

CORRESPONDENCE

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In Defense of the Name "Leprosy"

TO THE EDITOR:

Many doctors and social workers in various parts of the world wish to abandon the word "leprosy," and to call the disease by some other name. We are sympathetic with the problems which have led them to this viewpoint. Nevertheless, to designate by some other name the disease known as "leprosy" has disadvantages, which, in our opinion, outweigh the advantages. The following remarks are based both upon a disinterested study of a scientific problem, and upon a warm personal understanding of the doctors' viewpoint and a sympathy with the leprosy sufferers' dilemma.

The subject will be considered from the following vantage points:

1. Historical background of the word "leprosy." Leprosy cannot be divorced from history and literature; because of this the whole approach to the disease must be viewed in relation to the past. It is impossible to ignore tradition, for medical and lay understanding of the disease have developed through the centuries. One must therefore take into account the whole story of leprosy from its very beginnings, for not to do so is to deny reality.

Etymologically, "leprosy" signifies a scaly dermatosis, the word "lepra" (scaly skin conditions) being related to "liber" (book). Other scaly skin diseases such as psoriasis are no longer confused with leprosy, and the disease entity known throughout many centuries as leprosy has become well defined. Leprosy is one of the many accepted medical terms which has evolved from a somewhat different original meaning.

Biblical "leprosy" was not leprosy. It should be noted, however, that there is no description of leprosy in the Old Testament. When the Bible translators came to translate the Hebrew word, "zaraath" meaning "defilement" they mistranslated it

as "leprosy." The Children of Israel were to be presented unblemished before the Lord, and therefore anything which disfigured a person caused him to be put without the camp. These blemishes or defilements as described in Leviticus included leukoderma, ringworm and other fungus diseases, septic and other skin conditions. But there is no description of leprosy anywhere in the Bible.

Leprosy is believed to have existed in Egypt at the time of the Exodus, for a clay jar was found in a section of the Amenophis III temple depicting a face very similar to that seen in lepromatous leprosy, with leonine facies. The jar dates back to the period 1411-1314 B.C. which brings it within the period of the Exodus. While in Egypt the Children of Israel were separated in the land of Goshen, and throughout their wilderness travellings were a separated people, but when they went into the land of Canaan they soon began to mix and intermarry with the people of the land, and a probable result was that they contracted leprosy. Leprosy was described in India and in China in the sixth century B.C. and there was constant trade between India and Palestine, so that by New Testament times the "zaraath" undoubtedly did include leprosy.

By the time our Lord lived in Palestine leprosy was a known disease. However, there is no description of leprosy given in the New Testament. The Old Testament laws concerning defilement were still followed, and by New Testament times these blemishes would almost certainly have included leprosy as we know it today. When our Lord spoke concerning "leprosy," this would have included all the other defiling conditions as well, for the Bible translators called all the skin defilements "leprosy," and defiled people were spoken of as "lepers."

Thus we see that through a mistranslation of a Biblical word (Hebrew "zaraath") the word leprosy, in the mind of the public has a most unfortunate sinister connotation. Only education will erase this prejudice. Just as today the word "consumptive" is no longer acceptable, so the word "leper" should become obsolete, for there is attached to the word an implication which is most undesirable.

Therefore while "leprosy" is an acceptable and suitable term for the disease, "leper" implying one defiled, should be eliminated entirely. A person having leprosy should be described as a "leprosy patient" or a "leprosy sufferer."

It should be remembered that the name "leprosy" no longer has the same connotation with which it was invested in the centuries before adequate treatment was available, for leprosy has come into the light of scientific achievement and success. The prognosis of a patient today affected by a serious form of the disease has altered immensely from the days before adequate therapy was available. This partly explains the desire of some physicians to rid themselves and their patients from the shackles of history and tradition. However, we need to remove the stigma wrongly attached to the word "leprosy" rather than to abandon the name. It should also be pointed out that leprosy has always been a self-healing disease, and the majority of cases recover without treatment and without stigmata.

2. What is involved in changing an accepted medical term? While medical science benefits from its roots in the past, it is not entirely dependent upon them. Misnomers should not be perpetuated, although to gain acceptance for a new term is somewhat analogous to a nation's changing its highway system from right hand driving to left or its money system to the decimal. "Lepride" is a more suitable term than "tuberculoid" for the high resistance form of the disease, but leprologists have become resigned to the original, somewhat incorrect term.

But is "leprosy" an incorrect term? We believe that it is not.

