

## LEPROSY NEWS

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

### THE CAIRO CONFERENCE

To further the development of plans for the leprosy conference to be held in Cairo next March, Professor Khalil Bey, secretary of the organizing committee appointed by the Egyptian Government,<sup>1</sup> visited London in August to confer with Dr. E. Muir, General Secretary-Treasurer of the International Leprosy Association. Two communications from the latter, dated August 11th and 16th, which are summarized below, afford the latest information on the subject that is available as this issue goes to press, early in October. In many respects the plans are as yet tentative, but it may be assumed that they indicate in its essentials the one that will be followed.

It is proposed that the conference start on Monday, March 21st, at 10 a.m., with a formal opening ceremony to be attended by high officials of the Egyptian Government, and at which speeches will be made by representatives of various countries. No scientific session will be held on the first day, to provide ample opportunity for registration of members and for a meeting of the General Council of the International Leprosy Association.

General sessions of the conference for the reading of papers will be held daily on the five succeeding days, Tuesday to Saturday, inclusive, from 9 a.m. to (nominally) 1 p.m. The afternoons and evenings will be left free for entertainments and other functions, and to give sufficient time for meetings of committees. It is understood that there will be facilities in the meeting hall for the showing of pictures by authors. An epidiascope and cinema projectors (35 and 16 mm.) will be available. The last meeting of the conference will be held on Monday, March 28th, when resolutions prepared by committees will be submitted to the Conference.

In preparation for the conference it is the intention to issue a booklet giving: (a) resumés of papers to be presented at the Conference, (b) information regarding travel facilities in Egypt,

<sup>1</sup>For the full committee see page 368, preceding issue of THE JOURNAL.

(c) the program of the Conference, and (d) the entertainments connected with the Conference. This booklet, to be printed in Egypt, will be sent out about the end of January to those whom it can reach before they leave home; sufficient copies will be available to supply others when they arrive in Egypt.

The General Secretary-Treasurer of the International Leprosy Association has requested that brief synopses, not to exceed 200 words, of all papers to be read be in his hands by the end of October, 1937, and that copies of the full papers be sent to reach him by the middle of February, 1938. All communications should be sent him at 131 Baker Street, London, W.1, England, until the end of February, after which time he will be in Cairo.

A rough program of the division of subjects for discussion has been tentatively put forward, as follows:

1. The infectiousness of bacteriologically negative or almost negative cases.
2. Compulsory and voluntary segregation.
3. Classification of leprosy.
4. Tuberculoid type of leprosy.
5. Treatment.
6. Cultivation of *M. leprae*.
7. Miscellaneous.

It is contemplated that after the Conference the Egyptian Government will prepare a volume containing all the papers and resolutions, etc., to be sent to all members of the Conference. To this end recording secretaries will be appointed by the Egyptian Government and, probably, by the Association.

In this connection it has been proposed that a "contribution" (presumably in the form of a registration fee) be levied. The basis and amount of this fee is under discussion, but the amount contemplated with respect to members of the conference in whose favor there may be no exemption is one pound sterling.

Plans for entertainments are in the formulative stage. It has been suggested that there may be an official reception by the King or by some high dignitary of the Egyptian Government; that the International Leprosy Association may sponsor an affair, perhaps an afternoon tea; and that there will probably be one or more banquets. A suggestion has been received that there be an Association dinner, the individual members attending to pay the per-plate costs for themselves and their guests. There is a possibility that one or more tours may be arranged for conference members at the Government's expense.

*Concessions in rates.*—There will be a 50 percent reduction in

fares on Egyptian railways. How long before the Conference begins this rate will be effective, and how long afterward it will be available, has not been decided.

The Société Misr. de Navigation Maritime is arranging for a 50 percent reduction on steamer fares leaving Marseilles on or about March 1st and 15th. The return fare will be £20 first class and £14 second class. The matter is under consideration by other Mediterranean lines.

Other steamship companies plying between Egypt and the Far East, Europe and America have been approached with regard to reductions of their fares. We are informed by Dr. V. G. Heiser, president of the Association, that one Atlantic steamship line has offered a round-trip tourist rate of \$319 from New York to Alexandria, and that some such rate may be offered by all lines crossing the Atlantic.

There will be a 30 percent reduction of the rates of large hotels. A list of pensions and smaller hotels is in preparation; it is understood that the charges in such places are from 6 shillings per day upwards, inclusive. The Church Missionary Society will accommodate a limited number of medical missionaries, as will the Y.M.C.A., at rates varying from 5s. to 7s. 6d. per day. Those wishing this accommodation should notify the General Secretary-Treasurer of the Association as soon as possible. To facilitate the making of arrangements, all persons who plan to attend the meeting should inform him of their intention.

#### INFORMATION FOR VISITORS TO EGYPT

The following information has been gleaned from literature supplied by the travel agency of the Egyptian Government and by Messrs. Thos. Cook and Sons, Ltd., and the American Express, all of which have offices in Cairo. Fares, hotel rates, etc., are the regular rates.

#### STEAMSHIP LINES

Information regarding sailings and fares of the numerous steamship lines that touch at Egypt from the Atlantic side of Europe, the Americas and the Far East is obtainable from local sources. Information regarding sailings from Mediterranean ports, obtained from a folder issued by the Egyptian State Tourist Office, is given below, supplemented to a certain extent from other sources.

