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## EDITORIALS

*Editorials are written by members of the Editorial Board, and opinions expressed are those of the writers. Any statement that does not meet with agreement will be of service if it but stimulates discussion, to facilitate which the Correspondence section is maintained.*

### THE CHILDREN OF LEPROUS PARENTS

Considered from almost any viewpoint, the children of persons with leprosy are particularly deserving of thoughtful attention. The humanitarian will consider, for one thing, the social handicap that such children often are under, the extreme of which amounts to an ostracism that practically prevents marriage except with members of other leper families. The public health administrator and the research-minded medical man will find them particularly interesting subjects of observation; and the former, considering the special danger of the disease appearing in such children because of the intimacy of their relations with their infected parents and the pronounced susceptibility of extreme youth, will concede to them special importance in its perpetuation and spread in the community, and will wish for the authority and material provision to prevent their infection.

Especially pressing is the problem that exists in leprosy institutions where, whether with sanction or without it, men and women cohabit. Not only are the children born of such unions in the greatest danger of infection if they stay with their parents, but their

presence in the world is often an added burden on the exchequer of the Government or on public charity. Many people consider the fact of births in a leprosy institution a thing discreditable to the authorities and, while they perhaps fail to realize some of the problems of administration in controlling over long periods of time people of the sorts found in most leprosaria and under conditions that exist in them, nevertheless the matter is a problem. Especially is it coming to the fore in these days of reduced budgets.

In many places and on many occasions vasectomy has been advocated. In most instances the suggestion has not been taken seriously. So far as the writer knows, the measure has been applied in leprosy institutions only in Japan. Though as has been recently said<sup>1</sup> the measure is not compulsory there, it is known that in at least some of the Japanese leprosaria where marriage is permitted that measure is required before the desired privilege is granted.

Other countries are less advanced in this respect. In many institutions and communities the status of the matter is determined by strenuous objections on the part of the religious authorities to any measure whatever intended to limit the possibilities of pregnancy. The writer himself has often argued against suggestions that operation should be resorted to, the viewpoint being that people with leprosy today should be looked upon as a medical proposition and not as creatures set apart along with the criminally insane; that we cannot consistently plan to return them to a normal life in the world and at the same time make them abnormal in this respect.

But it may be that the matter needs reconsideration. After all, it is a fact which cannot be changed by avoidance that in many places persons who have or have had leprosy do constitute a group set apart, though they are still imbued with normal instincts and appetites and perhaps less than normal inhibition and control. It may be argued with logic that, both inside the institution and after parole from it, general principles that may be held rigidly for the normal population should be modified in their case.

One has actually seen the principle of a birth-control clinic for a leprosy colony accepted by persons who for normal communities condemn it emphatically. As for operative measures, one would hesitate particularly to advocate their general adoption, but certain circumstances compel one to agree that their employment may be justified under some conditions. One of these circumstances is that

<sup>1</sup> Hayashi, F. *Lep. in India* 5 (1933) 151.

in the care of any large group of patients there comes a time when, in spite of the best of available treatment measures, a greater or smaller proportion of them advance to the point where they obviously have very little chance of recovering sufficiently to be returned to normal life, though they still retain their normal sexual appetites and capabilities. Furthermore, it appears that of those that are paroled as "arrested" cases, most are compelled to live thereafter under very unfavorable conditions and, especially in view of the resulting liability of relapse on the part of a material proportion of them, they cannot be said to lead "normal" lives.

What to do is a question to which there is probably no single, universally applicable answer. The problem of the child of lepers does not grow less insistent of attention as time passes. Measures of one kind and another, adapted to circumstances and conditions, sooner or later must be taken.

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