

## LEPROSY NEWS

*Information concerning institutions, organizations and individuals connected with leprosy work, scientific or other meetings, acts of legislatures, and other matters of interest to leprosy workers. Readers are invited to cooperate by sending in material of such nature.*

### RED CROSS WORK IN THE PHILIPPINES

In or about 1920 an organization called the Philippine Anti-Leprosy Society was formed for the purpose of aiding in certain phases of the leprosy work which the government was carrying on. Its attention was especially directed toward helping the segregated patients in their more personal needs. This work, carried on with varying degrees of activity, was ultimately expanded until the Society had a worker at the Culion colony and a field staff in the more highly leprous regions, where there had come to be considerable numbers of released (paroled) patients many of whom needed help. In 1932 this work was taken over by the Red Cross. A statement on the present activities of their Leper Rehabilitation Service has been provided by Mrs. Bayard Stewart, the field secretary of that service.

In March, 1932, the activities of the Philippine Anti-Leprosy Society were taken over by the Philippine Chapter of the American Red Cross. This was done to abolish one of the numerous drives for funds, to eliminate the administrative expenses required to maintain a separate organization, and to give the relief work for ex-lepers and leper families the benefit of the service of the forty-eight Red Cross Provincial Branches, 819 Red Cross Municipal Auxiliaries, and more than 150 Red Cross dentists, nurses and social workers. This service is now operating as a department of the Philippine Chapter of the American Red Cross. It is called the Department of Home Service and Leper Relief and Rehabilitation.

Special workers for the service are maintained in Manila and Cebu, and a social service center at Culion. Lepers confined there, who have lost contact with their relatives over long periods, are assisted to locate their missing people. Lepers with problems and worries of all kinds are given practical help and advice.

The program consists of measures for the permanent rehabilitation of ex-lepers—those who have been released as “negative” cases, or those in whom the disease has been arrested—and the relief of families of lepers who have social problems or are in some form of distress due to the segregation of a

member of the family. The immediate aims of the workers are to provide work, clothing, temporary shelter and food until something constructive can be done. The ultimate aim is to try to draw out of people who come for help talents which are already in them and to get them to realize these capacities and use them.

Our service to the families of segregated lepers is varied. To a leper's wife or daughter (she herself being absolutely clean and healthy) we give sewing: dental gowns, aprons, flags, covers for chairs used in the clinics and clothing for all ages. If a woman can sell better than sew, we start her in a small business with a few pesos capital. If she can weave we order materials. We assist the family in keeping the children in school, look after their general health and improve home conditions, mend roofs or put in flooring for sanitation during the rainy season. We assist in securing positions for adult children and where possible for the paroled leper. Donation of necessary clothing, school books or food in sickness or emergencies tide them over some critical time of stress. Those whose homes are in Manila come to our own building to sew; to those outside we find means of sending the garments, although our experience indicates that more actual distress exists among our cases in cities than in rural districts where a living may be had from the soil. We often give seeds for planting.

At one leprosarium where there are men and women who can paint, carve or do other manual work we have given tools, brushes and paints. The finished articles, accompanied by a printed signed certificate of safety by sterilization, have been sold and proceeds turned over to the makers.

#### NEWS ITEMS

*Leprosarium attracting tourists.*—Approaching Cebu on the *S. S. Mayon*, which being the finest vessel plying Philippine waters carries many tourists, one has placed before him a breakfast menu on which appears the following: "On the hills of Consolacion, overlooking the sea, you will find the far-famed Eversley Childs Leprosarium, a little world in itself . . . and a beautiful one with its broad playground and lovely gardens." To draw attention to such an institution as a tourist attraction is a far cry from the traditional attitude; it is claimed locally that this is the only leprosarium in the world given such a standing.

