WHO and UNICEF to combat that disease, and this was the first time that UNICEF's international cooperation extended to this aspect of public health. In 1955 there was initiated a control program based primarily on the use of sulfones, special attention being given to early diagnosis and treatment of cases and to periodic surveillance of contacts, by which means it was hoped to reduce the number of patients requiring hospitalization. Dr. Hyronimus, regional inspector of health for the French West Indies, declares that the attention given to the leprosy campaign had pleased him very much, because this disease constitutes one of the principal scourges of the Caribbean area, and France had put forth considerable effort in connection with it. Leprosy constitutes perhaps the principal, or at least the second most important, public health problem faced by France in its American territories. He stressed the fact that a systematic observation campaign would lead to the discovery of many more cases than it is believed exist, and said that his country would be very gratified to obtain the collaboration of all the countries in combating the disease and achieving its eradication in the Americas. He felt that the leprosy problem does not affect the French territories alone and that there should therefore be international collaboration to achieve a suitable solution. From documents presented by representatives of Mexico and Venezuela it appears that leprosy is discussed in the training courses for physicians and nurses in both of those countries.

THIRD GENERAL ASSEMBLY OF THE C. I. O. M. S.

The Third General Assembly of the Council for International Organizations of Medical Sciences (CIOMS) took place in Paris September 30 and October 1, 1955. Extracts of the transactions of this meeting will appear in the JOURNAL in due course. It may be noted here, however, that as yet the CIOMS has been able to accomplish its task only through

the aid of UNESCO and WHO. Now these two specialized institutions of the United Nations, which have already reduced their grants materially, have let it be understood that hereafter their aid will be gradually decreased and that, in the future, CIOMS will be left to its own resources. Its income then will derive only from fees of the different international societies which are members of this organization.

It will be recalled in connection with the Madrid leprosy congress, CIOMS aided the International Leprosy Association to a certain extent with preliminary expenses, and supplied the simultaneous translation facilities at the time of the meeting.

R. CHAUSSINAND

SECOND NATIONAL LEPROSY CONFERENCE IN CUBA

The September 1955 issue of the *Boletín de la Sociedad Cubana de Dermatología y Sifilografía* appeared as a special issue devoted to the Second National Conference of Leprosy, held in Havana by the Sociedad Cubana de Leprología, March 26-27, 1955, of which mention was made in the last issue of the JOURNAL (p. 334). The program covered only the first of these days, the second one being devoted to social affairs.

The forenoon session was devoted to three assigned topics (*ponencias*): (1) the actual status of the antileprosy campaign in Cuba; (2) the early diagnosis of leprosy; and (3) the value of BCG vaccination in the prophylaxis of leprosy. The afternoon session was open to "free themes," and 8 papers are listed. The evening was devoted to a panel on leprosy, comprising 10 members of whom Dr. Pardo-Castelló served as moderator. Abstracts of these various presentations are being sought. The "conclusions and recommendations" adopted by the meeting appear below.

The closing banquet was held at noon of the second day, and on that occasion the society awarded diplomas of Miembros de Honor Cubanos on Drs. Braulio Sáenz and Vicente Pardo-Castelló. The membership roster contains 56 regular members, 18 Miembros de Honor Extranjeros, and 12 Miembros Corresponsales Extranjeros. These two last lists represent 12 foreign countries, Brazil leading with six representatives.

THE WHO EXPERT ADVISORY PANEL ON LEPROSY

Through the kindness of Dr. Mario Giaquinto, of the Section of Endemo-Epidemic Diseases of WHO, Geneva, under which department falls leprosy, the Panel has been increased to twenty persons, as follows:

DR. E. AGRICOLA	Brazil	DR. A. DUBOIS	Belgium
PROF. G. BERTACCINI	Italy	DR. F. A. JOHANSEN	U.S.A.
DR. R. BOENJAMIN	Indonesia	DR. V. R. KHANOLKAR	India
DR. V. PARDO-CASTELLÓ	Cuba	DR. P. LAVIRON	France
DR. R. CHAUSSINAND	France	DR. E. MUIR	U.K.
DR. R. G. COCHRANE	United Kingdom	DR. J. N. RODRIGUEZ	Philippines
DR. F. CONTRERAS DUEÑAS	Spain	DR. H. C. DE SOUZA-ARAUJO	Brazil
DR. M.A.K. EL DALGAMOUNI	Egypt	DR. N. DE SOUZA CAMPOS	Brazil
DR. DHARMENDRA	India	DR. L. DE SOUZA LIMA	Brazil
DR. J. A. DOULL	U.S.A.	DR. H. W. WADE	U.S.A.