*Misr Line.*—From Marseilles to Alexandria via Genoa, and vice versa. Departures fortnightly on Wednesdays. Five days to Alexandria; second day call at Genoa (One day from London to Marseilles by rail, via Paris.)

Fares, S. S. EL NIL, First class £25, second class £17. S. S. KANSAR, first class £23, second class tourist £12. Discounts for return tickets. (See announcement by the General Secretary-Treasurer of the International Leprosy Association regarding special rates for members of the leprosy conference.)

*Khedivial Mail Line.*—From Marseilles to Piraeus and Alexandria. Departure weekly on Wednesdays, S. S. MOHAMED ALI EL-KAHIR and KHEDIVE ISMAIL. Five days to Alexandria. Fares: first class £26, second class £17.

*Lloyd Triestino (Flotte Riunite).*—(a) From Barcelona and Genoa. Sailings fortnightly on Thursdays, S. S. ESPERIA. Fares: from Barcelona £34, and 23 according to class; from Genoa £30 and 20. (b) From Trieste-Venice, sailings weekly on Saturdays. Fares: first class from £30 to 22, according to the ship; other classes to correspond. Discounts for return tickets.

*Jugoslavenski Lloyd.*—From Trieste and Split to Piraeus and Alexandria. Sailings fortnightly, on Fridays, S. S. PRINCESA OLGA. Fares: £27 and 12. Discounts on return tickets.

*Service Maritime Roumain.*—From Constantza to Istambul, Piraeus and Alexandria. Sailings weekly. Fares: 1,180 and 832 French francs.

*Peninsula and Oriental S. N. Co.*—From London or Marseilles to Port Said. Fares (tourists' return tickets): from Marseilles, £20 or 22; from London, £26 or 28.

*Messageries Maritimes.*—From Marseilles to Alexandria. Sailings weekly. Fares: £24 to 30 and £16 to 20.

#### OVERLAND ROUTE

The overland route to Egypt via Stamboul is said to be becoming increasingly popular, particularly to those who dislike a long sea journey. The route is by the Simplon-Orient Express to Constantinople, thence through Asia Minor, Syria and Palestine. Daily from Calais to Constantinople in through sleeping-cars (first or second class), without change. Cross to Haidar Pacha and continue in through sleepers to Tripoli (twice weekly), by automobile to Haifa and rail to Cairo; or by steamer between Beyrout and Haifa. Cairo can be reached from London on the evening of the ninth day.

#### AIR SERVICES

*Imperial Airways.*—From London, Paris, Brindisi and Athens to Alexandria. Four mails per week. Fares: £40, 38, 23 and 14 from the points of departure mentioned.

*K. L. M. (Royal Dutch Air Lines).*—From London and Amsterdam (or intermediate points touched). Two mails per week.

#### SERVICES IN EGYPT

*Railways.*—(a) Alexandria-Cairo: Seven departures daily. Fares: first class P.T.104½, second class P.T.52½; Pullman, P.T.25 additional.

(b) Port Said-Cairo: Three departures daily, 8.00, 12.30 and 18.30; time, five hours for the first, four for the others. Fares: first class P.T.116½, second class P.T.58½; Pullman, P.T.25 additional.

(c) Suez (Port Tewfik) to Cairo: Three departures daily, at 7.00, 10.35 and 17.20; time, six hours for the first two, five hours for the last.

No free allowance of baggage is given on the Egyptian State Railways, but passengers are allowed to take into the compartment with them clothing and other objects for personal use during the journey (umbrellas, blankets, small baskets and handbags) provided they can be placed on the rack or under the seat and the weight does not exceed 25 kilograms (55 lbs). The rate for registration of luggage from Port Said to Cairo, 48 piastres per 100 kilograms, plus a stamp and registration fee of  $2\frac{1}{2}$  piastres per package.

*Misir Airwork*.—Cairo to Alexandria (Almaza Airport to Dekheila Airport): 7.30, 11.30 and 16.30, daily. Alexandria to Cairo: 8.40, 12.4 and 17.40, daily. Length of trip, 1 hour. Fare: P.T.110 single, 209 return.

*Motor car*.—Arrangements can be made for travel from Port Said, or from Suez across the desert, to Cairo by automobile. From Port Said the trip takes about five hours; from Suez about three hours.

## HOTELS, ETC. IN CAIRO

<i>Hotels:</i>	P. T
SEMIRAMIS HOTEL.....	180
SHEPHEARD'S HOTEL.....	160
CONTINENTAL SAVOY.....	140
MENA HOUSE, Pyramids.....	130
METROPOLITAN HOTEL.....	100
VICTORIA HOTEL.....	95
NATIONAL HOTEL, Soliman Pacha Street.....	95
THE MAYFAIR, Sh. Aziz Osman, Gezira.....	65
MORANDI, Fouad El Awal Street.....	60
EXTADEY, Fouad El Awal Street.....	55
LUNA PARK HOTEL, Sh. Ibrahim Pacha.....	50
WINDSOR HOTEL, Sh. Ibrahim Pacha.....	50
 <i>Hotel-pensions:</i>	
CECIL HOUSE, Off. Soliman Pasha No. 6.....	60
ANGLO-SUISSE, Antikhana Street.....	50
MAFFET (French Pension), Emad el Dine Street.....	50
RICHE, Kasr el Nil Street.....	50
TERMINUS, Emad el Dine Street.....	45
SUISSE, Antikhana Street.....	40
 <i>Pensions:</i>	
WHITE HOUSE, El Amir Fouad Saint Gezira.....	75
NILE HOUSE, Gezira.....	65
CROMER HOUSE, Zamalek.....	60
GRESHAM HOUSE, Soliman Pacha Street.....	60
GEZIRA GUEST HOUSE, Gezira.....	60
REGENT HOUSE, El Amir Mohamed Street.....	60
AUSONIA, Soliman Pacha Street.....	50
HANSA, Zamalek.....	50
KENILWORTH PENSION, Kasr el Nil Street.....	50
MY HOUSE, Fouad El Awal Street.....	50
RENNER, Emad el Dine Street.....	50
VIENNOISE, Antikhana Street.....	50
YORK HOUSE, Manakh Street.....	50

