CHARLES NICOLLE

Dr. Charles Jean Henri Nicolle, born in Rouen in 1866, died on February 28, 1936, in Tunis, where since 1903 he had directed the Institut Pasteur de Tunis. He had contributed widely to the knowledge of tropical medicine, the subjects to which he turned his attention including the leishmaniases, especially of children and of the dog, recurrent fever, and yellow fever. As early as 1909 he transmitted typhus fever to apes and lower animals, and in 1928 was awarded the Nobel Prize for his discovery of the mode of transmission of that infection. It was in the earlier days of his work at Tunis (about 1904-1907) that he carried out his well-known inoculation experiments with leprosy in monkeys and apes.

SAM BJARNJEDINSSON

Dr. Sam Bjarnjedinsson, until recently professor of pharmacology at the Medical High School in Reykjavik, Iceland, died on February 21st, 1936, at the age of 72. From the beginning of the nineties in the last century he took a prominent part in the combating of leprosy in Iceland. At that time this island was the most infected land of Europe, but now the disease has practically disappeared. Bjarnjedinsson was deeply interested in leprosy, and spared himself no trouble in throwing light on various phases of the problem, as is evidenced by the many articles that he wrote on the subject. A few years ago illness compelled him to retire from his teaching position and he moved to Copenhagen, where he was at the time of his death. [H. P. LIE]

NEWS ITEMS

Consolidation of Colombian leprosaria.—It has been learned that the government of Colombia plans to consolidate its three leprosaria at the largest of them, Agua de Dios, which at present has an inmate population of some 5,000. The change will bring this number up to about 7,500 and will make Agua de Dios the largest institution of its kind in the world. This move is contrary to the tendency in some other places, where it is believed that a system of multiple regional stations is less obnoxious to those affected, and therefore more effective in an antileprosy campaign.

Appropriation in Brasil.—Early this year it was announced that the sum of 4,000 contos had been appropriated for the construction and maintenance of leprosaria throughout the country. The location of the new leprosaria remained to be decided. In Venda das Pedras, in the State of Rio, protests were heard against the construction of such an institution there.

Chair of leprology in Rio de Janeiro.—The new medical school (Faculty of Medical Sciences) connected with the Gaffré-Guinele Foundation of Rio de Janeiro, Brazil, has created a chair of leprology and nominated Dr. H. C. de Souza-Aranjo to the professorship. This is the first medical school in America to have a special chair in this subject. The lectures will be given during the fifth year of the medical course, and each year as a postgraduate course.

Surinam, anniversary of leprosarium.—The fortieth anniversary of the foundation of the St. Gérard Majella leprosarium at Paramaribo, Surinam, was celebrated last year. There are some 200 inmates in this institution at present.
Chaulmoogra in the Argentine pharmacopoeia.—It has been recommended that chaulmoogra oil and its derivative ethyl esters be included in the pharmacopoeia of Argentina. Under the designation “chaulmoogra” are specified the oils of Hydnocarpus wightiana, H. anthelmintica, and Taraktogenos kurzii, but it is recommended that the oils of various other species of Hydnocarpus may be used “when their physical and chemical constants are in accord with those of the oils mentioned.”

Leprosy law in Uruguay.—The house of representatives of Uruguay has approved a bill relative to the control of leprosy. This bill, according to La Prensa (Buenos Aires), provides for obligatory confinement of all cases, either in leprosarria or at home. It prohibits entry into the country of foreigners with the disease, and provides that all lepers of foreign nationality now resident in Uruguay, who developed the disease during the first five years of their residence, will be repatriated. It establishes a penalty of 200 to 1,000 pesos for the transportation of persons with manifest leprous lesions. Following the passage of this law, El Pueblo (Montevideo) published a report of the visit of a representative to the pavilion for lepers of the Hospital Fermin Ferrieria. He was informed that there is no occasion for alarm over leprosy in the country, as this disease shows no great tendency to diffusion there. It was indicated that there is disagreement with the rigorous provisions of the new law on the ground that not all cases of leprosy are contagious.

Malaria at Carville.—A United Press dispatch issued in March stated that 170 of the 375 patients in the Federal leprosarium at Carville had acquired malaria, and that 35 employees and members of their families were also affected.

“Shadow of the Orient.”—The British Empire Leprosy Relief Association has adopted an unusual method of raising funds. In Peterborough, England, it staged, with the support of the local Rotary Club, an exhibition called the “Shadow of the Orient.” There were shown various exhibits pertaining to leprosy and leprosy work, apparently mainly pictorial, including a talking cinematograph show. A feature of the affair was an oriental market, with stalls from which might be purchased brassware, lace work, ornaments and various other objects from the East—the visitors being given assurance that none of the things offered for sale had been produced by lepers.

