## REPORT.

## The Mandalay Skin Clinic (Leprosy).

Report for the Year Ending December 31st, 1929.

HE Clinic was opened in 1925, since when 257 cases have been treated.

## Treatment.

Alepol replaced hydnocreol from February 1st, 1929. Of the hundreds of injections given with this preparation there were only three cases of abscess, all these three cases occurring in the calf. The average dose administered has been 5 c.c., and the maximum single dose 16 c.c., with no ill-effects whatever. Potassium iodide by mouth has been tried in a few selected cases, but from the experience gained with it in the asylum, only those cases in robust health and able to take a fair amount of exercise were placed on it. Trichloracetic acid has been used and found very useful in reducing the swellings when applied to enlarged ears and tubercles on the face, the quickly apparent results thus obtained greatly helping to create confidence in the treatment in the new case, and an interest in the progress of his disease. Injections continue to be given twice weekly, and at these times the opportunity is seized for advising and educating patients and their accompanying friends and relations on personal hygiene and prophylaxis. The sphere of usefulness of the clinic was not, in the year under review, confined wholly to the treatment of lepers for leprosy. Mandalay has its regular yearly visits of various epidemics small-pox, cholera, plague; advantage is taken of the clinic at these times to vaccinate and innoculate lepers there, whether they are patients who are under treatment for leprosy or not. For various reasons, with the presence of a leprosy clinic, it is only right that lepers should be attended to there instead of congregating and mixing with the healthy public. The Mandalay Municipality was informed of this, and requested to circularise its health department with this information, and have lepers refused innoculation at other depots and directed to the Clinic instead, in the hope of, in this way, introducing the clinic to those lepers who have not heard of it before. There is little doubt from the numbers who attended for the various innoculations that the clinic was in no small measure responsible for keeping down the mortality figures from these epidemics.

Further to encourage attendance either for examination, advice, or treatment, even the hopelessly advanced case is given a few injections, and when confidence is gained in the treatment, the patient is advised admission into the asylum. Marked improvement in the condition of all but these faradvanced cases is the general result of out-patient treatment noticed at the clinic. Institutional treatment has its place in the leper problem, but for various reasons, generally for want of funds, could never produce results such as are obtainable at an out-patient establishment.

As pointed out on a previous occasion, the facts arrived at, based on the experience of the four years that this clinic has been functioning are:

(1) That out-patient leprosy clinics, if cautiously run, would readily be taken advantage of in Burma.

(2) The necessity for providing such out-patient departments at the head of every district in Burma, preferably apart from existing hospitals, dispensaries or asylums.

(3) Amending the Government rules requiring the dismissal of a leper from Government service irrespective of his condition and the nature of the infection or the stage of the disease with reference to its infectivity.

(4) The greater possibility of getting in touch with the entire leper population in course of time, which could never be accomplished by the present system of resident leper institutions alone.

(5) The great value of visiting a leper at his house. When this was carried out in several cases with a view of discovering whether there were any other members of his family affected, in nearly all cases others were found in early stages of the disease, sometimes not even suspected by themselves.

(6) The very slight cost at which an out-patient clinic could be run. To quote from remarks on the Mandalay Clinic made by the Director, Pasteur Institute of Burma,

"The treatment of cases in the early stages is probably of the greatest importance in preventing them from becoming infective, and with the very large numbers of lepers in Mandalay City this work deserves encouragement, and should be extended as much as possible. The total monthly expenses show, in return in prophylactic value in proportion to expenditure, much more satisfactory results than under Institutional conditions of treatment."

The nineteen not classified were those who were less than three months under treatment. Transferred were those sent to the asylum for admission.

Those under treatment for leprosy with the disease of less than two years' duration: Men, 9; women, 15; boys, 5; girls, 3. Total, 32.