ROMA, Emad el Dine Street.....	45
AUSTRIA, Manakh Street.....	40
GARDEN CITY, 80, Kasr el Aini Street.....	40
NATIONAL HOUSE, Kasr el Nil Street.....	40
VILLA HOCHSTEIN, Maadi.....	40

*Bathing pools*.—MENA HOUSE, Pyramids.. MEADI SPORTING CLUB. HELIOPOLIS SPORTING CLUB.

*Tea-Rooms*: GROPPI, American restaurant, patisserie-confiserie, dancing (four branches). SAULT, Maison Nouvelle, Kasr El Nil Street.

*Dancing*: CONTINENTAL CABARET. KIT-KAT, varieties, Zamelek. PICCADILLY, varieties, Pyramids Road.

*Cinemas*: ROYAL, Abdin Street. METROPOLE, Fual el Awal Avenue. DIANA, Elfi Bey Street. TRIOMPHE, Emad El Dine Street. COSMO, Emad El Dine Street. LA POTINIÈRE, Soliman Pacha Street. FEMINA, Emad El Dine Street. MIAMI, Soliman Pacha Street. ROXY, Heliopolis. OASIS, Heliopolis.

*Theatres, etc.*: ROYAL OPERA HOUSE, Ibrahim Pacha Square. ALHAMBRA, Emad El Dine Street. EZBEKIA GARDEN THEATRE. MAJESTIC, Emad El Dine Street. AMERICAN UNIVERSITY ORIENTAL HALL, 67, Sheikh Rihan Street. INSTITUT ROYAL DE MUSIQUE ARABE, Malika Nazli Street.

*Museums*: EGYPTIAN MUSEUM, daily except Mondays; fee P.T.10. ARABIC MUSEUM, daily except Fridays; fee P.T.10. COPTIC MUSEUM, daily except Sundays; fee P.T.5. GEOLOGICAL MUSEUM (Garden of Ministry of Public Works), open 9 to 13 daily except Fridays and holidays; entrance free. COTON MUSEUM (park of the Royal Agricultural Society, Gezira), open 9 to 13:30 except Fridays and holidays; entrance free. AGRICULTURAL MUSEUM (Ministry of Agriculture, Giza Dokki); entrance free. RAILWAY MUSEUM (Main Station, Cairo, of the E.S.R.), open 8 to 13 except Mondays; fee P.T.2. MUSEUM AND LIBRARY OF THE ROYAL GEOGRAPHICAL SOCIETY (Kasr-el-Aini Street), open 9 to 13 and 15 to 17; entrance free. ZOOLOGICAL GARDENS, open from 8 a.m. till sunset; fee P.T.1. AQUARIUM (Isle of Gezira), open from 8. to sunset fee P.T. 0.5 except Fridays, Sundays and holidays, P.T.1. IRRIGATION MUSEUM Barrages, open every day except Fridays and holidays, entrance free.

[Hotels, etc., in Alexandria, Port Said, Heliopolis, Helwan (the last two in the vicinity of Cairo), Luxor and Aswan, with rates, are also listed in the folder issued by the Egyptian State Tourist Office.]

#### MISCELLANEOUS

*Landing*.—The travel agencies offer facilities for transferring passengers between shore and ship. At Port Said, for example, Cook charges 40 piastres per person (reduction for families), the service including (a) conveyance from steamer to Customs House, or vice versa, (b) transfer of all personal baggage from the customs to station or hotel, or vice versa, and (c) quay dues and gratuities to porters, exclusive of customs porters. Transfer of baggage from the quay to the customs, and vice versa, is affected by the customs authorities, who make a charge of 2 piastres for each package.

Passengers arriving at Port Said by certain steamship lines are landed free, with their baggage, to the Customs House. The travel agencies' interpreters will take charge of the baggage there, assist the passengers through



the customs, and transfer them to hotel or station. (Charge by Cook, 30 piastres per person.)

Passengers from the East may land at Suez, or go through the canal to Port Said (88 miles, about 12 hours). Those landing at Suez may make the trip to Cairo by rail, or by automobile across the desert by arrangement with a travel agency, which will assist in the landing transfer of persons and baggage as at Port Said.

*Passports.*—A passport with a valid Egyptian visa is necessary, and is useful in obtaining admission to certain places of interest, to obtain letters from the Poste Restante, and to establish identity whenever required. For transit passengers who make short visits to Cairo and rejoin their ships, visas are not required but a police permit must be obtained before disembarking.

*Customs.*—Passengers must be present at the Customs house for the examination of their baggage. The examination is thoroughly performed, the objects chiefly sought being tobacco and cigars, which are highly taxed. Import duty and dues are charged on new objects in baggage accompanying tourists, and on all articles, whether new or old, arriving as unaccompanied baggage. On leaving the country luggage is liable to be examined. Export duty is charged on antiquities, the exportation of which is governed by regulation.

