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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.

THE CAIRO CONGRESS NUMBER

In this issue of *THE JOURNAL* is presented most of the essential material resulting from the Cairo Congress. It, together with the report given in this department in the preceding issue, will afford those who did not attend the meeting a fairly comprehensive idea of it. The principal features presented are (a) the titles of the 160 scientific papers submitted and the 118 summaries available, and (b) the reports of the four technical committees. In addition there are (c) a summary of the program; lists of the 167 members, prepared by the secretarial office, and of the 49 countries or regions which they represented; and the minutes of the general meeting of the Congress and of that of the International Leprosy Association.

SCIENTIFIC PAPERS

The papers submitted to the congress will all appear in the transactions, which it is understood will be in three volumes. It is also understood that, besides those for the actual members of the congress, a number of sets will be printed for distribution to libraries and for sale to individuals.¹ Only a limited

¹ Requests for such sets should be directed to Prof. M. Khalil Bey, Faculty of Medicine, Kasr el Aini Post Office, Cairo, Egypt. The sale price, we are informed, will be the same as the congress membership fee, namely, £1 Egyptian currency.

number of the articles can be reprinted in THE JOURNAL, and none can be used until after the transactions have been published.

The distribution of the papers by topics is to be seen from the accompanying tabulation. It is significant that the largest group relates to epidemiology and control. That group, of course, contains much material related to the one on history and distribution. Treatment comes only third; there are more papers dealing with the clinical aspects of the disease. Less attention, naturally, has been given the laboratory subjects; the largest group of this category is on immunology and serology, but there is especially interesting matter in the miscellaneous collection on bacteriology, inoculation and animal leprosy. A rapid survey of the contributions will be made, though there is much of importance in papers that cannot be mentioned.

DISTRIBUTION OF PAPERS BY GENERAL TOPICS

<i>Subject</i>	<i>Read</i>	<i>Title</i> ^a	<i>Total</i>
1. Distribution and history.....	7	13	20
2. Epidemiology and control.....	20	23	43
3. Clinical aspects.....	11	26	37
4. Treatment.....	8	17	25
5. Chemistry.....	4	3	7
6. Immunology and serology.....	6	7	13
7. Bacteriology, animals, etc.....	10	5	15
TOTALS.....	66	94	160

^a Of these papers read by title, 77 were submitted by absentees.

History and distribution.—Most of these papers relate facts pertaining to particular regions; five of them show how leprosy has diminished in Norway, Sweden, Iceland and Finland. To those who like to speculate on the antiquity of leprosy, Bloom's conclusion that it is not referred to in ancient Egyptian writings or the Bible will be of interest.

Epidemiology and control.—The emphasis placed by Doull and Rodriguez on the technical nature of real epidemiological studies brings out the importance of expert treatment of statistical data. Several papers, notably by Rodriguez, by Sitanala and his colleagues, and by Lowe are based on detailed field studies such as are required for intensive work of this kind. General conclusions are few, but an important observation is that extra-familial infection is at least as important as house infection, if not more so. Suggestive findings on the correlation of food habits and the incidence of leprosy are reported by Lampe. He believes that "selective morbidity" (special susceptibility

of individuals) is more important in transmission than intimacy of contact.

With regard to control work, there is much detailed information in the several papers describing local antileprosy campaigns. Mention has been made of results obtained in North Europe, where isolation in one form or another has long been practised. From a very different region, Basutoland, Germond reports improvement that has followed the appointment of native leprosy inspectors; his conclusions are supplemented by Strachan's statistical analysis of certain of Germond's data. On the other hand stress is laid on clinic work by Santra for India, and Huizenga for China, in neither of which countries is segregation possible. In contrast are the reports of the comprehensive effort that is being made to build up an antileprosy campaign in Brazil. Lutz' insistence on mosquito control strikes a bizarre note.

Clinical aspects.—These papers deal with a wide range of subjects, but special attention is centered on the question of "tuberculoid leprosy" and its place in classification. A correlated series by Rabello, Jr., Motta and Portugal argue the opinion that it should be made a third type. On the other hand Wade demonstrated material (by pictures) to show that the range of the skin lesions of neural leprosy, from flat to "major" tuberculoid, is continuous, and that histologically all are essentially tuberculoid when active. Ermakova reports similar findings. Three papers on classification all argue for changes in the current system; these proposals were referred to the committee appointed to consider this matter. The topics dealt with by the numerous other articles in this group include lepra fever, eye involvement and various others.

Treatment.—Conspicuous is the fact that there is only one paper on dye therapy, that one by Montel. Paldrock discusses his "specific" treatment, and Souza-Araujo advocates combining physico-chemical with drug therapy. Muir insists on the primary importance of "general" treatment, and also discusses the use of potassium iodide. As usual, most attention is given to the chaulmoogra drugs. Flandin and colleagues consider Beranger's chaulmoogra-cholesterol complex to be of superior effectiveness, especially valuable in lepra fever. Moura Costa uses unusually large doses of the usual drugs, with correspondingly good results. The advantages of the intradermal method of administration are mentioned by at least two authors. A new method of treatment,

compression of patients with oxygen, originally used by Ozorio de Almeida for cancer, is reported by him and colleagues. So convinced of the value of this method are its backers that they invited certain members of the congress to go to Brazil to observe it.

Chemistry.—Recent work on the chaulmoogra oils, including refinements in preparation of drugs, is presented by Cole and Humberto, and Beranger describes his chaulmoogra-cholesterol complex. Souza Lima deals with the protein equilibrium of the blood; he finds globulins always increased, most in the worst cases, and believes the determination to be of value in prognosis.

