

Editorial.

WE give the first place in this number to a stimulating and instructive article written by Dr. Wade, of Culion. Within the last few months the controversy regarding the best anti-leprosy measures has been revived in certain quarters. We think that Dr. Wade lays his finger on the most effective means when he says: "The Philippine system as projected, combines segregation of the infective cases, attraction of such cases by the treatment and to some extent by local rather than distant segregation, dispensary treatment of the incipient cases, and intensive survey and educational work in the field." Dr. Wade goes on to state another truth when he says: "It is realised that to extend this whole system immediately over the entire archipelago is quite impossible."

In present-day leper work there is a danger of concentrating on one scheme, and forgetting that it is only by a combination of schemes that the attack against this tenacious foe can properly be pursued. The leper must be treated at every stage of the disease; the public must learn to be afraid of leprosy, but not to shun the leper; and medical men must be efficiently trained, so that they understand the disease with which they are fighting. Then, and only then, will this age-long scourge be brought under control. When an enlightened public opinion arises in any nation, then the conditions in the country become inimical to the spread of the disease, and leprosy begins automatically to die out. We have necessarily put our weight in the balance against any measure of compulsory segregation, because we feel that this defeats its own end. On the other hand we consider that to lay emphasis on one aspect of the problem alone is equally futile. No anti-leprosy scheme is complete without the following:—

- 1.—Training of medical men and others in the diagnosis and treatment of the disease.
- 2.—The establishment of out-patient clinics in suitable areas.
- 3.—The establishment of leprosy hospitals and colonies which could be centres for training and research.
- 4.—A survey of the country or district ascertaining the type, numbers and distribution of cases.
- 5.—The gradual education of the public by means of propaganda, remembering that propaganda must not exceed facilities for treatment, that is, it is no

use telling people that leprosy is amenable to treatment if there are not sufficient centres to cope with the treatment of cases.

Each country has to view the problem in its own peculiar light, but the ultimate aim should be to organise a system which will reach every leper, early or late, and bring him under active treatment, preventing, where possible, infective cases passing on the disease to contacts. Until this object is attained we venture to suggest that anti-leprosy schemes are incomplete.