

LEPROSY NEWS

Information concerning institutions, organizations and individuals connected with leprosy work, scientific or other meetings, legislative enactments, and other matters of interest.

REPORTS OF MEETINGS

INTERNATIONAL LEPROSY ASSOCIATION

MEETING OF THE GENERAL COUNCIL

A meeting of the General Council was held in London on August 29, 1935, shortly before the resignation of Dr. Robert G. Cochrane as General Secretary-Treasurer and the appointment of Dr. E. Muir to that position, made by the President, were to take effect. Members present were, besides Drs. Cochrane and Muir, Prof. E. Marchoux and Dr. H. W. Wade.

The official minutes of the meeting are not available. However, the resignation of Dr. Cochrane was accepted and the appointment of Dr. Muir approved. Dr. Muir's change of status having left vacant the position of vice-president of the Eastern Section, the appointment of Dr. Cochrane to that position pending the next general election was recommended.

A number of changes in the constitution were approved for submission to the membership of the Association. These include provisions: increasing the membership of the General Council (in addition to those who are members *ex-officio*) from four to twelve; prohibiting the President and Vice-President from holding office continuously for more than one term; facilitating the securing of postal votes and the amending of the constitution; making the General Secretary-Treasurer *ex-officio* an Associate Editor of the JOURNAL; permitting appointment of more than one Assistant Editor; and establishing the category of life membership in the Association.

The question of holding a general meeting of the Association in the near future (1937 or 1938) was discussed, and the General officers were authorized to proceed with an inquiry as to its practicability and also as to a suitable meeting place. In the latter connection Egypt was considered as one possibility, though other suggestions were heard, including Paris, Rio de Janeiro and Athens.

FINANCIAL REPORT

The General Secretary-Treasurer submitted, among others, a financial statement for 1934. This, somewhat simplified, is as follows:

STATEMENT OF RECEIPTS AND PAYMENTS FOR THE
YEAR ENDING DECEMBER 31st, 1934

RECEIPTS			PAYMENTS		
	£	s. d.		£	s. d.
Membership dues	254.	14. 1.	Postage and telegrams .	8.	8. 11.
Non-membership sub- scriptions, Interna- tional Journal of Lep- rosy	11.	17. 2.	Printing and stationery	7.	17. 3.
			Accountant's charges .	3.	3. 0.
			Press cuttings	7.	5. 0.
			Secretarial work	20.	0. 0.
			Telephone	15.	0.
			Bank charges	17.	0.
			Transmitted to Inter- national Journal of Leprosy	200.	0. 0.
			Balance, surplus (1934)	18.	11. 3.
Total	£266.	11. 3.	Total	£266.	11. 3.

The item of non-membership subscriptions is actually to the credit of the INTERNATIONAL JOURNAL OF LEPROSY; conversely, the accounts of the JOURNAL show credit item for membership fees received at Manila for the account of the Association. These items, and certain others, are by agreement to be adjusted, but since the Association remits as much of its income as possible to the support of the JOURNAL, these adjustments are solely on the books and do not affect the actual balances of either entity.

INTERNATIONAL JOURNAL OF LEPROSY
FINANCIAL STATEMENT, 1934

RECEIPTS		DISBURSEMENTS	
International Leprosy Asso- ciation (remittance, £200)	P2,014.00	Salaries	P3,900.00
Nonmembership subscriptions	165.34	Printing	4,647.51
Membership dues, Internation- al Leprosy Association ..	50.00	Postage	599.35
Bank Interest	2.87	Telegrams, etc.	77.22
Total	P2,232.21	Translation	194.95
Subsidy, Leonard Wood Me- morial, to cover deficit, 1934,	7,475.82	Sundry expenses	253.58
TOTAL	P9,708.03	Bank discount	41.42
		TOTAL	P9,708.03

REPORTS FROM BRAZIL

GENERAL

Brazil, general.—In 1934 the representative of the State of Pará to the National Assembly presented to the Assembly an exhaustive paper on the problem of leprosy in Brazil. In that report, according to the *Diario da Assembléa Nacional*, he estimated a total of 50,000 lepers in Brazil, distributed as follows:

