

Book Reviews

Notes on Leprosy, 2nd ed., by DHARMENDRA, M.B.B.S., DIP. BACT. (LOND.), Ministry of Health, Government of India, 1967. 408 pages. Price: 58s. 4d.

We extend a warm welcome to the second edition of Dr. Dharmendra's *Notes on Leprosy*, which has now been published. It is extremely good value for the price, and we predict that it will prove even more popular than the first edition, published in 1960.

The book has been completely rewritten, and bears on every page the marks of careful editing and judicious choice of new material. It is definite—even dogmatic—in tone, which is not an undesirable feature in a book intended as a manual for students and non-specialist practitioners. It carries the impress of the author's wide experience and detailed knowledge of the range of clinical leprosy as seen in India, and the 110 pages of illustrations—some of them in colour, and now interspersed with the text (surely an improvement)—add considerably to the value of the book as a teaching aid and as a work of reference.

Doctors in India who have the privilege of learning their leprosy at Chingleput or Calcutta, will find in the pages of the new Dharmendra all they need to know—and more—when confronted by problems of diagnosis and management. They will also, we hope, be stimulated to develop standards of careful clinical observation and wide-awake awareness. Although in the future major advances in leprosy will probably come from laboratory investigations in the fields of experimental microbiology and immunology, there remain problems of transmission and epidemiology to which answers may be found by the painstaking field worker.

Faced with the need of undiagnosed and untreated thousands, in India and elsewhere, the doctor who knows his "Dharmendra" and who follows the practical advice on survey, education and treatment given in its pages, will be able competently to organize a leprosy control scheme, with the right emphasis on diagnosis and treatment and rehabilitation. The dimensions of the leprosy endemic in countries like India, confronted by major killing diseases and uncontrolled population growth—with concomitant undernutrition—serve to emphasize the urgent need to discover effective ways of preventing leprosy. BCG and dapsone prophylaxis point the way, but, as Dr. Dharmendra indicates, there is still a real need for convincing evidence that any measures advocated will achieve their object.

Meanwhile, we advise leprosy workers everywhere to

buy this book and to use it. They will find that a second edition twice the size of the first may be more than twice as useful.

Leprosy for Practitioners by S. J. YAWALKAR, M.D. (MUNICH), D.V.D. (BOMBAY) (LONDON). English Universities Press, 1969. 120 pages. Price: 40s.

The aim of the author of this slim volume is to present the salient facts about leprosy to non-specialists, particularly medical undergraduates and busy general practitioners. Intended originally for the doctor working in India, it is now published in London.

The book shows evidence of an Indian—and even of a Bombay—background, and the standpoint on such questions as classification, pathogenesis, therapy, maculo-anaesthetic and polyneuritic leprosy is that of Indian leprologists. The author leans very heavily on his sources, and seems to derive most of his knowledge from authorities rather than from critical personal observations and wide experience.

As an interesting and readable introduction to the subject, this little book may have some value, though the price for 120 pages of text (including diagrams and well-produced photographs) would seem rather high to those who might be expected to need it most and to benefit most from perusal of its pages.

The best chapters in the book are those dealing with clinical aspects of leprosy, the photographs of typical lesions being very good and helpful. One may well wonder, however, if in a shortish chapter on differential diagnosis, a page and a half devoted to such a rare condition as diastematomyelia is not somewhat disproportionate. In a monograph intended for the general practitioner faced with the problems of management of the patient with severe lepromatous leprosy, in reaction or not, a more practical and detailed approach would certainly be advisable—and appreciated, both by the medical attendant and the patient.

Although the time-lag between preparation of the manuscript and publication may be offered as an extenuating explanation, it is disappointing not to find references to recent work on experimental transmission of *Myc. leprae*, and to read an uncritical repetition of investigations now somewhat dated. The eye would be helped by better proof-reading, an adherence to convention in italicization, and a conformity to established scientific usage in the matter of textual references.