

## Editorial

The Fourth International Leprosy Conference will, by the kind invitation of the Egyptian Government, meet in Cairo in March, 1938. The Conference is to begin on March 21st and the general sessions will probably last four days, though discussions in committee may continue for some five or six days longer.

The Conference is to be held under the auspices of the International Leprosy Association, of which all members will be invited. Others wishing to attend the Conference may do so by becoming members (subscription £1 1s.). It is hoped that the Governments of those lands in which leprosy is prevalent, and those that are interested in the solution of leprosy problems, will send one or more delegates to the conference.

The first three International Conferences were held at Berlin in 1897, at Bergen in 1909 and at Strassbourg in 1923. Each of these lasted some four or five days; papers were read and discussed and resolutions passed. The Berlin Conference resulted in the publication of the international journal "Lepra", in German, French and English, which continued until the beginning of the Great War.

After Strassbourg several national leprosy conferences were held in various countries. The League of Nations arranged for meetings of leprologists at Bangkok during the sessions of the Far Eastern Association of Tropical Medicine in December, 1930, at which Prophylaxis formed the principal discussion.

The Leonard Wood Memorial Conference met in the Philippines in January, 1931. Its meetings lasted two weeks. Papers were not read, but all subjects connected with leprosy were fully and frankly discussed both in full session and in committees. It was thus possible to cover ground and come to conclusions to an extent that would have been otherwise impossible. One of the principal results of this conference was the inauguration of the International Leprosy Association, under the auspices of which the Egyptian Conference is to meet.

The Leonard Wood Memorial Conference formed a basis of understanding regarding many questions where before there had been confusion. On this basis much has been built

during the last few years especially through the agency of the "International Journal of Leprosy". It is hoped that the Egyptian Conference will furnish an opportunity for consolidation.

To gain success in this respect it is important that the delegation should be widely representative and should include a sufficient number of leprologists of large experience. This will be a unique opportunity, and it is hoped that all governments and others concerned will do their utmost to make it a success.

Egypt, herself one of the oldest and yet one of the youngest countries, has known leprosy for some 6,000 years. Within recent times she has conducted an active anti-leprosy campaign.

On this account, and because of her central position between the East and the West, Egypt forms a peculiarly suitable location for such a conference. We acknowledge with gratitude her proffered hospitality and her desire to contribute towards the final control and elimination of this ancient disease.

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Those who are familiar with recent literature on leprosy must have been impressed by the growing interest taken within the last few years in methods of control. This interest is well illustrated by the present number of this journal. Readers will find in the various articles published signs of new and intense interest in many countries. Dr. Storm tells of his unique experiences in Arabia. Dr. de Souza Araujo describes the history and geography of leprosy and the intensive campaign in Brazil. Dr. Cochrane tells of the interest resulting from his original visit elaborates thorough public health measures for the control of leprosy which may be of great value in other small insular areas with well-organised public health services.

Nauru furnishes a unique example of the rapid spread of leprosy among a primitive people, which has been quickly taken in hand and efficiently controlled. The equality of the

sex incidence, and the fact that 15% must have been over the age of 25 when they received their first chance of infection, are points of special interest.

We draw our readers' attention to the interesting appeal from the Barotse Province of Northern Rhodesia where, following on Government and missionary effort, the native population are rousing themselves to the need and possibility of self-help in the fight against leprosy.

The case described by Dr. Hasselmann forms another valuable contribution to the differential diagnosis of leprosy.