training in the colony many of these cases enter for the races.

As regard medical treatment, we use weekly subcutaneous injections of fresh hydnocarpus oil, with 2 per cent. camphor. We have used many combinations and various preparations, but found none so satisfactory and give so little pain as this preparation. In syphilitic cases we simply add half grain salicylate of mercury to the regular weekly chaulmoogra injection. Many of the syphilitic cases will show no improvement until the syphilis is treated also.

Dr Wade writes me that they encourage work in the Philippines. I noted in my visit to the Hospital No. 66, at Carville, Louisiana, that some of the cases were provided with jobs. Every leper colony should adopt the work system. "Faith, oil and work, but the greatest of these is work."

To attain good results in treating leprosy, early diagnosis with chaulmoogra oil, an abundance of out-door work, with as much cheer and diversion as possible, will bring about the most encouraging results in the majority of cases. Instead of housing hopeless lepers until their death, we should work towards making every leper colony an industrial therapeutic institution.

Leprosy in Korea.

HENRY FOWLER.

It is evident that the authorities in Korea within the narrow limits of their financial resources are making earnest efforts to free the peninsula from the menace of leprosy.

So desirable a programme, however, will in all probability take many years yet to accomplish. Although the favourable results of modern treatment reported from Korea outnumber those of other countries, the fact remains that many subacute and chronic cases of both nodular and anesthetic leprosy seem little helped by remedial agencies. To add to the difficulty, early cases of leprosy and the anesthetic type are not always recognised, and those untreated are a constant danger to those with whom they associate. Undoubtedly, the educational authorities of Korea have a colossal task to accomplish before even the most elementary laws of public health and hygiene are apprehended by the people.
Under the auspices of the Australian and American Presbyterian Missions, homes for lepers have been erected from time to time in the leper areas of South Korea from funds specially supplied by the Mission to Lepers in London and New York.

From the very beginning, for obvious reasons, the Korean Government has been favourable to these Christian philanthropic developments. Built without cost to the colony, under the gratuitous personal care and supervision of the medical missionaries and other agents of the several missions, the lepers, crowding into the homes, even before they are properly equipped, have throughout been happily cared for, maintained, clothed and fed. Within recent years modern treatment has also been extensively carried out, often with remarkable success.

With the ever rising cost of food stuffs and all commodities throughout the Far East, and the increased cost of conducting these Christian leper homes, the Governor-General of Korea, Viscount Saito, was led to sanction and contribute through the several missions, a daily grant of ten sen per leper (about 2½d. in English money). The remainder of the cost of maintenance and upkeep has so far been met from funds supplied by the Mission to Lepers.

According to the most recent reports the number of lepers accommodated in Government and Mission leper hospitals is 2,150. Of these, 427 are cared for at the Government leper colony on Little Deer Island, South Keisho Province; 406 are inmates of the Northern Presbyterian Mission Leper Home at Taiku; 536 are accommodated in the Fusan Leper colony, under the superintendence of members of the Australian Presbyterian Mission; the remaining 781 are housed in a leper colony recently established in Soonchun under the supervision of the Southern Presbyterian Mission.

The Government returns indicate that there are in addition 5,355 persons in Korea known to be lepers; of these 1,443 are vagrants, 1,237 are likely shortly become so, and 2,675 are said to have means of support apart from State and the other public funds. Probably, all acquainted with conditions in the Far East will hesitate to accept these figures as final. It will be observed that the estimated Korean leper population, as given by responsible leper workers in the country, far outnumber these totals.

Unquestionably, many early cases of leprosy and others will have been unobserved by the non-medical officials.

* (See A Survey of Leprosy in the Far East, by Dr. R. G. Cochrane. p. 17.)
responsible for the leper census. All that can be said is that
the various proportions of pauper lepers and the com­
paratively well-to-do lepers probably approximate the actual
state of affairs.

It is reported that the Government is now considering
the advisability of taking new measures for the control and
relief of all vagrant lepers. Further, it is hoped that before
long the existing leper establishments will be extended and
that new leper asylums and homes will be built in other
leper infected areas.

The possibility also of increasing grants in aid both to
government and christian leper homes from state funds
is being considered.

Correspondence.

SIR,

With reference to the letter from Dr. Percy M. C.
Peacock, Superintendent, St. John’s Leper Home, Mandalay
appearing in Leprosy Notes, for October, 1929, I have the
honour to inform you that the facts are as follows :—

A Sister of the Franciscan Order who was working in
a Dispensary for the Poor in Coimbatore, South India,
developed, about three or four years ago, symptoms suspicious
of leprosy. She was brought to Ceylon and examined by
the Medical Superintendent of the Chief Leper Asylum
in this Island, who diagnosed the case as leprosy. She was
admitted to the Leper Asylum at Mantivu, and has been
there ever since. This Sister has never worked in a Leper
Asylum in India, Ceylon or Burma.

It may interest you to know that Sisters of the Franciscan
Order have been working in the two Leper Asylums of
this Island for 15 years, and that we also are in the proud
position of being able to state that there has not been yet
a case of leprosy contracted amongst them.

I am, Sir, Your obedient servant.

(Signed) J. F. E. BRIDGER.

Director of Medical and Sanitary Services.

Colombo.

November 11th, 1929.