Reenstierna’s serum.—The Swedish-International Press Bureau released an announcement to the effect that Professor John Reenstierna, Professor of Hygiene and Bacteriology at Upsala University, has treated 50 patients in Abyssinia with his serum, all of whom have shown considerable improvement.

Expansion in Spain.—Following the publication of the new leprosy law in Spain, El Sol (Madrid) stated that a leprosarium will now be created in Granada, with a capacity of 400 patients, and another in Galicia for 200. The Pontilles national leprosarium will be enlarged to accommodate 402, and that in the Canary Islands to 150. The expense of subsistence of indigent lepers who go into the government leprosarium will be met by the local districts from which they come, while the other expenses of the antileprosy work will be carried by the state. To promote efficiency with regard to early diagnosis and other matters, the Direction-General of Public Health will prepare literature for distribu-
tion among the general and country physicians, and short courses of lectures will be given in the provincial inspection of health.

_Lepers turned loose in Spain._—According to an Exchange telegram from Madrid, said the Glasgow Herald last February, martial law had been declared in Alicante. "Señor Portelo, the premier, stated that this step had been necessary to deal with the disorders created by the extremists who, among other things, had opened the gate of the leper colony and let the inhabitants loose."

_Portugal plans new colony._—An official order promulgated last year by the Ministry of Public Works and Communications of Portugal, stating that leprosy is on the increase in that country and that the present leprosarium, the Hospital Curry Cabral, is inadequate as regards both location and facilities, created a commission to investigate the matter of location of a colony and to prepare plans of construction.

_Ethiopia._—Sir Aldo Castellani, High Sanitary Commissioner in Eritrea, is reported as saying that the Italian authorities in Ethiopia were organizing special hospitals for advanced cases of leprosy, of which many are seen at large. Other cases were to be treated in clinics that were being established "for the natives who have hitherto been totally deprived of proper medical assistance and have no knowledge of the most elementary hygiene." There have been but two leprosaria in Ethiopia, one established by the Capuchins at Herrar many years ago, and another set up at Addis Ababa with the help of the American Mission to Lepers in 1932. The latter, it is stated, was vacated at the outbreak of the recent invasion and disinfected in preparation for its use as a hospital, the lepers being looked after in another building. It is estimated that there are no fewer than 10,000 cases in the country, in a scattered population of some ten million people.

_Leprosarium in Italian Somaliland._—A lady who visited Italian Somaliland gives a description in Le Jour (Paris), of the island colony at Djelib. Located on an island in the Djouba River, "an earthly paradise of birds, flowers and marvelous fruits," the Vittorio-Bianchi leprosarium was founded in 1927 and named after the first physician, whose life was self-terminated when, it is said, he discovered on himself an anesthetic patch. Started with 5 inmates, it now has 220. The traveller was permitted to visit the place after agreeing to touch nothing, and to take a disinfectant bath and to throw away her shoes afterward.

_A new treatment (Maisin)._—A report from Leopoldville, Belgian Congo (Le Soir, Brussels), in connection with the visit to that colony of Dr. Maisin, professor at the University of Louvaine and director of the Cancer Institute there, states that Dr. Maisin had treated rat leprosy successfully with substances that had been used experimentally in cancer. It was proposed to apply this treatment to human leprosy, at the isolation camp at West Leopoldville where there were 45 cases, and at the leprosaria at Kivu and Nepoko.

_Famine conditions in Nyassaland._—A letter from Nyassaland, Central Africa, to the Daily Telegraph (London), tells of famine conditions which have seriously affected the leper colony there. Special treatment has been stopped because the patients were too weak from hunger to stand the injections. Five of them
A total of [how many is not stated] were dying a day, often from eating a poisonous root or leaf in an effort to stay alive. The famine is said to be the result of an invasion by locusts.

Sterilization of lepers.—The voluntary sterilization of lepers who are willing to submit to it, both men and women, has been decided upon at Jalgaoon, India. Objections have been raised to this measure on the ground that leprosy is not an "inherited" disease, and that if sterilization in India is first applied to lepers it will fall into disrepute. Since children of lepers who are removed at birth do not contract the disease, it is argued, the proposed measure is "an attempt to shirk a duty which society owes to these unfortunate sufferers."