*Taxes.*—It is stated in some of the literature available that no taxes are claimed in Egypt from travellers. Elsewhere, however, it is stated that all passengers to Egypt must pay a quarantine tax of 15 piastres on landing and the same on embarking.

*Money and coinage.*—The Egyptian pound (£E), contains 100 piastres, and each piastre 10 millièmes. It is worth 20s. 6d. or five dollars (U.S.). A piastre (piastre tariff, P.T.) is worth 2½d. or 5 cents; a millième 1/4d. or ½ cent. An English pound or sovereign is worth 97.5 P.T., a dollar 19.5 P.T.

Silver coins are the *riyâl*, or dollar, worth 20 piastres; the half and quarter *riyâl*, worth 10 and 5 piastres respectively, and the 2-piastre and 1-piastre pieces. In nickel there are pieces worth 1 piastre and 5, 2 and 1 millièmes.

*Official time.*—That of the 30th meridian East of Greenwich (East European time), two hours fast of West European (or Greenwich) time, one hour fast of Central European time. The day begins at sunset according to Mohammedans and Jews, and at sunrise according to the Copts.

*Postage rates.*—Inland: 5 millièmes per 30 grams or fraction. Great Britain, colonies and dominions: 15 millièmes per 20 grams or fraction, and 13 millièmes per 20 grams or fraction thereafter. Other countries: 20 millièmes per 20 grams or fraction, and 13 millièmes per 20 grams or fraction thereafter. Registration 20 millièmes.

*Dragomen.*—Reliable dragomen (guides) can be engaged from the established tourist companies or from the State Dragomen's Bureau, 53 Ibrahim Pacha Street (Tel. 926-10). Fees: In Cairo, P.T.30 per day; outside Cairo, P.T.50 per day.

*Porters.*—Fees at railway stations P.T.½ for each piece of luggage. At ports, P.T.4 for each piece of luggage.

*Baksheesh.*—Cook's literature calls attention to the pernicious practice of indiscriminately bestowing baksheesh to the inhabitants of the Nile villages and other places visited by tourists in the winter season, which results in an un-

healthy tendency on the part of the people and much inconvenience to travellers. The only remedy for the universal mendacity that is encountered rests with the latter, and it is advised that money be bestowed only in return for some actual service rendered or in cases of evident and established distress.

*Tours in Egypt.*—Information concerning visits to points of interest in and around Cairo, in Upper Egypt, and in Palestine, etc., is abundantly available in the literature of the travel agencies.

#### BRAZIL

[*The Revista Brasileiro de Leprologia* has commented upon the inaccuracy of a note on leprosy in Brazil which was recently published in this department, from a source mentioned at the time. We print here an apparently authentic statement, credited to Dr. E. Agricola, Director of the State Sanitary Services of the Ministry of Education and Public Health, in *Diario de Norte*, Rio de Janeiro, Jan. 11, 1936. From a translation by Dr. J. W. Lindsay of an abstract in *Bol. San. Panamericana* 15 (1936) April.—EDITOR.]

There exist in Brazil no less than 31,920 lepers, which gives a rate of 0.7 per 1,000 inhabitants. The highest rates are for Acre, 3.2; Amazonas, 2.7; Pará, 2.4; São Paulo, 1.0; Minas Geraes, 1.0; and Maranhão, 0.9; the lowest is that of Bahia, 0.06. Leprosy contacts—persons that have had or still have contact with lepers—are estimated to number 127,680, a figure which reveals one of the most urgent aspects of the problem.

For the isolation of lepers there are in the country twenty-three leprosaria with 8,675 beds. Eight are of hospital type, fourteen of colony type, and one is a sanatorium. Fourteen are State institutions, 8 are private, and 1 belongs to the Central Government, which also subsidizes four of the other establishments. There are eight preventive establishments now working, three of which belong to the States while five are private institutions. They are distributed throughout the country; Amazonas, Pará, Ceará, Minas Geraes, Paraná and the Federal District (Rio de Janeiro) have one each, and São Paulo two. In these institutions some 500 children born of lepers are housed. Dispensaries, so necessary in the antileprosy campaign, are not sufficiently well distributed throughout Brazil. There are only about 8 that are devoted exclusively to leprosy work, though there are fourteen "mixed" dispensaries in which are run conjointly services for venereal diseases, leprosy, and other health department activities.

The statistics available give a fairly approximate idea of the leprosy situation.

In the state of Espiritu Santo, for example, where the leprosy campaign is being conducted in accordance with the most modern principles, the official



figures for 1927 gave the number of lepers in the whole of that state as 22. In 1929 Dr. Pedro Fontes began a census which revealed 340 cases, while in 1932 and 1933, 61 more cases were found, and in 1934 another 104 cases. From 1931 to 1934 the known cases increased by 165. During the same period 54 patients died, leaving a total of 451. If the same percentage of increase is applied to the general census (as far as it is known), there is an approximate total of 40,000 lepers in Brazil. In Paraná things are not much different. In 1919 Souza-Araujo found 380 cases, and in 1931 he found 494. In 1923 Barros Barretto gave the number as 357, and in 1928 Madeiros put it at 392, but in 1934 Monra reported 1,009 cases.