Recent additions are Dr. P. Laviron, for years the director of the Institut Marchoux, at Bamako, French West Africa, and Dr. G. Bertaccini, director of the leprosarium of Acquaviva delle Fonti, near Bari, Italy.

CHANGES AFFECTING LEPROSY PERSONNEL IN ARGENTINA

Information received from Argentina since the recent revolution tells of important changes affecting leprologists of that country. For one thing, Dr. Guillermo Basombrio, professor of dermatology at the University of Buenos Aires, has accepted appointment as head of the leprosy division of the national health service. Dr. Leonidas Llano, who previously occupied the position has been transferred to another post of equal rank in the Ministry of Health. In Cordoba, Dr. Luis Argüello Pitt has been appointed provincial director of public health, and acting professor of dermatology in the local university. The most extensive changes have been in Rosario, where the displeasure of the previous regime had been felt especially severely. Dr. José M. M. Fernandez, who was first appointed temporarily as Rector of the University of Rosario for the period of reorganization, has been restored to his position of professor of dermatology at the medical school and has officially returned to the leprosy department of the Carrasco (municipal) Hospital, where for five years he had not been allowed to enter even as a personal visitor. Drs. Mercau and Carboni have likewise been restored to their positions at the two institutions. Dr. Schujman, who despite his "democratic" views had not been discharged from Carrasco, has returned to the medical school from which he had resigned at the time the others did, and has also been appointed head of the skin department of the Hospital Centenario of the medical school. Back in that department, also, are Drs. Vaccaro, Serial, Castañé Decoud, Pecoraro, Barman and others who had also suffered "disciplinary" action under the previous regime.

AN OLD VIEW OF LEPROSY

The following excerpts from *A Practical Compendium of Diseases of the Skin*, by Jonathan Green, a British dermatologist, which was published in 1841 (Philadelphia: Carey & Hart), has been sent us by Dr. Harry L. Arnold, Jr., of Honolulu, as an interesting example of the idea of leprosy that was held somewhat over a century ago, before the book of Danielssen and Boeck appeared.

"The number of squamous diseases now generally reckoned, amounts to three—*Lepra*, *Psoriasis* and *Pityriasis* . . . [of which] two . . . *Lepra* and *Psoriasis*, have actually been treated by some writers as mere modifications of one and the same disease; and as if to confirm this view, these two affections are observed to occur very frequently together in the same subject . . ."

Under the heading *Lepra, Scaly Leprosy*: "By the word *lepra*, or *lepra vulgaris*, medical writers are now agreed in designating a squamous affection of the skin, characterized by the occurrence of circular scaly patches, raised in the circum-

ference, and, after they have existed for some time, apparently depressed in the centre . . ."

And headed *Case of Lepra Vulgaris*: "A lady . . . came to consult me . . . on account of leprosy, under which she had labored for the last seven years . . . [The] disease . . . extended over the whole of the body, with the exception of the hands, feet and face. The head had been shaved regularly . . . for the convenience of making applications to the spots. The squamous patches . . . varied in size from that of a crown piece to that of a sixpence; they were all of a very regular round shape . . . and . . . covered with thin scales, constantly falling off, but as constantly reproduced."

