

Founding a Leper Colony in Nigeria.

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“ Doctor, have you a cure for leprosy? The natives say that my Headman has leprosy, and they will not allow him to go to the spring, or the market, and they want me to send him away.” This question was put to me about two years ago by a lady, whose servant was a leper. I told her to send the man to me, at the Hospital, so that I could examine him. A few days later he arrived, and I found that it was only too true. The native diagnosis is seldom wrong. I have been wrong, myself, but rarely have I found them making a mistake. This was the beginning of the leper work in Itu.

I had been reading of the progress, made in the treatment of leprosy, in India and elsewhere, and told this man that I had no medicine for him just now, but that if he would come back in a few months, I would obtain some that would help him. This man never appeared again, but in November of 1926, after having a supply of drugs unused for months, another leper appeared, whom I began to treat. He brought another, and at the end of the month I had a small out-patient clinic of six. The numbers grew by twenty to thirty every week, until in six months there were 400, and in about fifteen months over 1,000 had been treated.

They were at first out-patients, coming in many cases from towns several days' journey off, for weekly injection. I did not know where they were staying, until one day looking across the river, I saw an unusual number of shacks built on a sandbank. “ Who are in these? ” I asked. “ Oh! these are your lepers,” my dispenser replied. I paid a visit to the sandbank, and found it so hot that they could hardly stand on it with their bare feet. It made me realise how keen they were, when they endured it.

In April, 1927, at the beginning of the wet season, the water began to rise, and the sandbank was gradually decreasing in size. They asked me what they were going to do now, as the people in the neighbouring villages were not disposed to help them. I tried to get the chiefs to grant a piece of land, but this was at first refused, and only granted after strong Government pressure. This ground was found to be most suitable, situated conveniently a mile from the riverbank and from the General Hospital. Two good streams pass through it. Roads were made, and the dense undergrowth cleared, leaving the site beautifully shaded with the numerous palm-trees overhead.

Each patient erected his hut of mud and wattle, the stronger helping those who were unable to do much for themselves. A mud house was put up with a verandah in front for giving injections, one for the treatment of ulcers, and other minor troubles, and a building to serve as church and school.

We have lepers at all stages of life, from children 6 years old up to the middle-aged and the prematurely old. They include about 200 women and 50 children. About ten different languages are spoken. The patients are mostly ordinary natives of the bush, with no education at all, while a few have been in employment as cooks, teachers, carpenters, blacksmiths, etc. Many of them are friendless, and have been deserted, or driven out of their homes. Leprosy cancels the marriage contract. It is strongly suspected that in many places lepers are got rid of in mysterious ways, and are either poisoned or take their own lives. In going over their individual histories, it is astounding to find that nearly all the "contacts" are dead. I have known lepers in the last stage asking their friends to bury them alive.

The Government of Nigeria has taken a great interest in the work, and made a substantial grant. This has enabled us this year to put up an iron building, lined with "eternite," accommodating ten of the patients, who need more attention, a shed for giving injections, and dispensary and laboratory, stores, etc.

A small grant was also given for food. I was able to feed only the very necessitous, women and children and men crippled and unable to work or walk any distance. About 60 altogether received such support, and the food cost about 2s. 6d. each per week. The lepers are dependent on their own efforts for food, or some have still friends who support them. I have been able to employ the able-bodied men in making roads, and in the building of the new Hospital, and houses for the doctor and the non-leper staff. These received a small payment in food. We do not want to make paupers, and we try to retain the interest of such friends as they have left, making them feel that they have a share in their treatment, by providing them with the necessities of life.

A man who had leprosy was considered just as good as dead. On one occasion an able-bodied leper applied for food. I told him that I had not money to feed any more, and that he would need to go to his own town, and get food from his friends. My Headman, who knew him, said, "Please, Sir, he may go home, but he will not get food." I asked why, and he replied, "Because when a man becomes a leper he is looked on as a dead body, and many people will not trouble to feed him."

The food problem is an acute one, and the longer a man is in the Colony, the worse it becomes. For a native to continue in well-doing, and support a leper-brother for two years, who was considered just as a dead body, is something new. We do our best to encourage industries of all kinds, carpentry, basket-making, blacksmith work, fishing, etc., and a beginning has been made in farming the ample ground we have at our disposal.

Treatment was begun first of all with sodium morrhuate, injected intramuscularly in the usual graded doses. This was given twice a week, when we had it. At times, owing to the wholly unexpected numbers who came, we were short. We continued this for the first six months, and then changed to sodium hydno-carpate, while recently, following the recommendation of Dr. Mayer, potassium iodide has been used by my relief, Dr. Martin, and he reports striking results of its use in later cases.

Intestinal worms, dysentery, and syphilis had also to be treated, and neo-kharsivan was given as freely as resources allowed. Ulcers were dressed daily or thrice weekly, by a leper who was trained, and who proved himself most efficient.

We found that a small quantity of Ung. Hydrarg. Iod. Rub., diluted with white vaseline 1 in 1, applied to the leprous patches produced irritation and blistering. When healed up the skin was darker, and this proved to be a most popular line of treatment, as although there is no active disease left, and sensation is established, a scar is a great grief to the patient, enabling people to point a finger at him.

Writing at home on leave, I have not exact figures with me, but after 12 to 18 months about 30 were symptom-free, a number got tired or for various reasons went home, and did not return, a number of those in the advanced stages died, while the majority of the lepers showed great improvement. Even after a few days, the changes on the expression is most marked, the hope that has been awakened, and the bright and cheerful atmosphere of the place makes a wonderful difference. I was surprised at the reluctance of some to go home. While apparently well, and with no complaint, after it was suggested that they were, or would soon be, ready for discharge, pains developed in their feet or elsewhere, unheard of before! The interest taken in them, the liberty they enjoy, besides the religious atmosphere we endeavour to promote, make a great contrast to the life of ostracism, and hostility, to which so many of them are subject in their own homes.