Official figures presented last year to the Camara dos Deputados include the following:

<i>State</i>	<i>Cases</i>	<i>Leprosaria</i>	<i>Cases</i>
Acre (Territory) .....	400	Rio Branco.....	55
Amazonas.....	1,250	Paricatuba.....	300
Para.....	4,000	Prata	}..... 853
		Tocunduba )	
Maranhão.....	1,130	Fond. S. Lazaro.....	30
Piani.....	200	Canafistula.....	208
Ceara.....	800	Vila S. Francisco.....	100
Rio Grande de Norte.....	150		
Paraiba.....	200		
Pernambuco.....	1,000		
Alugôas.....	100		
Sergipe.....	10		
Boia.....	300	D. R. de Menezes.....	42
Espirito Santo.....	450	Itanhenga.....	200
Estado do Rio.....	295		
Distrito Federal.....	1,569	Curupaiti	}..... 390
		Hosp. dos Lazaros )	
Minas Geraes.....	8,690	Santa Isabela.....	1,000
São Paulo.....	8,000	Santo Angelo	}..... 5,500
		Padre Bento	
		Cocães	
		Pirapitinguy	
		Aimorés	}..... 400
		São Roque.....	
Paraná.....	1,010		
Santa Catarina.....	500		
Rio Grande do Sul.....	600		
Mato Grosso.....	100		
<b>TOTAL.....</b>	<b>30,754</b>	<b>TOTAL.....</b>	<b>9,078</b>

São Paulo is setting an admirable example in frankly realizing the situation and facing the problem with decision and firmness. Minas Geraes has already made great progress, but much yet remains to be done. Unfortunately, the majority of the other states are not in a position to follow such good examples.

The government of the State of São Paulo (says the *Revista Leprologia de São Paulo*), has made an autonomous department of the Inspectorate of Leprosy Prophylaxis. This office, in 1934, had under observation 1,277 new patients, 313 from the capital, 939 from the inland districts, and 25 from other states. Of these, 582 were native Brazilians, 389 were Brazilians born of foreigners, and 306



Distribution of antileprosy institutions in Brazil 1936 (H. C. de Souza-Araujo). Symbol 1, leprosarium in operation; 2, leprosarium under construction; 3, leper hospital; 4, preventorium for children; 5, leper asylum; 6, leprosy clinic (dispensary); 7, private institution.

were foreigners. There were 431 cases of nerve leprosy (34 percent), 64 of cutaneous leprosy (5 percent), and 782 of the mixed form (61 percent). Of these patients 1,002 (79 percent) were interned. At the end of that year the total number of segregated cases was 3,795,

of whom 1,125 were in the Santo Angelo asylum-colony, 1,381 in the Pirapitinguy colony, 442 in Aymores colony, 519 in the Cocaes colony, and 328 in the Sanatorio Padre Bento. From 1924 to the end of 1934 a total of 8,666 new patients was observed; of these 1,266 (15 percent) had died, 430 were under treatment at dispensaries, and 207 were discharged conditionally under parole. In 1934 there were 269 deaths, and 201 patients deserted. The report of the "Contacts" Section for 1934 gave the following figures: negative cases 2,835, suspects 32, diseased 41. Besides those another 1,157 contacts were examined by the regional services and dispensaries, which makes a total of 4,095 contacts examined.

In a report in the *South American Journal*, London, it is stated that of the 8,000 lepers officially credited to São Paulo many have come from other states in order to obtain the benefits of the assistance and treatment that is given them there. It would seem to be a cause of some irritation to the authorities of the state that figures on the numbers of lepers should be published without adequate explanation as to the apparently very large number in the state.

Since the foregoing was received for publication Dr. H. C. de Souza-Araujo has supplied the following tabulation relating to leprosy in Brazil, and the map reproduced herewith which shows the distribution of antileprosy institutions in that country in 1936.

*Leprosy in Brazil, 1936 (de Souza-Araujo).*

State	Population	Lepers		Estimated number	Rate per thousand
		Recorded	Isolated		
Amazonas.....	483,256	1,486	500	3,000	6.20
Pará.....	1,812,767	3,965	848	4,000	2.20
Maranhão.....	1,344,878	1,130	100	1,700	1.20
Piauí.....	966,022	92	52	250	0.26
Ceará.....	1,848,462	781	246	1,000	0.54
R. G. do Norte.....	901,404	200	125	250	0.27
Parabyba.....	1,612,910	120	—	300	0.18
Pernambuco.....	3,428,927	567	250	1,350	0.39
Alagoas.....	1,339,510	47	6	200	0.14
Sergipe.....	595,312	89	—	200	0.33
Bahia.....	4,720,757	115	61	400	0.09
Espirito Santo.....	833,276	675	38	982	1.10
Rio de Janeiro.....	2,326,540	400	35	1,150	0.49
Distrito Federal.....	1,700,532	1,607	400	1,200	0.70
Minas Geraes.....	8,598,140	2,425	1,304	14,000	1.62
São Paulo.....	7,871,750	8,599	5,620	13,000	1.62
Paraná.....	1,213,520	848	346	1,272	1.04
Santa Catharina.....	1,179,886	668	—	1,336	1.13
R. G. do Sul.....	3,577,302	174	37	1,500	0.42
Goyaz.....	875,196	2,178	53	2,300	0.34
Matto Grosso.....	435,346	—	58	350	0.86
Territorio do Acre.....	129,181	245	55	700	5.40
TOTALS.....	47,794,874	26,411	10,134	50,440	1.1

## PLANS FOR AUSTRALIA

At a meeting of the National Health and Medical Research Council, held at Hobart, Tasmania, on February 1, 1937, presided over by Dr. J. H. L. Cumpston, Director-General of Health, Commonwealth Department of Health, the following resolutions concerning leprosy were adopted, according to *The Medical Journal of Australia* [1 (1937) 382.]