NEWS ITEMS

U. S. A.: Committee meetings and program at Carville.—More complete and accurate information has been received about the meetings of official committees and the program of papers scheduled for January 10-12 at Carville, Louisiana mentioned in the last issue of the JOURNAL (p. 334). This is to be a joint meeting of the Inter-Bureau Advisory Committee on Leprosy, and the Sub-Committee on Leprosy Research, U. S. P. H. S. Of the Inter-Bureau Committee, Dr. G. H. Hunt, assistant surgeon general, is chairman, and the members are Drs. L. F. Badger, Communicable Disease Center, Atlanta; C. H. Binford, Armed Forces Institute of Pathology, Washington; J. A. Doull, Leonard Wood Memorial, Washington; G. L. Fite, National Institutes of Health, Bethesda; E. M. Gordon, Jr., PHS, Carville; C. K. Himmelsbach, chief of the Division of Hospitals, Washington; E. B. Johnwick, CDC, Atlanta; D. E. Price, Office of the Surgeon General; Charles S. Shepard, Virus Diseases Laboratory, Montgomery; T. H. Tomlinson, NIH, Bethesda; and Dr. Rolla R. Walcott, PHS, Carville. This committee last met at Carville in March 1954, at which time it was recommended, and later approved by the Surgeon General, that basic research on leprosy be encouraged and that the clinical research program at Carville be expanded. The basic research program is being expanded through grants from the National Institutes of Health to workers in several universities and at the Virus Diseases Laboratory, Montgomery. The Sub-Committee on Leprosy Research comprises Dr. C. H. Binford, chairman, and Drs. Badger, Doull, Fite and Shepard. The first two days of the coming meeting will be devoted to sessions which will also be attended by other workers in the leprosy field. About 30 persons are expected to participate. [We have received a copy of the program of the first two days, but expect to use it in connection with a report of the meeting that has been promised.]

Carville on television.—From Sr. Hilary Ross comes word that Carville is to appear in two medical programs on television. Early in 1956 the series "Medic" will present an episode about a discharged patient returning to his home after a period of treatment at Carville. For background material a crew, including the Hollywood actor who was to play the part of the discharged patient, has spent two days there shooting film in several departments of the hospital, including the "Promin room," the eye clinic, the occupational and physical therapy departments, and the laboratory, as well as outside shots. The medical, clinical and nursing staffs all participated, and also some of the patients. The information officer of the Division of Hospitals, Public Health Service, flew down from Washington for liaison between the hospital and the visitors. Early next year Carville will be the subject of another big television show, on the "Medical Horizons" program. The coordinator of that program has already visited the hospital to see the place and confer with the officials concerning a "live" show to be shot from there. [If we understand the jargon, the first of these shows is a "canned" one, shot on film to be run off on television, whereas the second one will be broadcast directly from Carville, with a full "live" cast.]

Control proposals for California.—The following note was received some time ago: The Department of Health, Welfare and Education has access to the minutes of the meeting held April 11-12, 1955, in San Leandro, California, of the California Conference of Local Health Officers, Committee on Administrative Practices. "A consolidated statement titled 'Leprosy Control Program for California' was presented to the Committee; this statement includes both the 'Suggested Leprosy Control Program Procedures.' Certain resolutions were passed." An attempt to learn indirectly the nature of the proposals referred to led to nothing, so this present note is simply for the information they exist.

Burgess' books on Phonograph records.—A recent letter from Carville told of the "reading" of one of the books of Perry Burgess on 23 phonograph records. Inquiry about this method of presenting reading matter to the blind led to the information that the U. S. Congress authorizes the recordings and makes an appropriation to provide for them, a division of the Library of Congress selects the books to be recorded and the recordings are done by expert readers of the Foundation for the Blind. Both of Burgess' books, *Who Walk Alone*, and *Born of Those Years*, have been so recorded.

6 *Colombia: Children at Agua de Dios.*—Dr. Mario Maldonado, who for many years was the head of the leprosy service of Colombia, writes that the isolation village at the Agua de Dios leprosarium, which previously was small and poorly equipped, is now a beautiful sanatorium in which occupational therapy has been greatly increased. Thanks largely to Sr. Guillermo Greiffenstein, who has long taken great interest in such matters, and to Sister Ana María, the children there are receiving excellent care.

8 *Brazil: Restoration of library functions.*—Some two years ago, as recently noted [THE JOURNAL 23 (1955) 85], the functions of the library of the leprosy service of São Paulo were severely curtailed as a measure of economy. Miss Luiza Keffer, librarian, has now given notice that production and distribution of the mimeographed informative bulletin entitled *Summarios Bibliographicos*, which had been published for twenty-three years, was to be resumed. We are also told that the consultation by correspondence service is again available. Furthermore, the *Revista brasileira de Leprologia*, the last issue of which was No. 2 for 1954, has again been entrusted to the library and publication is to be resumed, beginning with a combined issue for Nos. 3-4 of 1954. The library has been moved to a new location, Av. Ademar de Barros, 301, where it has much better accommodations.