STATE	POPULATION (THOUSANDS)	ESTIMATED NO. OF CASES	NO. PER 1,000
Acre	150	700	4.66
Amazonas	500	3,000	6.0
Pará	1,500	4,000	2.66
Maranhão	1,200	1,500	1.25
Piauhý	850	200	0.24
Ceará	1,725	1,000	0.58
Rio Grande do Norte	800	150	0.19
Parahybá	1,375	200	0.15
Pernambuco	2,950	1,350	0.46
Alagoas	1,200	100	0.06
Sergipe	600	200	0.33
Bahia	4,250	400	0.09
Espirito Santo	700	800	1.14
Rio de Janeiro	2,000	800	0.40
Districto Federal	1,500	1,500	1.00
São Paulo	6,450	14,900	2.31
Paraná	1,000	1,200	1.20
Santa Catharina	1,000	600	0.60
Rio Grande do Sul	3,000	1,500	0.50
Minas Geraes	7,500	14,900	1.95
Goyaz	775	300	0.39
Matto Grosso	425	700	1.65
TOTAL	41,450	50,000	1.20

São Paulo.—A decree has been issued creating a Department of Leprosy Control, independent of the public health service, and credits have been made available for the improvement of the control work in the state. In July, 1935, an appropriation of 2,722 contos de reis (roughly \$300,000 U. S.) was made to maintain the leprosaria and other antileprosy activities of the state during the second semester of 1935. There are now in São Paulo five leprosaria with about 4,000 patients.

Espirito Santo.—Here, also, a state leprosy control service has been created (July, 1935). Heretofore such services were carried out by the state in cooperation with the federal government. The new department has control of the Itanhenga leprosarium (where it is planned to build new pavilions), and eight dispensaries for leprosy and venereal diseases distributed over the state. This service is one of the best in Brazil.

Minas Geraes.—The assembly is considering including in the new state constitution the requirements that each municipality reserve from 5 to 15 per cent of its revenues to be employed in health work, especially the control of leprosy.

LEPROSARIA

Federal District.—Decision was made by the President of the Republic in July, 1935, to increase the facilities for the isolation of lepers in the Federal District by 700. It was planned to expend 2,020 contos (about \$200,000 U. S.) at the Hospital-Colonia de Curupaity, located at Jacarépaguá, 35 kilometers from the center of Rio de Janeiro. The proposed construction includes pavilions of the "Carville" type, family residences, a hospital, laboratories and an administration building. By the end of 1936 the institution should have accommodations for 1,000 patients, and full modern equipment for the treatment of leprosy.

Rio de Janeiro.—In May, 1935, an appropriation was made for the construction of a leprosarium in the State of Rio de Janeiro. On July 13, the cornerstone for the institution, located in the municipality of Itaboraí, was laid in a ceremony attended by the governor of the state and other high authorities. The leprosarium is planned to receive about 200 patients. The people of the neighborhood protested strongly against the location of the institution.

Espirito Santo.—On May 22, 1935, was inaugurated the leprosarium of the State of Espirito Santo, called the Hospital-Colonia Itanhenga, located twenty kilometers from Victoria, the capital. There is one old asylum, the "Ilha da Cal," with 30 invalid lepers. The state has 505 recorded cases, and an estimated total of 800. The new colony, which had been under construction for a year (the cost met by the federal and state governments jointly), has a capacity of 300 beds and will be increased to 400 or more if necessary. It contains ten pavilions of the Carville type, small residences for leper families, and modern kitchen and dining room. There is an excellent medical pavilion with several consultation and treatment rooms, including a dental clinic, and a laboratory and a pharmacy. Construction of a hospital and staff residences was to be started immediately. The colony has electric power and a good water supply. This achievement is due to the activity of Cap. João Punaro Bley, the governor of the state, and Dr. Pedro Fontes, chief of the leprosy control service. Dr. Souza Araujo assisted in planning the institution and in other ways.

Maranhão.—The new Hospital-Colonia Bomfim, at São Luiz, built with funds provided by the Federal and State governments, was to be inaugurated in June, 1935, whereupon the unsatisfactory old asylum "Hospital do Cavião," founded in 1870, was to be closed. Difficulty arose when the governor of the state criti-

cized the plan of construction and asked the federal government to appropriate 535 contos to rebuild some of the buildings and to complete his plan of control. Dr. C. Miranda, under whose responsibility the institution was built, defended his plan and the construction, holding that it was good enough to receive the 300 patients for which it was designed. In Maranhão there are more than 1,000 cases of leprosy, of which at least two-thirds must be contagious; from this it is evident that this new institution must be enlarged.

São Paulo.—The first state leprosarium of São Paulo, the Asylo-Colônia Santo Angelo, commemorated on August 2nd, 1935, the seventh anniversary of its opening. It has now 1,160 inmates.

