

## Editorial.

**I**N this issue of the REVIEW we are publishing further comments on Dr. Rose's article on "The Curability of Leprosy," printed in a previous number. The contribution which will arouse most interest is that by Dr. Mitsuda, entitled "Curability and Relapse in Leprosy." Dr. Mitsuda's figures show that nearly fifty per cent. of the cases which have recovered have relapsed after a period of 6—18 years. The general policy in Japanese institutions is one of not discharging inmates, and therefore these 128 cases on which Dr. Mitsuda reports could be easily followed up. Furthermore, while they are in the institutions, no matter whether they have become healed or not, treatment is continued. The question that will be asked is: Is there any reason for the varied reports which are being received from time to time concerning the efficacy of treatment? Dr. Mitsuda points out very clearly in his article, that it is of great importance to differentiate between the curability of neural cases and that of cutaneous ones. It is extremely difficult to assess the amount of credit which should be given to the specific chaulmoogra preparations in neural cases, because all are well aware of the general tendency of such cases to become naturally arrested with and without deformity. We cannot help feeling that if an independent observer were to visit and interpret the results of treatment in various countries, the discrepancies in the reports could be explained. The interpretation of the results depends on three factors: (a) The criteria of the individual reporting the cases; (b) the variety of case, and (c) the critical faculty of the individual. We do not wish to disparage the reports of any individual worker, but we do feel that there is some adequate explanation of these varied results, which would be forthcoming if a standardised type of record could be evolved, and if workers generally reviewed their results with as great an amount of criticism as possible.

We hope to refer further to the work in British Guiana in the next issue of the REVIEW. The reports of the Secretary's tours to various islands in the West Indies will be ready shortly, and a summary of these will also be available for the next issue.

The article contributed by Dr. Rao, on the therapeutic efficacy of certain dyes in leprosy, will be read with a great deal of interest, and it will be noted that his conclusions are that, so far, the results of treatment by aniline dyes

do not encourage the belief that they have a future in the routine treatment of leprosy. The position with regard to these dyes is that they are still *sub judice*, and we would not advise any institution to try out these remedies unless they have proper facilities for experimental work. As has been abundantly proved, the appraising of the results of any particular remedy in leprosy requires the utmost care, and unless every factor can be taken into account, and the results viewed critically, conclusions may be drawn which later cannot be substantiated.

We welcome the article by Dr. Ryrie, on the management of reaction, for reaction in leprosy is one of the most difficult of all conditions which the physician has to treat.

Owing to the importance of the work generally at the Bankura Leprosy Investigation Centre, we have reprinted the article from *Leprosy in India*. The suggestion contained therein might very well be followed up by workers in other countries. It is manifestly impossible in a country where there are a large number of victims of leprosy to segregate or care for them all. Therefore, some other method will have to be devised if open cases are to be prevented from infecting others, and especially children. We are more than ever convinced that childhood infections are the most serious, and therefore the protection of children should be the main object in anti-leprosy measures. The importance of this is being realised by workers generally, and if propaganda could be encouraged which would result in the open cases segregating themselves along the lines which are indicated in Dr. Muir's article, an economical and effective method of segregation might then be evolved.

The article reprinted from the *International Journal of Leprosy*, by Dr. Atkey, is of interest, as it emphasises another important etiological factor, that is, the dietetic one. The Secretary, during his recent tour, was impressed by the fact that wherever leprosy was a problem of any endemic importance, the economic conditions of the people were poor. Especially was this seen in the matter of their diet. We would lay emphasis here on the great importance of field work, for we feel certain that the solution of the prevention of leprosy does not lie altogether along the line of therapeutics.