6 *Paraguay: New antileprosy campaign project.*—In a recent visit to Paraguay as WHO consultant, Dr. Lauro de Souza Lima participated in the drawing up of plans for a new antileprosy campaign, and in April 1956 he is expected to return there for a year, to inaugurate the new work. During the recent visit of only thirty days he and local colleagues were able to examine 8,979 children from 6 to 15 years of age, but under WHO regulations the findings cannot be divulged. He could, however, assert that Paraguay is one of the most favorable regions for the study of leprology from any desired angle: (1) Prophylaxis: Demonstration of the superiority of the outpatient system over segregation, and of the possibility of controlling the disease by means of dispensaries. (2) Therapy: Demonstration of the superiority of the results of sulfone treatment given in dispensaries over that given in leprosaria. (Why?) (3) Immunology: Demonstration of the real value of the positive lepromin reaction induced by BCG, since the lepromin-negative vaccinated contacts will remain in the foci (at home). (4) Clinical: Clinical aspects of leprosy in infancy, which were found not in accord with what is observed in Brazil.

6 *Argentina: Second meeting of the leprosy society.*—The Sociedad Argentina de Leprologia, according to a neatly printed program that was received in due course, for its second meeting was to have its first trip (*Primeras Jornadas*) to the cities of Corrientes and Resistencia, and to the Sanatorio Maximiliano Aberastury on the Island of Cerrito, August 20-22. The list of papers to be read in three sessions (in Corrientes and Resistencia; at Cerrito there was to be a clinical session) totalled twenty-four. Appropriate social and other events were scheduled.

6 *Expansion of services of the Patronate library.*—The Biblioteca Dr. Enrique P. Fidanza, of the Patronato de Leprosos de la República Argentina, has announced a new service in the form of a projector for the reading of microfilms, thus permitting it to take advantage of the microfilm services established in important foreign libraries.

6 **England: Dr. Schweitzer honored.**—Albert Schweitzer, scientist, missionary, musician, philosopher, and Nobel prize winner who for 41 years has been physician to leprosy patients of the Congo area, says *Science*, was honored on October 19 by Queen Elizabeth with the insignium of an honorary member of the Order of Merit. The presentation took place at a full-scale state ceremony. This order may be held by only 24 living Britons; the only other living non-Briton to be an honorary member is President Eisenhower. Schweitzer's visit to England from his home in Alcaze had received a great deal of attention in the London newspapers. In one interview he said that he would return to Africa in December, after finishing some manuscripts, the subject of which he would not divulge.

Leprosy on the program of a tuberculosis meeting.—"Tuberculosis and Leprosy" was the subject of one session of the Fourth Commonwealth Health and Tuberculosis Conference, held in London last June under the auspices of the National Association for the Prevention of Tuberculosis (NAPT). Three speakers were scheduled: Dr. John Lowe, medical secretary of the British Empire Leprosy Relief Association (who, however, died suddenly before the meeting was held); Dr. Robert Greenhill Cochrane, consultant in leprosy of the Ministry of Health; and Dr. Roland Chaussinand, chief of the Leprosy Service, Institut Pasteur, Paris. Dr. James Ross Innes, senior medical research officer, East African Research Service, was scheduled specifically to participate in the discussion, which was to be summed up by Dr. Reginald Leslie Cheverton, member of the NAPT Conference Committee. (An effort has been made to learn what transpired at this meeting, without success as yet.)