Enlargement of the Sanatorium Padre Bento, founded in 1931 by Dr. H. C. de Souza-Araujo, has been provided for, a splendid farm near it is to be purchased for the purpose. It has also been reported that 116 contos have been raised by public subscription to build a recreation club and playground. With these improvements the sanatorium will soon be a model institution, reserved for patients of better social condition.

Pará.—The Lazaropolis do Prata, founded in 1924 by Dr. H. C. de Souza-Araujo, is being enlarged. Previously its capacity was 600; in March, 1935, three new pavilions of a modified Carville type, for 25 patients each, were inaugurated, and also 20 new houses for couples or families of lepers. These have been provided by the Liga Contra a Lepre do Pará. The leprosarium has a new director, Dr. Alfred Bluth, formerly of the Unna clinic in Hamburg, who has replaced Dr. Bernardino L. Rutowitz, who retired after more than thirty years of service to the state.

In 1934 the Federal government contributed 400 contos for control work in Pará.

Amazonas.—A new pavilion is to be built in the Leprosario Belisario Penna, at Paricatuba, with 40 of the 44 contos raised in Manãos city during a "leper week" last June. The rest of this money will be used to aid the Preventorium Menino Jesus for children of lepers.

Minas Geraes.—The São Tarcisio Preventorium, inaugurated in October, 1934, near Bello Horizonte, has been increased by two new pavilions and now has a capacity of 200 children of lepers. This has been done by the Sociedade Mineira de Protecção aos Lazaros.

ACTIVITIES OF PRIVATE ORGANIZATIONS

In some of the foregoing items note was made of cooperation of private organizations. Certain activities of major organizations are worthy of note.

There is in Brazil a Federação das Sociedades de Assistência aos Lazaros e Defeza contra a Lepre, an organization of public-spirited women. In Rio de Janeiro, this organization, during July, 1935, carried on a "campanha da solidariedade" (campaign of solidarity) for the benefit of lepers in the Federal District. The sum of 200 contos was collected, and an equal amount was already in bank. The organization has a large program for the aid of lepers and their

families; it plans to establish near or in the Curupaity federal leprosarium a "crèche" or nursery for children born of leprosy parents, a "grauja" or small agricultural colony for the families of poor inmates of the leprosarium, and a cine theatre for the inmates.

In the state of Rio de Janeiro the municipal government of Niteroy, the capital city, increased the monthly subsidy to the *Sociedad de Assistencia aos Lazaros* from \$250 to \$500 (U. S.) per year. In 1934 this society acquired an island (Ilha do Carvalho) for the location of a nursery for children of leprosy, which will be built in the near future.

In São Paulo a judicial decision was handed down in August, 1935, denying to the *Sociedad de Assistencia* the right to function without the immediate supervision of the department for the control of leprosy.

In Maceió, the capital of Alagoas, a clinic for the treatment of leprosy, the *Dispensario D. Alice Tibiriça*, has been opened. This was built with funds raised by the *Liga Alagoana de Assistencia aos Lazaros*. The state is estimated to have only about 200 to 300 cases, but no census has been made.

A new organization, the *Fundação Paulista contra a Lepra*, was organized in São Paulo last July, to engage in leprosy work. It will cooperate with the state government in leprosy research, assistance to the families of leprosy patients and to patients released from leprosy, protection of children against infection, and will carry on educational propaganda. The organization intends in the future to organize an Institute of Leprology, sanatoria for leprosy, clinics for the diagnosis and treatment of incipient cases, and crèches and preventoria for children. The funds now available are 500 contos de reis.

SPECIALIST COURSE IN MINAS GERAES

The government of the State of Minas Geraes, by a decree issued in May, 1934, has established the principle of giving preference, in making appointments to the leprosy control service, to physicians or technical assistants who have obtained a certificate in leprology. The Medical School of Bello Horizonte (University of Minas Geraes) organized a course which was given, under direction of Prof. A. Aleixo, by members of the faculty of the medical school and officers of the leprosy control service. Nine doctors took the course, which occupied one trimester, and then did practical work in a leprosy clinic or laboratory for another trimester, after which each prepared a thesis. All completed the work, and most of them were engaged for work in the control or study of leprosy, in the State or elsewhere.

[H. C. DE S. A.]

HISTORICAL NOTES FROM GREAT BRITAIN

To many who are actively concerned with one aspect or another of the leprosy situation of the present day, some of whom are apt to have their moments of discouragement and impatience, it is sometimes interesting and refreshing to cast back to things as they were in older times. In the last year or so several accounts have been seen of mediaeval leper homes that existed in different parts of the British Isles, and it may be worth while to take note of them.