*First recorded case in the Philippines.*—When the Spaniards arrived in the Philippines in 1521, and subsequent to the permanent settlement of the Islands in 1565 by Legaspi, the friars and other members of the religious orders were the recorders of events of importance in the Colony. Leprosy was not present in any considerable amount in the Islands, otherwise a disease as well known to them in Europe from early times would hardly have escaped their searching notice. That the disease was present here at an early date there can probably be no doubt, but the first mention of the disease appears to have been made in 1601 by Father Francisco Colin, of the Society of Jesus, who described a case in writing of the missionary endeavors on the island of Leyte.—[From a note in the *Rev. Filipina Med. y Farm.* 22 (1931) 10.]

*Trial of a new drug.*—Arrangements have been made for the clinical trial in leprosy of the new chaulmoogra preparation called chaulphosphate, recently evolved in the Department of Pharmacology of the University of California, which from experimental results obtained there is considered very promising. Dr. H. H. Anderson and his wife, in part assisted financially by E. Lilly and Co., sailed from San Francisco on August 4 for Panama. After inaugurating a clinical trial at the Palo Seco colony there, in conjunction with Dr. H. C. Clark of the Gorgas Memorial laboratory, they will proceed to Brazil where they will spend several months under the auspices of the new International Center, the headquarters of which are at the Instituto Oswaldo Cruz in Rio de Janeiro. The work will be continued and the results ultimately evaluated by other observers at these places.

*Construction at Carville.*—A considerable amount of new public works construction is under way at the U. S. Federal Leprosarium in Louisiana. A much-needed infirmary has recently been opened, release of funds for a large recreation hall is anticipated, and new quarters for ten families of staff members are actually under construction. There has also been built and dedicated a new chapel, a gift of Catholics of the United States to fellow citizens of this faith.

*Protest over a proposed leprosarium.*—Leprosy has increased considerably in Brazil in the last years, according to a news story in the *Strassburger Neue Zeitung*, the disease affecting principally persons belonging to the Indian race and the former primitive inhabitants. In consequence the Brazilian government has planned to establish a home for lepers in Vilmao. To this plan the inhabitants of Vilmao protested. Meetings were called and those present were asked to present a written protest on the grounds that the nearness of a home for lepers would be dangerous to the inhabitants of the city. It was pointed out that the isolation of such inmates could not be guaranteed, as shown by recent reports of outbreaks from leprosaria, in one of which the patients had attempted to go to the governor of the district. The protest meetings were all well attended and naturally the protesting vote was dominant, the written protest carrying not less than 5,000 signatures. It remains to be seen, the article quoted goes on to say, whether the government will proceed to carry out its plan of establishing a leper home in Vilmao, or will seek another place where the inhabitants are not so afraid of leprosy.

*Changes at Agua de Dios.*—The Board of Inspectors of the Agua de Dios Lazaretto, in Colombia, has been abolished, and new offices created to take over its functions, according to *Archivos de Lepra*. A "Section on Lodging" has the duty of housing the patients, purchasing, renting and or improving their quarters; the personnel consists of a chief, at a salary of 120 pesos monthly, a secretary at 60 pesos, an assistant secretary at 50 pesos, and a messenger at 15 pesos. The duty of cleaning the leprosarium was assigned to a "Sanitary Inspection Service," with an inspector at 30 pesos and an assistant inspector at 20 pesos. The examination and audit of the internal revenues of the San Jose estate, and of the release of alcohol, is specified to be primarily a responsibility of the Director.

*South China's problem.*—Under this heading in *Without the Camp* are excerpts from a report by Dr. T. C. Wu, secretary of the Chinese Mission to Lepers. He states that the greater part of the tremendous number of leprosy cases of China are concentrated in the southern region. Victims are to be seen in all the towns there, each of which has its leper village. The general attitude is partly indifferent and partly hostile. In some sections people live and work with leprosy persons in the belief that they will acquire immunity thereby, while elsewhere lepers are not tolerated. In Tsing Yuen the relatives of a leper give him a boat in which he wanders for the rest of his life, and an interesting photograph shows a community of these sampans drawn up along the river bank in a desolate, marshy region. An ex-bandit general in the government service is quoted as saying, when approached on the subject of aiding the lepers of his region: "Leprosy comes from Heaven and you can't fight Heaven."

