

## REPORTS

## Ceylon

The following statistics are quoted from the Administration Report of the Director of Health Services for 1955.

316 new cases have been detected during the year as against 265 last year.

## Incidence by Age Groups, Type and Sex

Age Groups	Lepromatous		Neural	
	Male	Female	Male	Female
0—4	—	1	1	3
5—9	1	—	9	6
10—14	3	2	9	2
15—19	6	1	8	4
20—29	26	6	33	15
30—39	19	2	28	10
40—49	15	2	24	12
50—59	15	1	20	7
60—69	5	3	4	3
70—+	2	1	6	1
Total	92	19	142	63
Type	111 Male		205 Female	
Sex	234		82	

## British Guiana

## REPORT ON LEPROSY FOR 1953

The number of known cases of leprosy in this Colony at the end of the year was 1,213 which shows an incidence of 2.7 per 1,000 of the population. Of this number, 233 cases were treated as in-patients and the remaining cases as out-patients. As in previous years, School Surveys were conducted by a specially trained Health Visitor and 25 cases of early tuberculoid leprosy were detected among 48,152 children examined. The prognosis of cases found at School Surveys was good when attendance at clinic was regular.

## East African Leprosy Research Centre

The East African Council for Medical Research in their 1954-55 Report states:

The idea for the Research Centre originated in the British Empire Leprosy Relief Association, who had earlier founded a similar Research Centre in Nigeria, later handed over to government, in which the late John Lowe did the work which helped to establish the drug DDS as a cheap and efficient treatment for leprosy, which drug has now become a standard throughout the world. The greater part of the finance for the East African Centre was provided by BELRA, and the East African Governments have

contributed, as BELRA, to both capital cost and maintenance, and the new unit is administered by the E.A.H.C., seeing that it is an institution designed to benefit all the territories.

It is expected that 1956 will see the development of full work at the East African Leprosy Research Centre. It is proposed, because of the existence of a memorial fund to the late John Lowe being built up by the City of Birmingham, he being a distinguished son of that city, to designate these laboratories the "John Lowe Memorial Laboratories", the proceeds of that fund being used to defray the original cost and, it is hoped, much of the future cost of this work.

Dr. James Ross Innes, who for many years was Inter-territorial Leprologist for East Africa, and later became Director of the Leprosy Research Centre, is retiring from the latter post to become Medical Secretary of BELRA in place of the late Dr. John Lowe. He will be succeeded as Director of the Research Centre by Dr. John Garrod, until recently leprosy specialist for N. Rhodesia.

#### **Leprosy Control in Madras**

[Extract from Hindu, Madras, September 12th, 1956.]

Two things emerge with heartening clarity from the reports of the anniversary celebrations of the Madras State branch of the Hind Kusht Nivaran Sangh and the Press Conference held in that connection. One is the increasing measure of success achieved in the treatment of leprosy by the use of sulphone drugs which have worked somewhat slow but steady and certain cures and have, in the words of the State Public Health Minister, "brought a new outlook on leprosy control by giving the hope both to the patient and the community that they can get rid of leprosy". Already 96 Government medical officers have been trained in the use of sulphones and more are to be trained. It is also good to know that these drugs are available in every Government dispensary. Both official and non-official agencies must pool their resources and their services and enable every sufferer to get the benefit of this treatment. Some idea of what can be achieved in this direction is given by the figures relating to the Leprosy Institute at Tirumani. There the number of patients discharged after the disease had been arrested rose from 66 in 1950 to 243 in 1955. It was too early to say if the disease was on the decline. It had perhaps increased only in relation to the proportion of the population. They might say that it was merely static.

Mr. Shetty said that the Government of India had under consideration a proposal for trying BCG as a prophylactic in some of the leprosy research centres, for the purpose of investigations.