THE COLCHESTER LEPER HOSPITAL

By far the most interesting of these accounts, replete with quotations translated from the original Latin records, recounts the foundation—or rather the reconstitution—of an old leper hospital at Colchester, some sixty miles to the northeast of London. This account appeared in the *Essex County Standard*.

St. Mary Magdalen Church in Colchester seems to have been founded by Eudo Dapifer, somewhere about the year 1100, as the chapel of the leper hospital which he then instituted and endowed. The story of the foundation has been told in local histories, but the details of its reconstitution in 1423 by Humphrey, Duke of Gloucester, are to be found only in a series of entries, in Latin, in the "Ledger Book" of St. John's Abbey of Colchester, under the jurisdiction of which it came. It had apparently been badly neglected by the Abbots, who evidently had enjoyed its revenues for some centuries without doing their full duty in return.

In 1423 the place was visited by Prince Humphrey, "by the grace of God, son, brother and uncle of Kings [Henry IV, Henry V and Henry VI, resp.], Duke of Gloucester, Earl of Hainault, of Holland, of Zeeland, and of Pembroke, Lord of Frisia, Great Chamberlain, Protector of the Real of England, Defender of the same Kingdom and of the Anglican Church"—and direct descendant and heir-in-blood of the original founder. The deed which was then drawn sets forth that, having received serious complaint about the deficiencies of the hospital, he had made an inquiry which showed that Eudo Dampifer had founded one chapel and one dwelling to be built for the habitation of lepers and the infirm, and that for its support he and also Kings of England, Gloucester's progenitors, had granted lands, tenements, meadows, feeding-lands, woods, fairs, tithes and oblations, the original deeds of which, together with the statutes of the hospital, had been lost through the neglect of its guardians.

The new deed, here quoted, sets forth that there was to be a resident priest, who should be Master. He was to be a suitable, unbeneficed secular chaplain nominated by the Abbott of St. John's and was to receive £6 a year and all offerings coming to the chapel except those received on the day of St. Mary Magdalen.

The buildings were to be repaired and kept in order, and a strict account of receipts and expenses was to be kept and submitted at the end of each year to the "Visitor." This functionary was to be the Abbott or his deputy, who should visit the hospital at least once a year and correct all defects, excesses or bad rule "at the peril of his soul, as he shall desire to answer in the Day of Judgement."

There were to be always in the hospital *five* lepers "if they can be had," but if not, five poor infirm persons, to be named "Brothers of the Hospital." Their admission was apparently accomplished with a "Form of Presentation and Admission of a Brother to the Hospital." The inmates were to receive seven pence a week, and they were to keep anything they might be given individually by the devout. Gifts for the general group were to be received by the Master, and since it was calculated that the regular income of the hospital would be only £18 annually, such gifts of all kinds were to be used to increase the doles of the inmates.

There was to be provided a chest with three keys, these to be held by the Abbott, the Master, and one other person specified, respectively. In this chest were to be kept the seal, and all deeds, moneys and jewels of the hospital. It was to be opened only in the presence of the three holders of keys.

Regulations for the conduct of the inmates were set forth minutely. These are curious, and are quoted in some detail. The occasions on which devotions were to be made are specified, and also the number of prayers to be said. The only oaths allowed the Brothers were "God knows" (*Deus scit*) and "It is true" (*Verum est*). None should go out except by permission, and then not beyond a specified spot. Brothers speaking ill of each other, or fighting, or causing trouble, or uttering falsehood were to be punished by the Master, and they might forfeit the benefits of the hospital or even be excommunicated. Any Brother sick and fearing death should give half his money and his best garments to the House and, if possible, pay 4d. for a candle, 10d. to two priests, and 4d. to the servitors of the House; the rest, if anything remained, might go to relatives and friends.

A LEPER CHURCH NEAR CANTERBURY

A mile out of Canterbury on the London road, says E. G. Granger in the *Sunday at Home*, of London, is the picturesque hamlet of Harbledown where there is an old leper church. The Hospital of St. Nicolas, founded by Archbishop Lanfranc in the eleventh century, served a community of lepers for two hundred years or so, and when that disease began to die out was used for the sick and aged. Of the hospital buildings only the church now remains. Some thirteenth-century open benches still stand in the nave, and the visitor will notice the pronounced slope of the floor, a device to facilitate the washing out of the church after services.

