

OBITUARY

Aaron Benedict Abiel Karat, M.D., F.R.C.P., F.R.C.P.(E)

1931–1982



With the passing of Dr. Benty Karat on 14 March 1982 the community of leprosy scientists has lost one of its keenest minds. The worldwide fellowship of leprosy sufferers has lost one of its most compassionate and hard working physicians. All of us who knew him will retain his example of unswerving devotion to science combined with a love of his fellow men and a faith in God that was strong enough to sustain him through his long and painful last illness.

All of these qualities were brought into focus in his last few weeks of life. At the age of 50, and at the peak of his intellectual ability, he knew that his malignant melanoma was beyond the reach of treatment and that he had only a few months to live. His response was to plunge himself into a day-and-night program to bring as much as possible of his research work to completion and to shape it for posthumous publication.

With his collaborating statistician from India and other fellow workers beside his bed, he refused pain medication for fear it would dull his ability to think and work. Between his working sessions he was a source of cheer and of faith to his wife and sorrowing friends.

Aaron Benedict (Benty) Abiel Karat obtained his medical degree from the Christian Medical College at Vellore, India, in 1958. He worked in various hospitals in London, while studying for his membership of the Royal Colleges of Physicians of London and Edinburgh. He obtained his MRCP and MRCP (E) in 1963. In 1978 he received the honor of election as FRCP. He returned to India in 1964 and became lecturer, senior lecturer, and then consultant physician at the Christian Medical College.

He also served as consultant physician and then as superintendent of the nearby Schieffelin Leprosy Research Sanatorium of Karigiri.

Dr. Benty Karat met his wife Saku when they were medical students together. She became an orthopedic surgeon. At Karigiri, this dynamic couple organized research work that soon led to worldwide interest and acclaim. Dr. Karat explored visceral disease in leprosy, and he improved the system of record keeping in the field programs of Gudyatham Taluk so that it became an effective tool in the study of the epidemiology of leprosy. At the same time he explored ways of simplifying sophisticated methods of investigation so that they could be used in areas where leprosy was prevalent. He succeeded in growing *Mycobacterium leprae* in the foot pads of mice without thermoregulation. He studied the patterns of neurological involvement in relation to erythema nodosum leprosum and in relation to various regimens of medication. He conducted well-controlled and double-blind trials of clofazimine, indomethacin, and other drugs in relation to reaction. His studies ranged all the way from the most sophisticated biochemical, histopathological, and immunological studies to very simple and practical tests for estimation of early problems in patients in mass control programs. Many of his more than 50 contributions to medical literature were published in the JOURNAL.

One of Dr. Karat's attributes was an ability to see through a tangle of apparently conflicting opinions and writings, and fasten on to the issues that were of real significance and that needed to be pursued. He had great lucidity of expression and was an excellent and inspiring teacher. He travelled widely and lectured in many countries of Asia and Africa, as well as in Europe. As has happened to other men of vision, he found it was hard in a poor country to convince others of the need for money and facilities to support a wide spectrum of

research. The Swedish Radda Barnen Foundation was outstanding in their early recognition of his ability and their generous support of his work.

After having worked for a while in Bangalore as consultant physician to the Church of South India Hospital and as honorary Professor of Medicine at St. John's Medical College, he returned to the United Kingdom where he worked as consultant physician first in Birkenhead and then in Sunderland. Here he developed special interests in geriatric medicine and gastroenterology. As a physician he put all of his unique talent into the understanding of individual needs of people. The counterpart to the far-reaching vision of the scientist opening up new

frontiers was the deep perceptiveness of the physician to whom one patient was significant.

I was the examiner who was responsible for evaluating Dr. Karat's potential when he first applied to medical college in India. He was the only student to whom I have ever given an 'A' across the board. He never lowered that standard. Now he can look back and say "I have fought a good fight, I have finished my course. I have kept the Faith . . ."

He is survived by his wife Dr. Sakunthala and by his son and two daughters to all of whom we extend our sympathy.

—Paul W. Brand