"Lepers wanted."—A not particularly serious comment on an article that appeared in the Presses Médicales about the lepers at Qui-Hon (Annam), was headed: "Lepers wanted, without special training." This, it was suggested, might be the gist of a "help wanted" advertisement in Annam. Taking advantage of the fear of leprosy that exists among the inhabitants, creditors sometimes engage especially repugnant lepers to serve as collectors to call upon debtors who are recalcitrant. "C'est là un moyen à peu près infaillible."

National leprosarium at Shanghai.—The Chinese Medical Journal reports that the national leprosarium, under construction by the Chinese Mission to Lepers in the environs of Shanghai, was formally opened in December, the first unit of twenty buildings having been completed. Dr. Daniel G. Lai, professor of public health of the National Medical College of Shanghai, has been appointed superintendent, and Dr. F. Reiss chief of the clinical department. The institution is designed to care for patients from Shanghai, and to train doctors and nurses in leprosy work. The wards are divided into classes; pay patients are charged from $30 to $15 Mex. per month, while indigent patients will be taught some useful trade. The unoccupied part of the land available is to be used temporarily for agricultural purposes.

Captured friars, China.—Two Franciscan missionaries who were in charge of a leper asylum at Mosimien, in Western Szechwan, near the Tibetan border, said to be the second largest of five colonies maintained by Catholic missionaries in China, were carried off last year during an invasion by Commu nists. The Sisters were not molested, but all food available was taken. A month later no word had been received as to the fate of the abducted men.

Philippine Islands.—President Quezon will recommend to the National Assembly the establishment of three new leprosaria, with a view to abolishing the Culion Leper Colony as soon as possible. The proposed new institutions will be located in the vicinity of Manila, in the western part of northern Luzon, and in the Cagayan Valley to the east. This statement appeared in a recent issue of the Journal of the Philippine Islands Medical Association. However, more recent developments indicate that there is little prospect of the abolition of the Culion colony in the near future, but that the line of development actually in mind is largely in keeping with the recommendations made by the commission appointed by the last Governor-General, and recently published in The Journal [3 (1935) 389].
"Negative barrio" at Cebu.—The barrio, or small village, established near the leprosarium at Cebu by the Philippines Chapter of the American Red Cross for the care of local patients released from the leprosarium, who find themselves unable to make other living arrangements, was formally opened in February. At that time there were 40 persons then in residence.

Violence in the Philippines.—Last May six Moro (Mohammedan Filipino) inmates of the Culion colony decided to return to their own region. Killing four leper fishermen to get their boat, they took to sea and sailed southward. They landed on Aboabo Island, off the east coast of Palawan Island, to get supplies and there killed three more persons. Farther south, at Bonobo, they attacked a Chinese merchant but were driven off by townfolk. These, according to the press dispatches, fearing infection, made no attempt to arrest the raiders and allowed them to sail away.

Personals.—Dr. Robert G. Cochran, after making an investigation of the leprosy work in Ceylon, has assumed duty as Medical Officer at the Lady Willingdon Leprosy Settlement at Chingleput, near Madras, and has been appointed to the executive body of the Indian Council of the British Empire Leprosy Relief Association.

H. I. Cole, Ph.D., engaged by the Health Organization of the League of Nations as research chemist at the International Leprosy Center at Rio de Janeiro, has renewed his contract for another year.

Surgeon General H. S. Cumming, U.S.P.H.S., has retired from his position. His successor, Dr. Thomas Parran, Jr., has taken Dr. Cumming's place as a member of the Advisory Medical Board of the Leonard Wood Memorial.

Dr. J. M. M. Fernandez, who recently made a world tour of leprosy institutions that occupied a full year, is connected with the leprosy department of the Carrasco Hospital of Rosario, Argentina, which is directed by the department of dermatology of the School of Medicine.

Dr. J. A. Gomes, of the Asylo Colonia de Aymores, in S. Paulo, Brazil, died on February 13, 1936.

Dr. J. Nairn Hay, in charge of the leprosarium in Paraguay, went on leave to Great Britain last June for reasons of health.

Dr. E. R. Kellesberg, who is in charge of a leper colony with 500 patients at Luebo, in the Belgian Congo, has returned to his post after a furlough.

Dr. P. H. J. Lampe, of Batavia, has been appointed director of the recently organized Queen Wilhelmina Institute for Leprosy Research in that city.

Dr. Cristobal Manalang, of Manila, was tendered a banquet by his colleagues on March 14, 1936, to celebrate his having been awarded a medal and a diploma by the French Government in recognition of his scientific labors.

Dr. Gordon A. Ryrie, director of the Sungei Buloh Leprosy Settlement, S. M. S., has returned to his post after a furlough, visiting institutions in India en route.