MEMORIAL TO THE CHESTER LEPER HOSPITAL

The existence of the Chester Leper Hospital and Chapel of St. Giles at Boughton, where in the twelfth century sufferers from the disease were sheltered, was to be memorialized in 1935, according to the *Manchester Guardian*. Chester is a city situated on the west coast, south of Liverpool. The memorial was to be of stone, set in the wall of the old cemetery. It was to bear a true copy of the seal of the leper hospital on which are the words "Sig. Infirmorum de Cestria," and a panel with an inscription setting out historical details connected with the district. This inscription, in part, is as follows:

Here stood the Leper Hospital and Chapel of St. Giles, founded early in the twelfth century and endowed by successive Norman Earls of Chester. They remained in constant use until 1643, when defensive measures during the siege of Chester necessitated the demolition of buildings outside the city walls. The cemetery remained to mark the site, and in time the little village of Spital clustered round it.

HOSPITAL STREET IN GLASGOW

Under the titles "Romances of Glasgow Streets," George Eyre-Todd recounts in the *Glasgow Evening Times* the origin of the name of Hospital Street in that city. He first points out that in most of the parishes of Scotland today there is a "Spital" of some kind, often a farm but just as often merely a wayside house. In most cases these represent the "hospitals" or "hostels"—really inns—of an early time; the name has now been shortened to "hotel." There were other "hospitals" that were merely almshouses; in the time of James IV there was a fashion for founding such institutions. But there were also hospitals with more tragic associations, and it was one of these from which the name of the street in question came.

The existence in Glasgow of the scourge which at one time afflicted feudal countries is now all but forgotten, but the records of the Town Council, though they do not begin until after the Reformation, contain many allusions to lepers and the leper hospital. The disease was of long standing, for in the twelfth-century Life of St. Kentigern it is stated that the Saint was reputed to have cleansed lepers in the city and that others were healed at his tomb. No rank of life was free from it, and King Robert the Bruce himself is understood to have died of it.

There were burgh laws, Acts of Parliament, and papal bulls dealing with leprosy, and the regulations regarding the leper hospital and those afflicted with the disease were very strict, reflecting the fear with which the disease was re-

garded. Lepers were allowed to enter the burghs only on certain days, and then they had to walk apart and give warning of their presence. They were not even allowed to beg except at the gate of their own hospital or at the entrance of the town. They were cut off from all social intercourse, and when they died they were buried in a separate graveyard of their own.

Most of the royal burghs in Scotland appear to have had leper hospitals outside their gates. That at Glasgow, called St. Ninian's Hospital after the name of Scotland's first Christian missionary, stood near the southern end of the great bridge which spanned the Clyde, and travellers coming into the city from that side had to run the gauntlet of the lepers begging at their gate. According to a tradition recorded by M'Ure, the earliest historian of Glasgow, the hospital was built and endowed about 1350 by a Lady Lochow, but whoever the builder was it remained the abode of these folk for more than 300 years. Leprosy did not die out in Scotland until well on in the eighteenth century, but it was evidently extinct in Glasgow when the Town Council at last sold the building and yard of St. Ninian's Hospital to a private owner. All trace of the buildings has long since vanished, but there are reminders of them in the names of Hospital Street and St. Ninian Street.

LEPER HOSPITALS IN IRELAND

When the present city of Belfast was only a ford over the Lagan, says a writer in the *Belfast Irish News*, there were within a short distance three leper hospitals, St. Bride's Spittal House at Carrickfergus, St. Peter's at Kileleif, and St. Nicolas' at Downpatrick.

Samuel M'Skimin, in his *History of Carrickfergus*, writes that a little to the north of the town, on the east of the road leading to Gleno, is a well now called Bride Well where formerly stood a hospital dedicated to St. Bride, called the Spittal House. This was granted Richard Harding at the same time as St. Brigid's Hospital, and for a like period of years; in the deed to Harding it is called "*parcell antique hereditament.*" This was formerly the hospital for lepers. In days gone by Carrickfergus was a celebrated ecclesiastical town.

The hospital for lepers at Kileleif was at the entrance to Strangford Lough. According to the late Bishop Reeves, in his *Down and Connor*, the Church of Kileleif is mentioned by the Four Masters in the year 935. He says: "In the first of these quarter lands is a plot called the Spittal Field, which within memory contained vestiges of an ancient building. These were the remains of an hospital of lepers, which was standing here in the fourteenth century."

