## Leprosy: A Psycho-Social-Somatic Phenomenon

To THE EDITOR:

From your timely adaptation of Klingmuller's chapter on terminology in the IJL (42 [1974] 204-208) you conclude that most people thought of as having leprosy (or kusht, or feu-hu, or tenkey-byo, etc.) in different epochs and places were probably the victims of Hansen's bacillus. Moreover, your compilation must have called yours and your readers' attention to the age old and deeply ingrained pejorative overtones of most local appellations for the disease. It is our firm opinion, based on facts and experience in the field, that such ancient overtones will never be erased, no matter how much we strive or how much we spend in useless attempts to enlighten the public with shocking labels.

Our regional label is *lepra*, one of the most degrading insults in Brazil (and Latin America), a synonym for filth, vice, corruption, and *loathsomeness* in Brazilian dictionaries; "the most negative of all medical terms" in the U.S., according to an ample study by Rolston & Chesteen of the University of Louisiana. In spite of our failures in the past we shall keep fighting and looking forward to international cooperation to help us in disconnecting a disease which should be "like any other"—but evidently is not—from its ignominious cultural and terminological background. We would also be pleased to cooperate with workers of other countries who might have arrived at the conclusion, well known in all other areas of human activities, that a good term does convey a message, whereas trying to give status to old and demoralized names is pure waste of time, effort and resources.

The outcasts, beggars, robbers, misers, afflicted, tainted, guilty, sorely tried, and miserables of your compilation, as well as our leprosos, do not and will never suffer from a "disease like any other." They are the most unfortunate victims of that ancient psychosocial-somatic phenomenon known as lepra, sin, punishment, uncleanness, affliction, evil, sorrow, old great sickness, a hellish and unconquerable disease, and misery in most old and modern languages. None of those ancient pejorative terms and defiling concepts will ever disappear from the local cultures. It is time to confess our impotency, stop knocking our heads against stone walls and think of trying other ways.

This is an ample field to be studied in accordance with point 4 of the "subjects for further investigation" set by the Committee on Rehabilitation of the Tenth International Leprosy Congress: "Social anthropology and patient psychology studies as a basis for a better understanding of the patients' viewpoints in order to develop better patient health education" (Int. J. Lepr. 41 [1973] 472-473). What the patients and their unhappy families have been feeling, saying or publishing about the names lepra, kutta, tien ying, etc., should certainly be one of the items of the social researchers' agenda. Presumably, the conclusion will only confirm previous investigations by Letayf in Brazil, Mangiaterra in Argentina, and Rolston, Chesteen and Pearson in the U.S. This may well give an end to the fact that leprologists (current terminology) remain as the only human group who insist that "the customer is always wrong."

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