The council views with some concern the tendency of leprosy to spread in two of the States amongst aborigines and to a lesser but definite extent amongst whites, and makes the following recommendations:

1. It is imperative that any leper discovered in Australia should be placed under conditions permitting of full modern medical treatment and continuous and immediate laboratory facilities, and under the continuous supervision of a medical man with special knowledge of leprosy.

2. It is important that each State which has not the necessary powers should provide full legal powers for the periodical examination and any necessary detention of persons (a) suspected of being infected with leprosy and (b) who have been in contact with a known case of leprosy.

3. Because of the desirability of intensive study of early cases and of the progress of the disease among aborigines, Commonwealth assistance to the extent of £500 per annum might be afforded to assist this work at a selected spot in the Palm Island group, and assistance might be afforded to Western Australia also to permit of extension of the survey and examination of aborigines.

These resolutions, it appears, are in line with ones previously adopted by the Federal Health Council, the question having been raised by the Minister for Health. As quoted by *The West Australian* (Perth) that body resolved that:

(a) The control of leprosy among aborigines should be carried on in the closest association with the authorities responsible for the welfare of the aborigines; (b) the control of leprosy among Europeans and Asiatics could not advantageously be separated from the public health administration of the States concerned; but in view of the gravity and social aspects of leprosy, it is important that all possible steps directed towards its eradication and control should be taken.

The council considers that this disease calls for special and early consideration in any examination of the directions in which Commonwealth financial assistance for public health purposes may be applied. Such assistance might well be directed towards (a) an intensive study of the earlier stages of leprosy; (b) a review of the efficacy of the present rigid system of isolation as contrasted with a rational system of periodic inspection of contacts and perhaps also of patients.

LOIS SANITAIRES ITALIENNES<sup>1</sup>

## SECTION IV. MESURES CONTRE LA LÈPRE

ART. 286.—Les personnes atteintes de manifestations contagieuses de la lèpre sont reçues et soignées dans les divisions spéciales des cliniques dermosyphilopathiques et des hôpitaux ordinaires. Les frais entraînés par l'hospitalisation des malades pauvres, limitée à la période au cours de laquelle ils sont contagieux, sont à la charge de l'Etat et prélevés sur le budget du Ministère de l'Intérieur. Il est fait exception pour les institutions hospitalières ayant le traitement de la lèpre dans leurs attributions et vis-à-vis desquelles seront appliquées, en ce qui concerne l'affectation des dépenses, les règles spéciales fixées par leurs statuts et règlements respectifs.

ART. 287.—En vue de l'institution dans les cliniques et hôpitaux des divisions spéciales mentionnées dans l'article précédent, de Ministère de l'Intérieur stipule avec les organismes intéressés des conventions spéciales dans lesquelles sont fixées les conditions techniques auxquelles elles devront satisfaire, les modalités de leur fonctionnement, les conditions d'admission au traitement et le prix de journée d'hospitalisation. Ce dernier ne peut être supérieur à la moyenne arithmétique entre le prix des soins médicaux et celui des soins chirurgicaux en vigueur dans l'hôpital considéré. Là où existe une clinique dermosyphilopathique rattachée à une Université il sera, autant que possible, spécifié dans les conventions que la direction des services de traitement de la lèpre sera confiée au directeur de la clinique.

ART. 288.—Les médecins condotti et les autres médecins praticiens ne peuvent refuser de délivrer gratuitement des certificats d'hospitalisation aux pauvres atteints de la lèpre. La légalisation en est faite sans frais.

ART. 289.—Le Ministre de l'Intérieur peut accorder des subventions pour l'exécution des mesures relatives à la prophylaxie et au traitement de la lèpre et pour la création, l'organisation et l'équipement des services spéciaux mentionnés à l'art. 286 et des centres de traitement spécialement destinés à l'hospitalisation des lépreux. Il peut également être alloué des subventions aux communes en vue de les indemniser des frais d'isolement et de traitement à domicile des lépreux qui ne peuvent être hospitalisés dans les centres de traitement spéciaux.

ART. 290.—Au cours de chaque exercice financier, le crédit nécessaire pour les mesures de prophylaxie contre la lèpre est inscrit à un chapitre spécial du budget du Ministère de l'Intérieur.

## E. L. EHLERS

The three diseases with which the name of Prof. Ehlers is most closely associated are syphilis, leprosy, and scabies. He was president of the Danish Association for Combating Venereal Disease and also for seven years president of the International Union against Venereal Disease. His interest in leprosy helped to make him a great traveller, and he did much to lighten the lot of the

<sup>1</sup>From *Bull. Off. Internat. Hyg. Publ.* 27 (1935) 90.

leper in many parts of the world, from Iceland to the West Indies. In 1897 he was the organizer of the first International Leprosy Conference, in Berlin; and from 1900 to 1914 he was the chief editor of an international publication on leprosy. A welcome visitor in many countries, it was particularly in France that he was known and appreciated. He died on May 6th at the age of 74.—[*The Lancet*, June 12, 1937.]