6 **French Equatorial Africa: Mass field treatment.**—An Associated Press dispatch from Brazzaville tells briefly of the extent of the mass campaign that is now under way there—begun, it is understood, in 1954 and now aided by UNICEF. Mention is made of "revolutionary methods which do away with forced segregation"; actually, the method is outpatient treatment in field stations by injections of DDS suspended in chaulmoogra ethyl esters, given once in two weeks. In 1952, it is stated, there were 37,500 officially known cases, with accommodations in the leprosaria for only 2,268. By April 1955, due to willing submission to examination, the number of known cases had increased to 102,000 and those under treatment to 84,700. Mobile squads of African male nurses tour even outlying districts by car, bicycle, boat or on foot for the periodical treatments, and the people have responded so well that they present themselves when the first suspicious signs appear. As for the patients themselves, hope and confidence in the future, it is stated, have replaced despair and resignation.

India: Changes at Calcutta.—Dr. Dharmendra, for many years the officer-in-charge and research officer of the Leprosy Research Department of the School of Tropical Medicine in Calcutta, has relinquished those positions to take up the duties of a newly created office, that of director of leprosy control work of the Government of India. In this new capacity he will render technical advice and help to, and co-ordinate the activities of, the leprosy control centers established by the Union Government in collaboration with different state governments. About 20 centers have already been established, and it is proposed to increase their number to 100 in the next few years. Dr. Dharmendra's headquarters will continue to be at the Leprosy Research Department of the School in Calcutta, but hereafter that will be headed by Dr. N. Mukerjee, who will also take over as editor of *Leprosy in India*.

Second patients' conference.—The second patients' conference was held in January at Akola, Madhya Pradesh (Central Provinces), the same state in which is Amraoti where the first one was held in 1954 [THE JOURNAL 23 (1955) 213]. Most of the organizers were common to the two meetings. The last one, over which Dr. S. S. Kulkarni, deputy minister of health of the state presided, according to a note in *Leprosy in India*, was opened by Dr. Punjabrao Deshmukh, the Union minister of agriculture. Seth Kisanlal Goenka welcomed the delegates, messages of good will

from a number of important personages were read, and Dr. S. G. Patwarhan, president of the Vidarbha Maharogi Seva Mandal, then addressed the conference. How many delegates were present is not said. A number of resolutions were adopted. It has been heard that the patients concerned with these meetings have started a publication in an Indian language something on the lines of the *Carville Star* but on a smaller scale.

Radioactive DDS.—Drs. P. R. Saraiya, V. R. Khanolkar, and A. R. Gopal-Ayengar reported at the International Conference on the Peaceful Uses of Atomic Energy, held in Geneva earlier this year, according to *Science News Letter* picked up by the *Carville Star* and others, that DDS had been tagged with radioactive sulfur at the Government of India's Department of Atomic Energy and the Indian Cancer Research Centre, Bombay. The purpose is to trace the drug's path through the body to see whether or not it shows any preference for nerve tissue. The idea is connected with Khanolkar's belief that the leprosy bacillus follows nerve fibers, perhaps resembling in this respect neurotropic viruses like that of poliomyelitis. The tagged sulfone had been given by mouth to six patients, it is said, and from time to time specimens of tissues were removed for study.

Philippines: Negatives refuse to leave.—Government officials who tried to persuade some 140 negatives to leave the Tala leprosarium near Manila for new homes in a settlement project met with balky resistance. The secretary of health and the social welfare administrator themselves tried to persuade these people of the "new life" and "bright prospects" awaiting them without success. "Our place is here with our families," they are quoted as saying in the newspaper report in hand, "and we would rather die of starvation and be buried here" than be forced out of the leprosarium. (What transpired afterward has not been heard.)

Japan: Next meeting of the Japanese Leprosy Association.—The 29th annual meeting of the Japanese Leprosy Association will be held May 4-5, 1956, at Sendai, under the presidency of Dr. Y. Kamikawa, director of the Tohoku-Shinsei-en National Leprosarium. Two special features of the program will be a symposium on the lepromin reaction, and an address by Dr. S. Nishimura, associate professor of dermatology of the University of Osaka, on murine leprosy as an indicator of the effectiveness of antileprosy chemotherapeutics.

Medical officers' convention.—A brief newspaper dispatch from Tokyo stated that Air Force medical officers from twelve Asian and Pacific nations were to meet on October 31, 1955, "to discuss such diseases as leprosy and tuberculosis."

