COMMUNICATING

The word “communicating”, together with its cognates, is fashionable in scientific literature today as well as in polite and earnest conversation. Such words may be bright and attractive when newly minted, but forfeit both their shine and their value with constant use. In the world of science, and particularly in the realm of leprosy, “communicating” indicates something real and genuine, something praiseworthy and, in fact, essential. Unless we do it and encourage it, we shall fail to take advantage of the new wealth of knowledge and the new investigative techniques that are now being made available.

And it is all too easy to rest on one’s oars, to become smugly satisfied with old ways and familiar scenes, to develop an imperviousness to new ideas and novel methods. Clinicians and administrators, physicians and surgeons, field workers and (surprisingly) laboratory researchers may all be guilty of an unwillingness to communicate and to be communicated with.

Leprosy Review will provide an ever-open, two-way (or multi-way) channel for communicating. As in the past, it will be a public forum where those who have something to say will always find those on the look-out for something worth listening to. Given the desire to understand, and the will to make the effort to learn the vocabulary and to become acquainted with the essential language of the newer specialities, there should be no real or lasting difficulty in making oneself understood or in understanding what the other man is trying to tell us.

Unlike the dilettante Athenian loungers who only wanted their fancy tickled by some “new thing”, our readers will critically welcome fresh reviews of old assumptions and re-examinations of some remaining ex cathedra dicta that have been passed down for generations. This will not mean the futile repetition of good work already done, or any wordy self-education in public, but it may well comprise some wholesome protest against the danger of being mesmerized by a name or an institution.

Leprosy Review will cast its net wide. It has already done so in the past few years. To adapt the old tag, nothing of interest to the leprosy worker will be alien to us. The research scientist in his laboratory will be wanting to share with medical workers in the field and in the clinic the results of his investigations. The time-lag between the laboratory and the field must be shortened, with due regard of course to severe scrutiny and critical appraisal. The worker in a distant leprosy clinic, cut off in some ways from the thrill of high-powered research, will on his part also have something worthwhile to communicate. If some of the outstanding problems of leprosy are going to be solved in the laboratory, with the co-operation of the helpful mouse and dedicated men, other problems—of transmission, vulnerability and refractoriness, and spontaneous regression—may well find their solution in the field.

Leprosy Review will encourage field workers to analyse their methods of leprosy control and to evaluate the results achieved, so that more effective measures may be developed for a most intractable public health problem.

Channels of communication are kept open by constant use. Whatever our specialized interests or immediate concerns, the ultimate, if unexpressed, aim of most of us is the control of leprosy, and we bend our diverse expertise and energies to this end. Leprosy Review will keep this end clearly in view, and publish “communications” that will stimulate and help all those whose concern is leprosy and leprosy control.

Of recent years, leprosy has emerged from the dark ages of superstition and has become scientifically respectable. The increasing seriousness of these new studies in leprosy, and their sheer scientific fascination, will, we hope, be reflected in the pages of Leprosy Review. All those working in leprosy—clinicians, laboratory workers, reconstructive surgeons—will find
articles of interest and importance in its pages, while nurses and physiotherapists, prosthetists and medical auxiliaries (paramedical workers) will discover much that is instructive and helpful. Non-specialist practitioners, who from understandable lack of time or interest glance merely at titles and summaries, will be kept abreast of new work in leprosy, both by original articles and abstracts of papers published elsewhere, and by authoritative reviews and symposia.

We hope that our correspondence columns will reflect both the critical acumen (and courtesy) of our readers and the great range and variety of experience in leprosy that they represent. Brief and pointed comments will always be considered for publication.

ELEP Medical Commission

The Medical Commission of ELEP (Association of European Leprosy Organizations), composed of Drs. L. P. Aujoulat, S. G. Browne, Fr. Hemerijckx and Fr. Wegener, met in Brussels on 5 November, 1968, to discuss the medical aspects of diverse projects in which member-organizations are interested. Thanks to the numerous official and unofficial contacts that the members enjoy in their own countries and abroad, it is possible to make the influence of the voluntary agencies felt in leprosy control schemes in many lands. Contact is maintained with W.H.O. and has been initiated with O.C.E.A.C., the Commission concerned with endemic diseases in the French-speaking countries of Africa.

An interim report on an epidemiological survey of leprosy in Morocco was received, and up-to-date news of the Adzopé Project (in the Ivory Coast) was given by Dr. Aujoulat.

Prospects for the creation of a Professorial chair of Leprology at the University of Dakar (Senegal) were welcomed, especially as it is hoped that the title-holder would be able to spend part of every year lecturing to French-speaking medical students at the different medical schools in West and Central Africa, and include visits to the A.L.E.R.T. Project in Addis Ababa.

The ELEP-sponsored Leprosy Control Project at Dharmapuri (India) is now well under way. Dr. I. A. Susman has appointed paramedical staff and begun preliminary surveys of the area involved.

The Medical Commission of ELEP is concerned that medical priorities should be respected as far as possible in schemes sponsored either jointly or separately by the member-organizations, while admitting that in some circumstances social and non-medical considerations may be equally important. The channelling into effective leprosy control work of moneys raised by voluntary organizations appealing to the general public often raises delicate questions where the emotional factor may conflict with long-term anti-leprosy strategy.

S. G. Browne

G 30 320 or B 663—Lampren (Geigy)

Of the many drugs investigated for their activity in leprosy of recent years, one of the most promising is B 663. This drug is one of a long series of rimino-phenazine derivatives synthesized in the laboratories of the Irish Medical Research Council in Dublin. Its use in leprosy has been the subject of numerous publications, the first of which appeared in the pages of Leprosy Review some 7 years ago.

A slightly edited verbatim report of a Symposium on B 663, which was organized to precede the recent International Leprosy Congress, appears on pages 21 to 48 in this issue.