*Indigenous specialists in China.*—Writing from Jukao, Kiangsu, China, Dr. Lee S. Huizenga says that in that locality there are "leper specialists" whose people have been specialists there for several generations past, one claiming eight generations. This is taken to indicate how long the disease had been known there, for it must have been common a long time before such specialists arose.

*Observations in Tibet.*—Writing about a journey into Tibet, a doctor from Kansu, north-west China, is quoted by Dr. James L. Maxwell, of Shanghai:

"We reached the territory of the notorious Golok tribes whose territory delimits inhabited territory until within 5 days of Lhasa by the northwest road. We had a right royal time everywhere because of the medical work done. In fact, we were received at the court of the King of Ngawa. The kingdom of Ngawa consists of both sedentary and nomadic people. Leprosy was very common amongst the sedentary folk, but not a case did we see among the nomads, although when the latter come in to their winter encampments they are always in fairly close contact with their sedentary neighbours."

*Progress in Korea.*—A correspondent who visited Korea recently writes that the leper work at Fusan and Taiku seems to be progressing steadily.

"The workers there still swear by the whole oil (*Hydnocarpus anthelmintica*), which is very much cheaper than the ethyl esters, and it seems to work with them. The impression gained in South Korea was that leprosy is decidedly on the increase there, but it may be that it is merely more in evidence. Leper beggars seem to frequent almost every small town."

*Distribution of chaulmoogra oil.*—The Japanese Anti-Leprosy Association has hitherto been distributing each month among leprosaria in Japan free of charge, one hundred bottles, each containing 100 gm. of chaulmoogra oil. We are informed that during the present year, by enlarging the manufacturing equipment, two hundred bottles may be produced monthly and will be distributed at the cost of three yen per bottle. It is also planned to produce four hundred 500-gram bottles of chaulmoogra ethyl esters to distribute free of charge for research purposes.

*New clinics in Madras.*—Evidencing the activity of the recently-created Leprosy Relief Council of Madras are newspaper accounts in the *Hindu*, of that

city, telling of the opening of two more local clinics, one in January and the other in February, to encourage the people of the neighborhoods concerned who need leprosy treatment to apply for it. [Though this sort of decentralization may not make for the greatest economy of effort and material, it seems necessary in order to overcome the passive resistance to antileprosy efforts that is interposed by mere distance. In one of the largest leper colonies, where many of the inmates live on farming areas at some distance from the colony center, it was long ago found necessary to establish such local treatment centers in the farming districts to induce the residents to take treatment with reasonable regularity.]

*Jail strike against leprosy.*—A New Delhi dispatch in the *Civil and Military Gazette*, of Lahore, tells of a hunger-strike in a jail at Deoli in protest against the detention of a leper there. A prisoner who had arrived several months before had been found to have leprosy. Though he was given a separate room the feeling against his being kept in the same jail became so high that 55 of the prisoners went on hunger strike, eight of them persisting for six days. The prisoner with leprosy was removed to another institution a few days later. [This is a parallel to an incident that happened in the Philippines a number of years ago, when an inmate of the Culion Colony was sentenced for homicide after having killed a fellow inmate. His transfer to the Insular prison in Manila caused so much disturbance among the other prisoners there that the authorities found it necessary to return him to the leprosarium.]

*A local effort.*—As a rule it is left to central government agencies or to general non-governmental organizations to carry on in a given area whatever antileprosy activities there may be; such work on the part of local agencies is far from common. The *Times of Assam*, of Dibrigarh, India, recently carried an editorial item congratulating the leading public men of Gauhati for establishing an asylum there. This was accomplished through the combined efforts of the Municipal Board, the Local Board, and the Deputy Commissioner.

