relations. Now and then out-patients receive some drugs and dressings which we succeeded in collecting at home, because Ossiomo funds cannot afford to contribute anything for the out-patient’s clinic. Due to paucity of the population and the mentality of natives, the number of these patients is not big (though increasing). Not one of them is of L. type. But the number of patients asking for admission to Ossiomo Settlement is increasing, and there are days when we refuse admission to three to five lepers, and they continue to knock at the door.

Out of the total patients at Ossiomo, 62 are paying patients. They pay for their maintenance at Ossiomo Leper Settlement, drugs and clothing included, and contribute towards administrative expenses by their work. They pay 43 6s. 6d. per year. Their number is growing. I regret that so many patients are admitted to the Settlement with Paupers’ Certificates, when they positively could pay this amount. I consulted this year several District Officers on this subject, but they were all rather pessimistic. Families “would not like” to pay for the lepers. I expect we will be able to accommodate 500 patients without asking for extra funds if all new admissions are of the paying-patients category. But we must not forget that our aim is not to segregate in the Settlement a few hundred from thousands of lepers in our provinces. Our problem is how to stamp out leprosy in our provinces.

The Enugu Leprosy Conference expressed the wish that this work should be carried on on the basis of propaganda-survey-treatment method. Those who know the conditions of life in the Provinces of Benin and Warri know their special difficulties. We must not, therefore, copy slavishly the methods of other provinces, but adopt plans, as recommended at the Enugu Conference, according to the conditions of our provinces, making of Ossiomo Leper Settlement a big inter-provincial centre of the anti-leprosy campaign, as is done in the other provinces.

THE POTASSIUM IODIDE TEST IN LEPROSY

B. Moiser.

Several years ago in Nigeria, I decided to try the Pot. Iod. Test, but almost my first case met with disaster, the result being that I have been too scared ever since to make a second attempt.
It was, therefore, with considerable trepidation that I undertook to carry out a series of tests here at Ngomahuru, at the request of Dr. Muir, who was then visiting this hospital. I expected to be let in for considerable trouble; but nothing of the sort occurred, and I was agreeably surprised to find case after case finish the test without any untoward signs whatever.

The cases, both men and women, were chosen from amongst those whom I considered to be ready for discharge.* All were in good health and of robust build, and nearly all had been negative to the microscope for some time.

The patients were kept in hospital under observation, temperatures were taken morning and evening and a close watch was kept on the skin, and on the condition of the nerves and old residual lesions.

The drug was given once a week, and the dose doubled each time so long as not contraindicated. The initial dose was 5 grains, second week 10 grains, third week 20 grains, and so on till the 7th week, when 320 grains were given in about a pint of water.

Several patients objected to these large doses, but all were persuaded to swallow them down, though with considerable grimace. A few complained of abdominal pain, which soon passed off, and was of no consequence. Some had a feeling of tightness in the throat, and I was astonished to find that none complained of coryza or tearfulness. There was occasional pain over the frontal sinus, but no skin eruptions were seen in any case, and no albuminuria occurred. In fact there were practically no symptoms of iodism, and the whole experiment was so ordinary in every way as to be almost unworthy of note.

Only one patient could not finish the course, and he was a man who had been admitted a couple of years ago with active syphilitic ulcers and bone disease as well as leprosy. He had been treated with N.A.B. and bismuth metal and become negative to Wassermann, and showed no active signs of leprosy. He was not, however, a very robust patient and was evidently, as events showed, not yet fit for the test.

It would be tedious to quote each case individually, so I will just give a summary.

Thirty-three men and seven women were put through the test. In not a single case was there any exacerbation of skin lesions, or painful or swollen nerves, the only cause of discontinuance being

*The patients chosen for the iodide test were former lepromatous cases which had become and remained negative on repeated bacteriological examinations. For particulars of this test, and the dangers associated with it, see Leprosy Diagnosis Treatment and Prevention (E. Muir, 6th edition, pp. 248).
rises of temperature with general malaise. This occurred in eight men and three women. In each case an interval of a month was allowed, and the test continued without further interruption, except for the old syphilitic case, mentioned above, who ran an evening temperature of under 100° from the beginning, to be followed later by temperature up to 103°, with marked general malaise.

All these patients have now been discharged from hospital, and my confidence has been regained to such an extent that in future the test will be applied to every patient who is being considered for discharge.

During 1939, no less than 170 patients have been discharged with the disease arrested. I should like to call them "cured," and time will show if I am right or not. With the voluntary system in vogue in this country, any who discover signs of recurrence of the disease will surely return for further treatment, of their free wills. There is no need to seek them.

I feel much indebted to Dr. Muir for instilling sufficient courage into me to carry out a test which had previously filled me with alarm. The two cases are, however, not on a parallel. In Nigeria results of treatment were nil. In S. Rhodesia results still cause wonder, for in 10 years 53.9% of patients have been discharged, and have not returned.

Only 69 returned for further treatment, each of his own desire.