Immunology and serology.—Some of these papers are rather technical, but note may be made of certain out-of-the-way studies with the leprolin test. Fernandez has investigated the effects of subcutaneous injection of leprolin, and Villela and colleagues report that a nonlipid fraction of it causes essentially the same reactions as does the whole substance. Rotberg draws rather sweeping conclusions regarding the reaction. Other Brazilian workers report the Witebsky, Klingenstein and Kuhn test to be useful. Interesting and rather surprising is the report by Melsom that guinea-pigs inoculated with human leprosy material become sensitive to tuberculin.

Bacteriology, inoculation and animal leprosy.—The outstanding item here is the report and demonstration of Adler, who has succeeded in producing comparatively extensive infection in splenectomized Syrian hamsters inoculated with human leprosy material—a lead that will doubtless be followed up actively in other laboratories.² Ota and Sato also record apparently interesting results of inoculation of leptotic materials into fowls. Lakedowsky presented himself as a case of successful self-inoculation. Soule reviews his work with the bacillus and reiterates his belief that he has succeeded in cultivating it, though quantitatively the growths are still unsatisfactorily limited. Birkhaug, who has not obtained growths, presents evidence that certain supposed leprosy-bacillus cultures have a relationship with paratuberculosis strains. He also extends the observations on guinea-pigs that Melsom reported; the cultures referred to do not cause tuberculin hypersensitiveness in them.

REPORTS OF THE TECHNICAL COMMITTEES

Under the terms of a resolution adopted by the general meeting these reports, upon acceptance by the Resolutions Com-

²Dr. Adler has stated that the Syrian hamster breeds readily in his laboratory and that he can supply others with breeding stocks if arrangements for their transportation are made.

mittee, were included, as approved, in the findings of the Congress.³

1. *Classification of leprosy.*—The first noteworthy feature is that the basis of classification used since the Leonard Wood Memorial Conference in 1931 is not changed; division of leprosy into two types is continued, though note is made of the minority opinion that the *neural* (N) type should be subdivided. The name of the “cutaneous” (C) type is changed to *lepomatous* (L) because of continued serious confusion over the significance of the former term. With regard to subclassification, the “general” one which divides the types into grades according to degrees of advancement is retained, but for the first time a “special” one by forms or varieties is established. The neural type is subdivided into: anesthetic (Na), simple macular (Ns) and tuberculoid (Nt), the last comprising the “major” and “minor” forms. Suggestions are made for increasing the information that may be given in case symbols. All descriptions and specifications are revised and made more precise, as are also the definitions of terms, to which certain new ones have been added. It may be said that there is reason to hope that opinions regarding the number of types that should be recognized will be reconciled in the near future.

2. *Treatment of leprosy.*—The outstanding feature of this report is the statement that chaulmoogra preparations remain “the most efficacious drugs for the special treatment of leprosy.” The causes of irritation by them are discussed. The intramuscular, subcutaneous and intradermal methods of administration are specified, mention being made of the special value of the last-named one. Attention is called to the fact that some workers have found that extraordinarily large doses of suitable preparations give “correspondingly satisfactory” results. This applies also to “acute tuberculoid leprosy,” but in lepra fever (apparently referring to reaction in lepomatous leprosy) chaulmoogra treatment should be discontinued. Suggestions are offered for dealing with lepra reaction and certain other conditions. Regarding dye therapy, “further experimentation is very desirable.” The use of potassium iodide is definitely not encouraged. “General” treatment is mentioned only briefly, probably because its importance is so obvious.

³These reports were published in the *Journal of the Egyptian Medical Association* 21 (1938) 138-189, and were sent to members of the congress. Copies of the present reprinting will be sent by the Leonard Wood Memorial to all members of the International Leprosy Association and of the congress, and further copies will be available for distribution on request, which should be addressed to that organization at 1 Madison Avenue, New York City.

3. *Epidemiology and control.*—Concerning epidemiology, distinction is made between (a) extensive or general surveys and (b) intensive or particular ones, and detailed recommendations regarding the latter kind are given. With regard to control, the committee set forth the more important governing principles, but not a general scheme for applying them. "The present conception [being] that leprosy is an infectious disease spread principally by direct contact . . . the aim is to discover cases as soon as possible in order to control the spread of infection in the community . . ." Something is said of "voluntary isolation," but what is meant is not clear; at any rate it is stated that where that system is employed there should be authority to compel the isolation of cases deemed to be of special menace. Isolation of open cases "has been attempted" (a) in institutions, (b) in the home, and (c) in villages. Consideration of these methods ends with the statement that "complete isolation is the most effective method of control"; neither home nor village isolation is recommended as an alternative to institutional isolation. Nonisolated cases (and also cases released from institutions) should be kept under surveillance. Several subsidiary topics are discussed.

4. *Cultivation of the leprosy bacillus.*—This committee submitted a minority report by Reenstierna, who is convinced that Kedrowsky "and a few others" have cultivated the causative organism of leprosy, of which the bacterial forms may be only "broken down stages." The majority signed a diplomatic statement that "the problems of the *in vitro* growth of the organism "have not yet been solved satisfactorily." It may be said that Soule could concur in this statement because his cultures have not yet been persuaded to grow "satisfactorily."

From this rapid summary it will be seen that there are brought out numerous interesting leads that may be followed by research workers in the coming years. It is understood that Professor Marchoux, who as the new president of the International Leprosy Association will take a leading part in the organization of the gathering that will be held in Paris in 1943, is of the opinion that studies should be directed mainly along certain particular lines so that at that meeting there may be, in effect, a number of symposia on the more important matters, with less diversity of topics dealt with.