Annual Meeting of the Association.

The Annual Meeting of the General Committee of 'The British Empire Leprosy Relief Association was held at the India Office on February 24th. Viscount Chelmsford, Chairman of the General Committee, presided, and was supported by Sir Edward Gait, Chairman of the Executive Committee, Sir Leonard Rogers, Hon. Medical Secretary, Sir Frank Carter, Hon. Treasurer, Viscountess Chelmsford, and others. The Annual Report of the Association, for the year 1927, was presented and adopted, as were the Accounts of the Association.

Lord Chelmsford said that as a result of the surveys made by the Secretary, Mr. Oldrieve, branches of the Association had been formed in various parts of the Empire, and in India a great fund had been established for the furtherance of leprosy work there. Many parts of the Empire, however, unlike India, were not in a position to work out their own salvation, and were seeking the aid of the Association in dealing with leprosy problems. He noted that a message published that day from South Africa intimated that Sir Spencer Lister had expressed the opinion that while hydnocarpus oil was useful in treatment in the early stages of leprosy this did not mean that it was a definite cure. Speaking with some trepidation as a layman, he wished to point out that when they spoke of a disease as curable, this did not mean that in all circumstances and under every condition leprosy could be cured. Mankind died of curable diseases every day, but that fact did not impair their faith in those diseases being curable if they were treated in proper time and under proper conditions. The Association had a remarkable record to show, but he trusted that their supporters would not think that they were yet in a position to relax their efforts.

Sir Edward Gait, Chairman of the Executive Committee, explained that the policy of the Association was to create branches in all British Possessions where leprosy prevailed. The Secretary, Mr. Oldrieve, had visted each of these countries, and his inquiries had shown that in Africa, in proportion to the population, leprosy was even more prevalent than it was in India.

Nigeria, for example, with a population of 18,000,000, had 90,000 lepers. Want of adequate funds was now the only obstacle to the eradication of leprosy from the British Empire, and if people could be made to realise this fact, that obstacle would quickly be removed.

Sir Edward Gait declared that a special survey had shown that there may be over 500,000 lepers in India alone.

Sir Frank Carter, Hon. Treasurer, reported that last year's donations and subscriptions to the Association amounted to the £6,472.

Sir Leonard Rogers, the Hon. Medical Secretary, said that he did not think that the criticism made by Sir Spencer Lister in South Africa would have been forthcoming if the full details given in the report had reached him. There was the most complete evidence that the early cases of leprosy could be cured. The leading authorities in Calcutta (where Dr. Muir had been doing nothing but leprosy work for seven years past) and at the great leper settlement at Cuilion, in the Philippines, were agreed that nearly every early case of leprosy was curable. At Culion no fewer than 1,000 patients had been released on parole as recovered within the last few years. The South African reports showed that, although segregation was compulsory, the settlements had very little practical experience of early cases. This was owing to the tendency to concealment which was so unhappy a feature of enforced segregation unalleviated by outdoor treatment in the early non-infective stage.

Sir Leonard Rogers proceeded to outline the present position of the work of the Association, dealing especially with the medical aspect of the situation, and a report of this will be found on page 6.

Sir Frank Carter presented the financial statement for the year 1927.

Mr. Oldrieve stressed the need for the starting of Treatment Centres wherever there were any large number of lepers. He stated that a considerable number of grants of money had been made during 1927 for the commencing or enlarging of such Treatment Centres, and pointed out that already this year a number of applications from Missionaries had been received for financial help, from Kenya, Tanganyika, Nyasaland and Northern Rhodesia.