#### NEWS ITEMS

*The St. Francis Guild and an international research fund.*—In 1935, in its fortieth year, the St. Francis Leper Guild was able to make grants of £2,260 to some 40 leper settlements in Asia, Africa, Oceania and British Guiana, according to the *Catholic Herald*, London. In and before 1890 Miss Kate Marsden, a Franciscan Tertiary, investigated the condition of lepers in Jerusalem, Constantinople, and Siberia. What she learned moved her to efforts that resulted in the formation of the Guild, in 1895, at a meeting held in the house of Baroness Gudin, in Kensington. In speaking at a recent meeting in support of the organization, the Archbishop of Westminster related that St. Francis of Assisi, the apostle of lepers, had attributed his own complete conversion to an incident concerned with one of those so afflicted. While riding from Assisi to Boligno, Francis, stopped by a leper, was tempted to turn away when he recalled his vow never to refuse assistance to anyone who sought help in God's name. Dismounting, he kissed the ulcerous feet of the leper and bestowed alms upon him; and henceforward he was particularly drawn towards these afflicted people. Archbishop Henley appealed for funds, not only for such purposes as had been pursued heretofore, but also for the establishment of an international movement for research "to try to discover a cure for the disease." This matter was later discussed with the Belgian Ambassador, and it was decided to invite all who might desire to subscribe to such a fund to send contributions to the Belgian Ambassador, 103, Eaton Square, London, S.W.1. The proposed fund is intended to be a tribute to Father Damien.

*British sources of chaulmoogra oil.*—A report in the *Bulletin of the Imperial Institute* on samples of chaulmoogra oil, obtained from the seeds of species of *Hydnocarpus* received from Nigeria, Malaya, and Ceylon, is said (*Manufacturing Chemist*) to call attention to the efforts being made in many of the tropical colonies to produce their own supplies of this oil. Hitherto the oil has come from India, but the results published show that the oil contained in the seeds of *Hydnocarpus wightiana* from the colonies mentioned conforms with the requirements of the British Pharmacopoeia.

*A laboratory banquet.*—From Talavera, Spain, it was reported (*New York Herald*, Paris) that when they captured the University City of Madrid, more than a score of men of the Spanish Foreign Legion who occupied the medical school held a "victory banquet" on the laboratory animals that they found there. There was much trepidation when it was learned that the animals had been inoculated with various pathogenic micro-organisms, including that of lep-



rosy. The men were immediately given treatment to counteract the effects of their meal and were kept under close observation for a month, when they were declared out of danger.

*A solitary case in Poland.*—When an elderly Polish woman who had returned to Varsovia, in her own country, after having lived in Argentina, was found to have leprosy she created an embarrassing problem because there is no leper asylum there and consequently no place where she could be quarantined. The city sought to make arrangements for her care in some leprosarium elsewhere, but only the one at Tartu, in Estonia, would agree to take her in. Before she was transported there (in a special railway car) the medical faculty of the University of Varsovia assembled a hundred medical students and physicians to see the case. Special precautions were taken to avoid contagion.

*Opening of the Saidapet clinic.*—On March 20, 1937, the Silver Jubilee Children's Clinic was opened, in connection with the government dispensary at Saidapet, near Madras. Its purpose is the study and treatment of leprosy in children; it is the first of its kind and much is expected of its work. (An article on the clinic by Dr. R. G. Cochrane, under whose direction it is to be, will appear in an early number of THE JOURNAL.)

*Institutions in Mysore.*—Leprosy is not as widespread in the Mysore State as in other parts of South India, states a report in the *Hindu* (Madras), only about 400 cases being known. There are several places where patients are treated, the largest being the asylum in Bangalore, with 100 inpatients, but the number that appear voluntarily for treatment is not large. At the asylum a scheme for small-scale farming has been introduced successfully and is to be expanded, and a carpentry class has been opened. One difficulty is that patients escape from the place just before the planting season and return after the harvest, broken in health. Public opinion in the villages is not sufficiently advanced to warrant either the introduction of segregation or the provision of more leprosaria, but in view of the relatively low incidence elaborate measures do not appear to be called for. However, it is stated, there should be a special leprosy officer whose duty should be to keep in touch with the infected villages.

*Burma, 1935.*—The following summary of the statement concerning leprosy in the report for 1935 of the Public Health Administration of Burma is taken from the *Indian Medical Gazette*: Colonies for the housing, feeding and treatment of lepers were maintained at Monywa and Mambu. The department considers that in the establishment of leper colonies lies the most effective measure for the control of leprosy in Burma. A colony is much cheaper to establish and to maintain than an asylum. It has an advantage over clinics in that in the colony the treatment can be taken to the segregated lepers, instead of expecting the individual lepers to go for treatment to the nearest hospital clinic, which is frequently some miles distant. Were sufficient colonies started throughout the province, they would exercise a marked effect in checking the spread of leprosy among the general population and would exercise a marked effect on the control of pauper lepers. The leper who now leaves his village to beg in the towns would have a colony to go to where his housing and food would be assured, where the conditions of life would approximate those of his village, and where he would get regular treatment leading to cure or early arrest of his condition. He would be

spared the experience of being regarded as an outcast and having to descend to the level of a pauper.