*Boy Scouts in Ceylon.*—One of the finest of activities for the younger inmates of leprosy institutions is the work of the Boy Scouts and Camp Fire Girls organizations. Troops of these have been organized in the leprosaria of the Philippines and Japan for some years, but little is ever heard of such work in spite of its potential fine influence, both physical and moral. Stories in the *Colombo Daily News* tell of such activities there. Last December two parties of Boy Scouts, one from the Hendala asylum, near Colombo, the other from the Mantivu asylum, near Batticaloa, held a month's camp at Mantivu. This was concluded with a prize day and concert. In January the second anniversary of the Hendala troop was celebrated in that institution with the usual exhibitions, folk dances and a boxing bout.

*A description of Makogai.*—An interesting account of a visit to the Makogai colony by a non-medical observer, printed in the *Irish News*, of Belfast, give a fairly vivid impression of the place. A run of fourteen miles from Suva by boat brings one:

“... to the entrance of a pretty bay on the north-west side of Makogai. This island, one of the Fiji group in the heart of the Pacific, has an area of approximately 2,000 acres. It is two and a half miles long, one and a half

broad, and rises to several commanding peaks in the centre. It is on the palm-fringed shore of Dalice Bay that the leper station is situated. The bay is well protected by encircling reefs, and a stoutly built jetty runs well out into its smooth tidal waters.

"When one sets foot on Makogai one steps into the midst of a colony within a colony, for, though it is within the Colony of Fiji, Makogai contains within its restricted boundaries representatives of most of the races to be found in the South Pacific. There are Europeans and half-castes of the various races, Fijians, Samoans, Solomon Islanders, Indians, Chinese, Rotumans, Nuie Islanders, Karatongans and a Maori from New Zealand. Despite this peculiar mixture of races with their varying creeds this strange colony lives an extraordinarily peaceful and contented life."

*Ogbomosholeper colony.*—In 1932, Dr. B. L. Lockett, a medical missionary working in Nigeria, opened at Ogbomoshole, under the Native Administration there, a small leper colony which he planned should be for early cases only, treatment of which was to be emphasized. Late in 1933 Dr. Lockett died while on leave in the United States. Dr. J. C. Anders is now in charge of the colony, which has twenty five inmates.

*Irish nuns in Uganda.*—Irish Franciscan Sisters working in Uganda, some of whom have been there over thirty years, opened last year a small leper hospital, according to the *Irish Press*, of Dublin. This accommodates only 200, while thousands crave admission; the province has 30,000 of them, it is stated. However, the Sisters have been given a tract of over five square miles by the government, and will build a larger leprosarium as funds permit.

*Increase of leprosy in Angola.*—The disease has increased at an alarming rate in the past twenty years in at least one section of Angola (Portuguese West Africa). This statement is credited by *Without the Camp* to W. S. Gilchrist, a missionary working in Dondi, Bela Vista, who ascribes to it two causes. One is the breaking down of the authority of the native chieftains, who used to enforce the custom of banishing lepers to live—or die—alone in the bush. The other is the recruiting of labor for road-making and other projects, and the consequent herding together of natives from different sections of the country under unhygienic conditions.

*Hurricane wrecks leper settlement.*—Under this heading there appeared in the *Catholic Times*, of London, an account of a hurricane that swept over south-eastern Indo-China, and hit the leper settlement at Qui-Hoa that is conducted by the Franciscan Missionaries of Mary. The homes of the 250 inmates were razed, the hospital almost totally wrecked, the chapel, convent and chaplain's quarters badly damaged. There was one fatality among the inmates.

*Typhoon damage at Osaka.*—An exceptionally destructive Pacific typhoon struck Japan at Osaka and its neighborhood on September 21, causing appalling death and destruction. According to press dispatches in the *Manila Bulletin* the Osaka leprosarium, located on the lowlands near the sea, was overwhelmed by waves. There was uncertainty regarding the number of inmates drowned, but recent information is to the effect that the destruction was such that the surviving patients have been sent elsewhere and the institution closed.