What then are the supposed advantages of changing it? As medical nomenclature,

the name "leprosy" is satisfactory. However, some physicians and leprosy patients, wishing to dissociate the disease from its original implications, believe that by changing the name they will enable the public to have new attitudes.

On the contrary, to change the name of the disease of leprosy to some other name would encourage the habit of secrecy which is detrimental. Second, to alter a well established medical term would be tantamount to deceiving both the lay and medical public, and would add to the prejudices from which leprosy is struggling to free itself. The name "tuberculosis" has been retained, but the whole concept of the disease has been completely altered as a result of modern advances. By the same token, "leprosy" should be considered in a similar light.

3. Is there a satisfactory substitute for the name "leprosy"? The pseudonym for leprosy is "Hansen's disease." This is unsatisfactory because Hansen did not describe the disease, but a bacillus. Furthermore, to call leprosy "Hansen's disease" or "Hansen's infection" is contrary to modern usage, as proper names are being omitted from medical terminology. As "leprosy" has become well integrated into medicine, to refer to it as "Hansen's disease" is a retrograde step.

An alternative designation might be "Mycobacterial neurodermatosis." This name, although descriptive, is clumsy because of its length, and therefore would not be generally acceptable.

We must also consider the fact that to change the name of leprosy in several major languages would not bring about a change in a host of other languages. Accordingly many millions of people throughout the world would remain unaffected by such a change, and the necessity for reeducation of their attitudes would remain.

Thus, for example, "Periya Viadi" (Tamil) would continue to signify "the great disease," "ukoma" (Swahili), "the end," and "mbiji" (Sukuma), "the disease contracted by rubbing."

4. The doctor-patient relationship. There is a general move in some countries to select an alternative name for leprosy, but to do so would unnecessarily complicate

matters because ultimately the patient would find that any pseudonym which was coined signified leprosy. Therefore, not to be frank and open about the subject would increase the fear of the disease, and adversely affect doctor-patient rapport. The patient would feel that he had been deceived.

5. Education of the public. I have often stated that if a person says he has leprosy, take him seriously. The evidences of the disease are universally known in countries where leprosy is prevalent. Frequently the patient and/or his relatives have diagnosed the condition before going to the physician.

Therefore education of the patient and the public is a most essential part of treatment. Whatever the name given to leprosy, old ideas and prejudices must be eliminated. For instance it is generally believed that leprosy is a hereditary disease; the patient must be taught how the disease is contracted. Another prevalent misconception is that leprosy is incurable; from the very commencement of treatment this false belief must be combatted. The patient must also be educated to the fact that *all deformity is preventable*, and that many are also correctable. The completely erroneous idea that the prognosis is hopeless requires thorough reeducation.

6. The patient's dilemma. The patient's desire that his diagnosis be hidden stems from the general ignorance of the public concerning the true nature of leprosy. All need to learn the truth that *leprosy is a bacterial disease, and not a social stigma*. Unfortunately the patient frequently has to bear the weight of prejudice, and therefore must be encouraged to adopt a common sense attitude toward the disease. It cannot be too strongly emphasized that early treatment results in complete healing of the disease without deformity.

7. What would be the effect on philanthropic individuals and organizations? It is essential that the control of leprosy be integrated into a nation's medical services. However, many countries where leprosy is prevalent are lacking in economic resources, and therefore if the campaign is to be pursued successfully, much reliance must be placed upon philanthropic sources.

Many chronic diseases such as cancer, poliomyelitis, and cerebral palsy need the help of foundations and the general public. To change the name of the disease long known as leprosy would tend to shut off the sources of good will leading to financial aid. This would hinder the campaign in regard to education of the public, and would adversely affect the grants on which research so greatly depends. If tuberculosis were called "Koch's infection," how successful would be the campaign against tuberculosis? By the same token, money raising organizations for the aid of international research workers would be strained to find adequate financial resources with which to study the disease; further, relief organizations would have to stop functioning, to the detriment of millions of leprosy sufferers.

The ultimate answer is the adequate education of the public in regard to the modern approach to leprosy.

Conclusion. In our opinion there is no sufficient reason why the name "leprosy" should be changed. It is a long accepted medical term, and no other nomenclature need steal the glory as leprosy comes into the light of modern scientific achievement.

—ROBERT G. COCHRANE

*Kola Ndoto Hospital
Africa Inland Church
P.O. Box 46, Shinyanga
Tanzania, East Africa
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