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Colony of Fiji—Annual Report of the Medical Dept. 1959 (received March 1960).

This Report contains several references to leprosy and the report of the Central Leprosy Hospital, Makogai. The number of cases was less than 320 at the end of 1959. Some 40 patients had been transferred for continued teatment to the Gilbert Is. but there have been many discharges. The number of cases notified remained fairly steady (26 in 1954, 36 in 1955, 40 in 1956, 44 in 1956, 39 in 1958, 40 in 1959) and hidden foci of the disease are considered to exist. The staff at Makogai consists of 1 Senior Medical Officer, 2 clerical staff, 7 overseers, 41 subordinate staff, 23 nursing sisters and 11 assistant nursing sisters. The total number of beds in Makogai is 622 but at end of 1959 there were 317 in-patients. During the 48 years of its existence there have been 3,815 patients and 1,'94 cases of arrest of the disease. In 1959 131 were discharged, the highest number recorded. The races of the patients were Fijians, Indians, Europeans, part-Europeans, Chinese and others. The proportion of children admitted continues to decline. The lepromatous rate remains high, about 58%. In treatment at Makogai DDS by mouth remains the chief method, and small scale trials have been made of DPT or Ciba-1906 and of Etisul. In the latter the abnoxious smell of the drug proved unpopular and hindered a fuller trial. DPT by mouth gave favourable results.

Hind Kusht Nivaran Sangh (Indian Leprosy Association) 1959 Annual Report.

The Chairman, Rajkumari Amrit Kaur, gave a report containing such a magnificently inclusive survey of leprosy work in India that no abstract could possibly do it justice and it is so valuable that readers are recommended to obtain their own copies from Hind Kusht Nivaran Sangh, New Delhi.

Lake Bunyoni Leprosarium, Report for 1960.

This leprosarium of the CMS lies on islands and mainlands of Lake Bunyoni in the Kigezi District of Uganda. Dr. H. C. Parry reports that 321 patients received treatment during 1960 and there were 28 patients discharged, 25 of them without disability. For discharge the criteria are strict. The outward signs of leprosy having vanished, the patient must have been under observation for at least 12 months without specific treatment and 6 or more monthly consecutive negative smears must have been obtained. Dr. Parry approves of this strictness, because in 1960 there were 10 relapses, in spite of every care. In the laboratory increased care has been

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given to the making and staining of smears. Dressing of ulcers still remains a large part of the daily care of the patients. The out-patient department remains very active, with 6,531 attendances during the year. The dispensary has been greatly improved in stocks and facilities, and the general work greatly improved. Members of the District Council (African Local Govt.) visited the leprosarium in December and showed great interest. The leprosarium receives aid from Central and Local Government Grants and from BELRA and the Mission to Lepers. The percentage of types of leprosy among those treated was lepromatous 57%, tuberculoid 30%, indeterminate 8% and borderline 4%.