*New asylum planned for Ceylon.*—It was noted in the last issue (p. 380) that a proposal had been made to move the Hendala asylum near Colombo to more commodious quarters. More recently it has been learned, from the *Ceylon Daily News*, that the budget estimates for the next financial year include an item designed to relieve the situation by building a separate asylum in the Southern Province rather than by moving Hendala. This institution is intended primarily to house patients from that part of the Island. The planned capacity is 200 patients at the outset, with provision for expansion as needed. There was public disapproval of the site selected (at Urugas-manhandiya) because it is in a populated area, but medical opinion was emphatic that there was no danger to the public.

*Mission work in China.*—Data on work with lepers in China (evidently that of Catholic missions only) are quoted from the *Annuaire des Missions Catholiques de Chine*, a Jesuit publication, in the *Catholic Herald* (London). Nine missions are devoted to special work of this nature, the largest asylum being that of Sheklung, run by the Paris Foreign Mission Society, with 580 inmates in 1936; another one, with 307 inmates, is at Kongmoon, run by the Maryknoll Fathers. The total number in asylums was 1,150, as compared with 1,095 in 1935. This work was started at Sheklung by Father Conrardy, a Belgian, who having spent some years at Molokai until the death of Father Damien went to China, took a medical degree at the age of sixty-five and began to learn the Chinese language. The lepers with whom he attempted to work could not understand what he was trying to do for them and attempted to kill him. Finally, however, he rounded up sixteen of them and took possession of a barren river island at Sheklung, near Canton, and for seven years he worked there developing an asylum which, in the last year of his life, was finally approved and recognized by the Cantonese Government.

*New hospitals in Japan.*—With ¥2,090,000 contributed recently by the Hoonkai (social enterprise organization) of the Mitsui, the Home Office is to build three new leper colonies—in the Luchus, Central Japan and the Tohoku district, the *Japan Chronicle* says. Simultaneously with their establishment the existing institutions at Nagashima, Kuribu and Hoshizuka will be enlarged. It is expected that upon the realization of these plans the present accommodation capacity of 7,000 will be increased to 10,000.

*Carnival at Carville.*—During the period of the famous Mardi Gras festival in New Orleans the patients at the U. S. National Leprosarium had their own carnival with all of the traditional Mardi Gras features of masking, parading and dancing. In the past decade this event has become a bright spot in the lives of the 375 and more inmates of the institution. After the parade of humorous and fanciful floats that the patients had spent weeks in preparing, followed by bicycles and wheel-chairs twined with streamers of the carnival colors, the crowd gathered in the colony's large recreation hall—transformed into a carnival court—where the king and queen were crowned and dancing in costume and under masks was enjoyed until midnight, when Lent began. The festivities were attended by the medical officers and others, with their families, who encourage this and other features of the colony life that contribute to the mental therapy of the patients.

*Mutiny in Nicaragua.*—Led by a cripple on crutches, seven lepers escaped from their place of detention in a remote district near Managua, Nicaragua, after having killed their warden, according to a *Reuter* dispatch from that city early in the year. The mutineers secured machetes (heavy knives) and made a concerted attack on the warden, whose revolver misfired. It was reported that three of them had been shot dead by pursuing guardsmen some distance from the colony. The authorities broadcast an appeal to the remaining absconders to return to the colony or to give themselves up when accosted, otherwise they would be shot at sight. It was stated that prominent people of Managua had devoted much time and money to alleviate the lot of the inmates of the asylum, of whom there were some two dozen, and only recently 1,000 barrels of cement had been imported for the construction of additional quarters. The inmates had never before shown signs of discontent.

*Activity in Cameroon.*—The Service de Santé du Territoire has reported, according to *La Chronique Coloniale*, that the discovery and treatment of leprosy is one of the principal objects of the medical administration in Cameroon. All of the services of native medical assistance are charged with the campaign against this disease. The importance of discovering, isolating and treating cases is urged upon the native chiefs. In 1934 there were 3,205 lepers in the 26 agricultural colonies; in 1935 there were 4,097. All but two of the regions have at least one leprosarium, several have two, and two have three and four of them. They comprise plantations, the products of which contribute in large part to the subsistence of the patients. It has been difficult to divide the patients into groups to receive different treatments, for they are not persistent or patient, and to induce them to continue under treatment it is often necessary to vary it, either as regards the preparation used, or the manner of its introduction, or the frequency of injections. The three basic medicaments employed are chaulmoogra from French India, caloncoba from Cameroon, and methylene blue.

*Settlement in Seychelles.*—As a first step to ameliorate the conditions under which lepers are segregated in the Seychelles, notes the *Crown Colonist*, the government has paid Rs. 22,500 compensation to the lessee of Ile Curieuse and has resumed possession. A further sum of Rs. 20,000 has been provided towards the cost of a settlement to be built there. In a newspaper article by Capt. Hugh Mackay, F.R.G.S., in the *Natal Mercury* (published some months before the note mentioned above) it is stated that Round Island, a mile or two from the coast of Mahe, "an exquisite little island... a palm-covered gem which rises like a sugar loaf from the midst of a cluster of other islets," is reserved for female lepers. The males are on another Round Island, off the coast of Praslin, 21 miles from Mahe. It is the Creole population of the Seychelles which is affected, natives descended from African slaves freed in the Emancipation of 1835, who had been captured by raiders on the coast of Mozambique and rescued from captivity by British and French ships of war and taken to the Seychelles to work for planters because they could not be returned to their native land. Recently, it is said, it was found that leprosy was increasing among these people and closer attention has been paid the matter. No statement is made as to the number of cases in segregation, or concerning the provisions made for their care aside from the statement that an inspector visits the islands periodically.