Reviews

I. Leprosy in Theory and Practice, edited by R. G. COCHRANE and T. F. DAVEY, 1964, published by John Wright & Sons Ltd., Bristol at £5 15s od, has 659 pages, 247 illustrations, some in colour, and a satisfactory index. This is the Second Edition and the same plan has been followed of having many authors who contribute on the component subjects of a leprosy textbook. This plan has proved very beneficial, especially as the team of contributors comprises 43 people, as follows: R. G. COCHRANE who begins the work by a study of the history of leprosy and its present pattern, and C. M. CARPENTER and J. N. MILLER of California University follow with a satisfactory account of the bacteriology of leprosy. R. J. W. REES and R. C. VALENTINE of the Medical Research Council of Great Britain heighten this by a stimulating study of the application of quantitative electron microscopy to the bacillus of murine leprosy and of human leprosy, mentioning the evidence that degenerate forms of M. lepraemurium are non-viable, and describing the elongation of the same organism incubated in a cell-free medium, as measured in the electron microscope. They also describe the appearance of degenerate (or dead) leprosy bacilli in the light microscope, and changes in the morphology of the same during standard drug therapy. E. M. BRIEGER and J. M. ALLEN OF Strangeways Research Laboratory, Cambridge carry on the fascinating scientific story by an account of their experiences with electron microscopy of the lepra cell (or Virchow cell). R. W. RIDDELL, consultant bacteriologist of the Brompton Hospital, London, reviews the acid-fast mycobacteria, and W. H. FELDMAN, veteran bacteriologist of the Mayo Clinic, USA, discusses non-leprotic and non-tuberculous mycobacterial infections (with incidentally a good illustration of lepra bubalorum). L. F. BADGER then tackles the important subject of epidemiology and has much sound practical advice. s. g. SPICKETT of the University of Cambridge, England, considers genetic mechanisms in leprosy and establishes the validity of them. No longer can they be ignored. V. R. KHANOLKAR of the Indian Cancer Research Centre describes in a most illuminating way the general pathology of the disease and the special pathology of reaction and of the Lucio phenomenon, and has a word about histological diagnosis. G. MIDDLEBROOK of the University of Colorado deals with the general aspects of immunology in mycobacterial infections and is ably supported by O. K. SKINSNES of the University of Chicago. (He was formerly pathologist at the famous leprosarium, Hay Ling Chau in Hong Kong). His contribution concerns the immunological spectrum of leprosy. s. w. A. KUPER of the Brompton Hospital, London, by his article gives guidance on the lepromin reaction and BCG, and on the preparation of lepromin. T. F. DAVEY, formerly of Uzuakoli Research Unit in Eastern Nigeria, and R. R. SCHENCK formerly of Carville and now of Centerville, collaborate in an exhaustive study of the endocrines in leprosy, in the disease itself and in therapy. A. G. M. WEDDELL, D. G. JAMISON, and ELISABETH PALMER, all

of Oxford University, collaborate on a stimulating article on the neurohistological changes on leprosy, with beautiful illustrations, and c. E. LUMSDEN of the University of Leeds, England, contributes an informative study of the Schwann cell in leprosy. He thinks that failure to recognize the convertibility of filiform Schwann cells to a macrophage variant has perpetuated some of the greatest difficulties in leprosy histology.

