CORRESPONDENCE

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RESEARCH IN LEPROSY

TO THE EDITOR:

Your inquiry of March 18 concerning the future of leprosy research raises important questions.

1. Is there as much interest in research as formerly? Yes. In the United States, in 1939, eight institutions housed one or more persons who were, or had been, to my knowledge working on leprosy. At the Carville Conference in March, 1958, 23 individuals representing 15 institutions or branches of government gave a total of 30 papers concerned specifically with human or murine leprosy or their causative agents. There were an additional 6 papers on closely related diseases or microorganisms. Furthermore, several workers who attended were planning to investigate some phase of rat or human leprosy. This increased interest probably is not due to stronger motivation toward humanitarian problems, but to the fact that investigators with new tools and ideas are seeking material which presents special challenges to the inquisitive.

2. Among the outstanding young men coming along, will any useful ratio be drawn into leprosy research? The answer to this question depends primarily upon the attitudes of those now interested in leprosy. If we continue to hail each frail hope as a final answer (if only widely and promptly applied), the answer must be "No". Able young men will not be motivated. The sources of philanthropic and government funds will not be challenged by the realities of the problem.

The major lessons of biology do not justify wishful thinking. They show us, on the contrary, that the existence of many species is dependent upon remarkable adaptations; also that these adaptations can be modified in the interests of the species much more readily than they can be disrupted. We therefore must realize and maintain that fundamental knowledge will be needed; that acquisition and application of this knowledge will be challenging and expensive; that soundly developed principles, when applied, may nevertheless be circumvented by the unsuspected versatility of an infectious agent. Respect for a biologic competitor challenges the imagination of younger men. It also excites the concern of the public and of governments. In such an atmosphere, younger men can proceed with assurance that their work will be respected.

The foregoing questions necessitate a consideration of hindrances to

more effective development of leprosy research. Certain of these arise because leprosy is more common in countries which are now coping with seemingly more urgent problems. The remoteness of the leprosy problem and the isolation of many competent workers and spokesmen means that the case for leprosy research has been difficult to present in places where interest and funds can best be generated. In many quarters a sense of responsibility or humanitarian concern remain but an empty ear, awaiting the word. A third factor, which I wish to mention without offering offense, is the fact that leprologists seem in certain respects to be "autoagglutinable." Without intent of being clannish, they believe or say that leprosy is "different" from other infectious diseases. My reasons for decrying this attiude will be stated below. Meanwhile, it must be recognized that any mood which minimizes the constant interest of leprosy workers in basic advances in biology or medicine tend also to separate them from the main channels of steady progress. Worse yet, younger men are made to fear that narrow specialization will isolate them from their contemporaries.

Having looked at the problematic side of the ledger, suggestions seem in order. In the first place, in presenting the case of leprosy research to a philanthropic public and to governments, it can always be stated boldly that leprosy is not simply a major health problem in many parts of the world. It is not necessary that the persons addressed be concerned for the beauty, the health, or the misfortunes of others. In this day and age it can be insisted that the burdens placed upon any society by such a disease eventually are shared by others. Everyone's long-range interests are involved in one way or another.

Secondly, isolation of leprosy workers can be reduced by seeking to integrate certain phases of leprosy research into scientific institutions and by incorporating the management of leprosy patients with existing and future medical services. Segregation is a two-edged sword. It isolates the patient from the public; it also segregates the scientists and the physician from the very tools and experiences which make his work more fruitful.

Thirdly, in a field which needs more favorable conditions for growth it is disastrous to close the irrigation ditches by maintaining that leprosy is "different." The peculiarities of leprosy, on the contrary, should be presented as fascinating variations superimposed upon the universal theme of infectious disease. Admittedly, the infectious agent proliferates slowly. Admittedly, it is a tough agent for the body defenses to cope with. Nevertheless, leprosy begins and ends, and is controlled, by factors which determine the outcome of many other infectious diseases. It presents, in slow motion, opportunities to analyze events which escape notice in less persistent infections. Leprosy and its physiologic modifications of the host offer special examples of basic physiologic problems. It therefore behooves leprosy workers to show younger men where their existing skills

can be applied effectively, without losing stride with progress in science and medicine. Time and experience will broaden their knowledge of the disease to a point where these new workers may be recognized as leaders in the field.

Leonard Wood Memorial Bacteriological Laboratory
Harvard Medical School
Boston 15, Mass. —JOHN H. HANKS, Ph.D.