

**INTERNATIONAL JOURNAL OF LEPROSY  
and Other Mycobacterial Diseases**OFFICIAL ORGAN OF THE INTERNATIONAL LEPROSY ASSOCIATION  
PUBLISHED WITH THE AID OF THE  
LEONARD WOOD MEMORIAL

Publication Office: 1200 - 18th St., N.W., Washington, D. C.

VOLUME 34, NUMBER 4

OCTOBER-DECEMBER, 1966

**EDITORIALS**

*Editorials are written by members of the Editorial Board, and occasionally by guest editorial writers at the invitation of the Editor, and opinions expressed are those of the writers.*

**Retrospect and Prospect  
Jubilee Year of International Leprosy Association  
1931-1966**

In the Manila Round Table Conference convened by the Leonard Wood Memorial (American Leprosy Foundation) in January 1931, the idea of an International Leprosy Association was projected and in the same year the action taken at Manila was implemented. In this connection, the names of Perry Burgess, H. W. Wade and Victor Heiser must be warmly remembered. The year 1966, therefore, can be considered as the Silver Jubilee Year of the Association, for it was in 1931 that the first steps were taken to carry out the resolution of the Manila Conference to form an International Leprosy Association, with the election of Dr. Victor G. Heiser as the first President, Dr. H. W. Wade as Editor of the INTERNATIONAL JOURNAL OF LEPROSY and myself as General Secretary-Treasurer.

It is therefore a particular privilege for me to remind the readers of this journal, that the International Leprosy Association has had a worthy history, and an equally worthy part in preparing the ground for

notable advances in leprosy, particularly during the last decade. In doing so, the part Dr. H. W. Wade (President Emeritus of the Association) played must never be forgotten, for the International Leprosy Association was his dream child, and the INTERNATIONAL JOURNAL OF LEPROSY was started under his expert leadership, along with a well chosen Editorial Board. From the initial formative years until now, with its further out-reach to include other mycobacterial diseases, THE JOURNAL has played a significant part in guiding the thought and research work of scientific men throughout the past two decades, and under the skilled editorship of Dr. Esmond R. Long it promises to fulfill more completely the purpose for which it was founded, i.e., to be a medium for the exchange of scientific thought, and a means whereby members of the Association can express their own individual points of view, and thus keep alive the spirit and the aims of the early workers who were convinced

that only in this way could the subject of leprosy be integrated fully into scientific medicine. The Association was started at the height of what might be called the chaulmoogra era, but at the same time when petty doubts were raising their ugly heads as to the real value of treatment. The work in Madras, particularly at the Silver Jubilee Clinic, demonstrated how frequently leprosy was a self-healing disease, and this raised the question if perhaps those who showed the best results of the chaulmoogra treatment would have been healed in any case! The great propensity to self-healing of leprosy must never be lost sight of, because only if this is remembered, will the right balance be struck in regard to our assessment of clinical results.

What of the future? The prospects are indeed bright, for the standard use of DDS is better understood, and some, including the writer of this editorial, believe that if this drug is used in the right way and in the proper dosage—and this has been shown, generally speaking, to be much lower than that usually adopted—it is suitable for all but the minority of patients. This is not the place to enlarge on this subject, but clinical trials on the optimum dose of DDS should be continued and cases followed up with care.

In the early days, the work of Reenstierna and McKinley and Soule on the growth of *M. leprae*, and the possibility of infecting animals, while not altogether successful, pointed the way to further work and interest in animal inoculation. The partially successful work of Cochrane and Pandit *et al.* in Madras on the inoculation of monkeys might be mentioned in this connection. Today, the work of Shepard and Rees on the growth of *M. leprae* in the foot pads of mice opens up a field, not only of great interest, but of practical possibility.

The growth of *M. leprae* on artificial media is still a problem that has eluded the scientific worker. Khanolkar's study of early lesions, followed by Lumsden's most significant attempts, limited because of equally limited facilities, suggests that the key to the growth of *M. leprae* is the Sch-

wann cell and that more attention should be paid to this cell in relation to the growth of *M. leprae* than hitherto. In the field of prophylaxis, the work of Dharmendra, Wardekar and the Latin American leprologists is of great interest. The writer of this editorial is personally of the opinion that DDS should, and can be used as a prophylactic. An experiment has been started in a highly endemic area in South India where a group of villages will be chosen where every man and woman and every child above 4 years of age will be given a weekly dose of DDS. It is hoped thereby to demonstrate the validity of the claim that a small maintenance weekly dose is the most effective means in the control of leprosy.

What can I say in regard to the field of early diagnosis? Just this: that it is being increasingly realized that leprosy starts in the great majority of instances as one area of anesthesia. The writer believes firmly that if leprosy is diagnosed at this stage, the disease is 100 per cent curable. This opinion has been formed through the interrogation of a very large number of patients. Because leprosy is initially a benign and easily treatable disease, it has been suggested that the word leprosy should not be used in this connection. A name Dr. Ross Innes suggested for this very early stage of leprosy is a useful one—mycobacterial neuropathic dermatosis (in lay terms, bacterial neurodermatitis). In this way, early leprosy would be separated from established leprosy and general physicians and neurologists would be more ready to treat and investigate such cases in relation to the whole field of neurology. A patient presenting such early signs should never be sent to a specialist leprologist or a leprosy clinic, for to do so would to isolate him from the main stream of the medical profession.

Tremendous strides have been made in the role of orthopedic surgery and rehabilitation, and the name of Paul W. Brand is respected all over the world for his great contributions to the repair of damaged limbs. The International Society for Rehabilitation of the Disabled under

able leadership has played a most significant part in this wonderful and dramatic story. Three points need, however, to be stressed: (1) Rehabilitation starts with early diagnosis, for whenever a surgeon operates on a hand or a foot, to reestablish function, a physician has failed: (2) Too often, and of necessity, our operative and rehabilitative efforts, successful and dramatic though they be, can be likened to the ambulance at the bottom of the cliff, when what is really needed is a fence at the top. But until we know more about the theory and mechanics of deformity, the ambulance service must continue. This is essential and demands the full and most enthusiastic support of all workers in the field of leprosy. The dictum of one world-known orthopedist and rehabilitation specialist that "it is difficult and sometimes impossible to rehabilitate a blind hand" must be kept in mind. Therefore, the first essential is to train the patient to use the

hand that is to be rehabilitated, before operation, and not leave physiotherapy to be stressed only after the operation is over. In this way, when the surgeon has completed his work, the patient is familiar with the exercises he has to do and the manner of life he must adopt. Thus permanently successful results are more likely to be achieved.

What more can I say? The saga of leprosy is as thrilling as it is hopeful. We have the means and we have the skill; all that is necessary is the determination to pursue our objectives with the unlimited enthusiasm of the early pioneers—Rogers, Heiser, Marchoux, Mitsuda, Wade, Ryrie, Muir, de Souza Lima, de Souza Campos, an international team of great eminence—until we achieve at last that which is possible, to dispel this grim shadow from the face of the world.

—R. G. COCHRANE