The essential practical matter of signs and symptoms in leprosy is dealt with in a masterly manner by R. G. COCHRANE, Medical Adviser to American Leprosy Missions. s. G. BROWNE of Uzuakoli Research Unit, Nigeria, also in a masterly manner deals with the differential diagnosis. The favourite subject of classification is dealt with adequately by R. G. COCHRANE and H. J. SMYLY (the latter, now retired, was in N. Rhodesia, formerly of Peking Union College), and a suggested classification given for research purposes. The oft neglected subject of the eyes in leprosy is dealt with by the valuable article given by D. P. CHOYCE, Consultant Ophthalmic Surgeon to the Hospital for Tropical Diseases, London, and lesions of the nose, throat, and ear are next given particular attention by R. G. COCHRANE, who next goes on to consider complicating conditions due to leprosy. The guidance given by s. R. M. BUSHBY of the Wellcome Research Laboratories on chemotherapy is a treasure, and is naturally followed by R. G. COCHRANE with his study of the whole subject of therapy. Again it is very natural and satisfactory for T. F. DAVEY to give a comparison and appraisal of the newer drugs in leprosy, and of research of which he has had so much long-term practical experience in Uzuakoli. On the subject of leprosy therapy H. F. WEST of the Medical Research Council keeps us right on the principles of corticosteroid therapy. A special consideration follows of neuritis in leprosy by R. G. COCHRANE, and of reactional states, by W. H. JOPLING, who is resident physician of the Jordan Hospital (for leprosy), Surrey, England. The majestic and absorbing story of leprosy continues with study of bone changes, and absorption in leprosy by D. E. PATERSON of Christian Medical College, Vellore, S. India, and C. K. JOB, Superintendent of Schieffelin Research Centre, Karigiri, S. India. Their most helpful contribution has many radiological illustrations of bone changes in the limbs, and if there had been space, no doubt would have included some pictures of the great findings of v. Møller-Christensen in regard to bone changes in the upper maxilla and the anterior nasal spine. (His thesis on bone changes in leprosy was issued from Munksgaard, Copenhagen, Denmark in 1961 through John Wright & Sons Ltd., Bristol, England).

PROFESSOR PAUL W. BRAND, professor of orthopaedic surgery in Christian Medical College, Vellore, and N. H. ANTIA (pp. 447–509) deal with deformity in leprosy, first the orthopaedic principles and practical measures of relief, then reconstructive surgery of the face. DR. N. H. ANTIA is in charge of the plastic surgery department of the J.J. Hospital, Bombay, and has brought his skill to bear on leprosy in Kondhwa Leprosarium, Poona, and in other places. It should be recognized that reconstructive

and plastic surgery applied to leprosy is new and revolutionary and highly beneficial, and this section on deformity in leprosy is extremely valuable. It is amazingly clear. The subject is ably advanced by E. W. PRICE, now in Ethiopia, formerly orthopaedic specialist to E. Nigeria. He deals with the care of the feet, and has an addendum by W. F. Ross of Oji River Leprosarium, E. Nigeria, on the prevention of plantar ulcer. These papers are logically followed by physiotherapy, described by RUTH E. THEIN of Mandalay, Burma, and D. J. WARD of Karigiri on footwear in leprosy and KAMALA V. NIMBKAR, founder-editor of the Journal of Rehabilitation in Asia, on occupational therapy for the disease.

The book switches back to prognosis and criteria of discharge, by R. G. COCHRANE, and prevention of leprosy, by R. G. COCHRANE, and he is followed naturally by T. F. DAVEY on survey and follow-up work in leprosy, and C. M. ROSS, now of Alupe Research Centre in Kenya, on surveys and the control programme in northern Nigeria, and R. G. COCHRANE, and CLAIRE M. VELLUT of Polambakkam on leprosy control in Madras state in a rural area. The impact of the disease on society is studied next by DHARMENDRA who is Director of the Research Institute at Chingleput, and by R. G. COCHRANE.

As if to complete and drive home all that has been learned, seven appendices close the book: (I) R. G. COCHRANE describes techniques of examination; (2) he gives hints how to record lesions diagrammatically; (3) D. S. RIDLEY of Tropical Diseases Hospital, London, describes bacterial indices; (4) R. G. COCHRANE guides on the preparation of lepromin and the reading of its results; (5) E. A. WHEELER of St. John's Hospital, London, gives practical information on preparing biopsies from the skin for histological examination; (6) R. G. COCHRANE gives some customary prescriptions; (7) R. G. COCHRANE describes how to sterilize oily preparations.

The foreword by Sir G. McRobert should also be read at the end, viz., 'In the past few years we have become less optimistic than in the midfifties with regard to the possibility of obtaining complete cures from the sulphones. Relapses even occur with regular and prolonged administration. Research must go on. New and better drugs can be sought. New methods of inducing immunity must be found. "Leprosy can be cured" must be changed to "leprosy *must* be cured".'

This book is a landmark, a phenomenal achievement of world importance, which every leprosy worker must possess. Individual disagreement on this or that point is inevitable, but nothing can destroy the fact of the book for which we are extremely grateful to the editors and their collaborators.