

Leprosy Work in Tanganyika.

GOVERNMENT POLICY.

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The number of Leper Camps in Tanganyika Territory is 42, and the Lepers segregated are approximately 3,299. The camps are situated in every province of the country, and in some instances, as in the Tukuyu district, the huts and cultivations cover an area of several square miles. Wherever it has been found that Medical Missions are near enough and willing to undertake the care of the Lepers, allocations have been made for the purpose out of the Leper Vote. An attempt has been made to obtain statistics of the total Leper population of the Territory, but the returns are valueless. The policy until the year 1926 was limited to as efficient non-compulsory segregation as possible, and the provision of food, clothing, agricultural implements, drugs and dressings.

In the meanwhile experimental effort relating to treatment with the latest specific remedies was undertaken at a few centres. There were certain important factors which determined the continued rigid adherence to this policy, *i.e.*, the necessarily prolonged nature of the specific treatment, the deterrent effect of repeated injections unless some immediate benefit were obvious

to the patient, and the risk of a reaction resulting in the breakdown of the existing segregation. It was felt that until our therapeutic armament was sufficiently advanced definitely to accomplish early subjective amelioration of the patients' condition, more harm than good would result, and thus militate against any future efforts at segregation and treatment.

Three important influences have, however altered this outlook recently:—

(1) The extensive campaign against Yaws and Syphilis with Bismuth Sodium Tartrate, which has resulted in over 350,000 cases of the former disease being treated since 1924, has modified profoundly the African mind towards European medicine and the use of the hypodermic needle, indeed the native now demands treatment by injection for almost every disease that he suffers from.

(2) That the outlook as regards the treatment of leprosy, especially of early cases, has improved.

(3) The facilities offered by "The British Empire Leprosy Relief Association" since the visit to Tanganyika of Mr. Frank Oldrieve, which has enabled certain of the Missionary bodies and the Government, through his kind offices, to establish treatment and investigation centres, described by Dr. Muir as P.-T.-S. centres, during the past several months.

There can be little doubt that in time these centres, which are already proving attractive, will provide valuable information of the numbers of Lepers, their distribution, and possibly other data which might throw further light on how best the situation may be further dealt with.

The present organisation is tentative and experimental, but, from reports and demands for help and extension received, it is hoped that, when the finances of the Government are better able to meet them, a wider and more active attack may be inaugurated in the near future.