It is evident that Ireland was well provided with hospitals for this prevalent disease. Dr. Belcher records the following places, additional to the three that have been mentioned: St. Stephen's at Armagh, Waterford; St. Brigid's at Kilbixy, Westmeath; St. Stephen's at Dublin; Lazar Hill, also at Dublin; St. Mary Magdalene's at Wexford; David de Latimer's Hospital at Hore Abbey; St. Brigid's at Galway; Dungarvan, in County Waterford; St. Brandon's at Clayne, in County Cork; and St. Stephen's, St. Mary Magdalene's and St. Dominick's in places not named. Sir William Wilde mentions St. Brigid's at Lismore,

Dungannon. Nine of these places are on the sea-coast—there are those who associate leprosy with fish eating. One writer says that in Ireland leprosy seems to have existed among, and to have been specially liable to attack, descendants of the Norsemen, and that all the Irish leper hospitals as such were in Norse cities.

These leper hospitals were always to be found connected with some monastic institution. At that time the monks were nearly the only persons with any knowledge of medicine. In England the Augustinian Order looked after the welfare of the lepers. On the Continent, especially during the Crusades when the disease was very prevalent in Europe, the religious and military Order of St. Lazarus was instituted, from whence the name "lazar house;" the Grand Master of this order was always to be a leper. Probably all chronic diseases of the skin, as lupus, eczema and psoriasis, were considered to be forms of leprosy and those afflicted with them were banished to leper houses. The method of examination of the patient for admission to a leper hospital employed on the Continent and in use at Ulm has been handed down to us by Gregorius Horst, who refers to the various questions asked, such as family history, age, length of time ill, habits of life, state of eyebrows, hair, skin feeling, smell, etc. The sensation of the affected part was tested by puncturing with a needle.

ST. GILES' DAY

September first is a "black letter day" on the churchman's calendar, quoting from a note in the *Torquay Times*. St. Giles, who is commemorated on that day, was a Greek by birth but after disposing of his wealth for charitable purposes went to France, where he led the life of a hermit for some years but ultimately became Abbot of Nismes, where he died about 795. He is said to have been specially devoted to the welfare of lepers, and it is for this reason that many of the mediaeval refuges for them were associated with his name. St. Giles' care for lepers is still recalled by the name of the "Community of St. Giles" which does a beneficent work in caring for British sufferers from this disease at East Haningfield, in the diocese of Chelmsford.

THE CEREMONY OF SEPARATION

From an article in which it is stated that the first reliable records of the invasion of Europe date back several hundreds of years before Christ, that Pompey's armies brought the disease to Rome

about 62 B.C., and that by the time of the Crusades it was widespread throughout Europe, the following account is taken of the ceremony of separation that was in vogue.

Persons suspected of the disease were first summoned before a priestly tribunal, and then sent for examination by two or more surgeons. If the surgeon declared it leprosy, the decree of separation was pronounced and read in the parish church. On the following Sunday the leper was fetched from his dwelling by a deputation of priests, laid on a funeral bier, and covered over with a black cloth; and in this manner was borne to the church, the priests chanting the "Liberate Me." In the church the bier was placed upon trestles, and the leper lay there and listened to his funeral service, after which the congregation passed before him, sprinkling him with holy water, and each bestowing alms upon him. The service of the dead being completed, another funeral procession was formed, and with the cross going on in front, the leper was carried to the hovel where he must live unvisited and unattended until death claimed him. Gloves, clappers, and a bread bowl were given to him by the priest, who cast over the hut a handful of earth from the cemetery, and the "De Profundis" was then sung.

"Dead to the world, be thou alive again to God," said the priest, and then bidding him remember that the Church would be ever mindful of him in its prayers, the priest went on to pronounce sentence of deprivation: "I forbid thee to enter any church or monastery, any mill, bakehouse, or market, or any place in which there is a concourse of people; I forbid thee to walk with naked feet or to go out of thy dwelling without thy leper's garment and thy clappers; I forbid thee either to wash thyself or anything thou hast in any river, stream, or fountain; what water thou needest fill it into thy barrel with a bowl. I forbid thee to touch anything thou art bargaining for until thou hast bought it; I forbid thee to enter any tavern; I forbid thee if thou art spoken to in the street to make any answer until thou hast observed the direction of the wind; and I forbid thee to walk in narrow streets. I forbid thee to touch the well or the cord of the well with ungloved hands; I forbid thee to touch or to give anything to children; I forbid thee to eat in any company save that of lepers like thyself; and I bid thee know that when thou diest thy body will be buried in this cavern and not in holy ground." This tremendous and blasting sentence being uttered, the priest planted a wooden cross before the door, hung on it a box for alms—and the leper was left alone.