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## **EDITORIALS**

Editorials are written by members of the Editorial Board, and opinions expressed are those of the writers. Any statement that does not meet with agreement will be of service if it but stimulates discussion, for which provision is made elsewhere.

## SHOULD THE PUBLIC BE INFORMED?

A recent number of the *Indian Medical Journal* was devoted entirely to the subject of leprosy. In an editorial the following statement was made:

"While it is necessary for purposes of scientific discussion and research to maintain and cultivate such niceties of distinction between the infective and the non-infective type or stage, it is, we believe, rather dangerous to carry this fact to the attention of the un-discriminating public. It would merely enhance without any advantage the danger of greater promiscuity and reduce the salutary fear of infection. Our plea, therefore, to the leprosy workers is that they should not stress on nor hint at the non-infectious stage and type of this disease in their propaganda among the public. That will forfeit the very purpose of propaganda."

The above excerpt was quoted by The Lancet, which expressed a contrary opinion:

"With this statement we disagree, on the ground that there is in practice great advantage in a distinction between infectious and non-infectious cases. In India more than half the cases belong to the latter category, and in an immense number the hope of recovery

<sup>&</sup>lt;sup>1</sup>Indian Medical Journal (1936) July. <sup>2</sup>The Lancet 2 (1936) 699.

depends on the patient being able to retain his employment and his place in society. If counted infectious, he must lose his work and be isolated from his fellows, and the mental and physical depression that follows will favour the rapid increase of the disease. After all, more than half the cases of leprosy in India are no more capable of spreading leprous infection than cases of gland and bone tuberculosis are capable of spreading infection with the latter disease. In both diseases the 'closed' form of the disease may advance to the 'open', but both in individual prognosis and in public health propaganda a clear distinction should be made between the two. Physicians, through ignorance or carelessness, may mistake the one for the other, but that is no reason why this very important distinction should not be made."

The periodical which expressed the view to which this objection is made is the organ of the All-India Medical Licentiates' Association, whose membership includes many of the physicians who bear the brunt of medical practice in India. They, if anyone, must understand the psychology and the social problems of their people, and the considered opinion of the editor of their publication should be given serious consideration. It is regrettable that the reasons for his opinion are not expressed. It does not appear that objection is taken to the idea itself that some cases are noninfectious, as some people object to it on the ground that it is an assumption that has not been proved. Apparently the majority view is accepted that cases of certain kinds are at least relatively noninfectious. The viewpoint seems to be that fear of leprosy as a whole, in any form, is an essential feature of an antileprosy campaign.

Yet blind, unreasoning fear of leprosy, whether natural to a people or engendered in them by inculcation of a viewpoint originally foreign to them, is responsible for much of the misery of its victims. It is in considerable part responsible for the peculiar status of the disease from the social and public health viewpoints, which in most countries makes it impossible to deal with it in a rational manner. It is difficult to see how in a country like India, where because of the vast numbers of lepers in all walks of life (not to mention other factors) it admittedly would be impossible, even if desirable, to provide institutional care for all cases on any basis whatever, anything is to be gained by not informing the people as to differences in the disease that affect them fundamentally. How else, for example, could a man with the cutaneous type of the disease understand why he is urged to leave his family and enter an institution, or at least to live strictly apart, while no such restriction is recommended to the

man with the neural type? How else could a family or community be expected to receive back a patient released from an institution as no longer of danger to his fellows?

The hope held out not so long since that the establishment of outpatient treatment clinics throughout India would solve the leprosy problem there has proved over-optimistic and leprosy workers in that country are forced to seek another approach. They hold that leprosy has to be looked upon as one of the many public health problems, though with recognition of its peculiar features and consequences and special provisions for dealing with it. One of the fundamental requirements in public health activities against diseases that affect a country is to give the public guidance, and that can be done effectively only through intelligent cooperation. Progress in enlightening and thus helping the backward masses is discouragingly slow, especially with regard to the chronic diseases, but it surely will not be aided by withholding essential information.