Trust Territory: Closing and destruction of the Tinian leprosarium.—For a long time we have seen no information about what was being done with the Trust Territories leprosarium on Tinian, apart from the survey made in 1935 by Drs. Sloan and Valentine for the purpose of locating suitable sites for the regional leprosaria which were to take care of the patients after the U. S. Navy should close the Tinian place. On inquiry, Dr. James A. Doull obtained in August the following statement from the Department of the Interior, now in charge of the Trust Territories: "Virtually all of the patients at the leprosarium have been from the Eastern and Western Caroline Islands. These patients are presently being moved to new facilities at Yap and Ponape. It is our understanding that after the removal of these patients, which is to be completed shortly, the Navy will probably close the Tinian Leprosarium." From another source it is learned that small leprosaria have been established by the Trust Territory at Yap, Koror, Ponape and Majuro. The last 23 patients were flown out of Tinian on August 16th. How thoroughly the leprosarium there has been closed has been learned from a newspaper published in Guam, sent in by Dr. Jack W. Millar, of the U. S. Navy, who was the first physician assigned to the Tinian institution and developed it. Although it would have made an excellent hospital for Tinian

Island as that is to be developed in the future, it was deliberately destroyed by fire on August 25th. "Due to health and sanitary reasons the buildings could not be lived in again."

WHO: Surveys and visits.—In recent months WHO has sent consultants to three countries to advise concerning their leprosy problems. Dr. José Gay Prieto, of Madrid, was sent to Indonesia in the late summer for about three months. In September, according to a notice in the *WHO Chronicle*, Dr. M. Dalgamouni, of Cairo, who some years ago had a similar assignment to Ethiopia, was sent to Iran. Most recently Dr. P. Laviron, formerly at the Institut Marchoux, F.W.A., was sent to Iran for a four-month period. No information about any of their observations is available, that being contrary to WHO policy. Dr. Ramon Miguel, of Madrid, who has spent some time in Thailand, has been appointed leprosy adviser to the government of that country to direct a pilot control project in Kan Kaen Province. In November, Dr. M. Giaquinto, from the Geneva headquarters of WHO, visited the Far East as far as the Philippines and Taiwan. In the Philippines he was accompanied by local WHO and UNICEF officials, and by Drs. H. W. Wade and José N. Rodriguez, serving as "temporary consultants," on a brief visit to Cebu to see the leprosy work under way in that provincial center, including one of the two traveling clinics which recently started field work in that region.

PERSONALS

DR. DHARMENDRA has relinquished his position as officer-in-charge of the Leprosy Research Department of the School of Tropical Medicine in Calcutta and Research Worker of the Indian Leprosy Association (formerly the Indian Auxiliary of BELRA) in order to accept another assignment (see India news item). DR. N. MUKERJEE has succeeded him in those positions, including the editorship of *Leprosy in India*.

DR. P. H. J. LAMPE, who for two years and more has been WHO leprosy consultant with the government of Burma, is leaving at the end of the year to accept the post of Deputy Director of the Netherlands Institute for Preventive Medicine at Leyden, in charge of postgraduate courses.

DR. JOON LEW, who recently spent five years in the United States, mostly at the University of California at Los Angeles, a part of the time working on the chemotherapy of rat leprosy, has returned to Korea and is now the dean and professor of microbiology at the Severance Union Medical College, in Seoul.

DR. P. LAVIRON, who after two years in leprosy work in South Seas territories was for seventeen years in French Equatorial Africa where he supervised the construction of and then directed the Institut Marchoux in Bamako, has been relieved of that assignment because of promotion to the rank of colonel in the French colonial medical service, with reassignment to Marseille. There, it is said, he will for one thing be teaching at the Ecole de Médecine Militaire.

DR. JACK W. MILLAR, who for two years was assigned by the U. S. Navy to work with the medical director of the Leonard Wood Memorial, is now commanding officer of the U. S. Naval Medical Research Unit #1 at the University of California, in Berkeley, California.

DR. LAURO DE SOUZA LIMA no longer lives at the Sanatorio Padre Bento, having had to give up his privately owned residence there; his present address is Rua Espirito Santo, 319, São Paulo. He has recently completed a visit to Paraguay as WHO consultant, and is expected to return there in April 1956 for a year's stay.