

## Book Reviews

*Santé et développement en Afrique*, by L. P. AUJOULAT.  
Librairie Armand Colin, 103 Boulevard Saint-Michel,  
Paris, Ve, 1969. 285 pages.

For far too long, and with some justification, leprologists used to be accused of isolationism. They kept themselves to themselves, blissfully unmindful of the ferment and turbulence going on around them in the world of scientific medicine. Nowadays, they may face the charges that they are so concerned that leprosy should not be forgotten or neglected that they tend to over-emphasize its importance and commandeer more than their fair share of cash and publicity.

Here is a book that should be read by all those interested in leprosy as it occurs in the setting of the medical and economic problems of the developing countries.

Dr. Aujoulat is not a specialist leprologist, and some of his expressed views on the success of leprosy campaigns may appear unjustifiably optimistic, but he has an unrivalled and intensely practical knowledge of the larger problems of health and disease, of rural and tribal Africa, of control of tropical endemic disease and the disquieting health hazards of the new industrialization and urbanization. He paints on a wide canvas, with sweeping strokes, but his touch is so sure and so elegant that the reader follows him with mounting interest. He insists time and again that medical policy has to take account of the human factor and non-medical considerations; it must anticipate and, if necessary, mitigate the results of its own spectacular successes.

The book is written in the eloquent French characteristic of the author, and its severely practical passages are illumined by flashes of personal experience culled from distant days in the African bush or more recent contacts with health administrators around the conference table. It is unfortunate that the proof-reading is below standard.

*Watch Those Eyes. Eye Complications in Leprosy*,  
2nd ed., by MARGARET BRAND. The Leprosy Mission,  
London. Price: 1s. 6d.

The increasing attention paid to the ocular lesions of leprosy owes a good deal to Dr. Brand's efforts, and the appearance of this second edition of her excellent guide to diagnosis and treatment is further evidence of their success.

Clinical vigilance and the timely application of basic remedies, rather than access to advanced technical expertise, are the important requisites for prevention of much of the blindness for which leprosy is responsible. Dr. Brand's advice to the leprologist without special ophthalmic training is admirably clear, and invaluable also to the ophthalmologist unacquainted with leprosy.

In the further editions to be expected an index would be a useful addition.

*Pathology in the Tropics*, by G. M. EDINGTON and  
H. M. GILLES. London. Edward Arnold (Publishers)  
Ltd., 1969. 756 pages. Price: £5 net.

This comprehensive and authoritative volume fills a long-felt gap, and fills it admirably. It is clear as well as full, illustrated with excellent black-and-white photographs, and provided with over 80 pages of collated references that will be appreciated by those working away from central libraries.

Epidemiology and geographical pathology receive an emphasis that is merited by their importance but frequently neglected in books of this type. The appendix includes descriptions of diagnostic procedures and techniques not readily available elsewhere.

The chapter on leprosy gives an excellent account of the macroscopic and microscopic aspects of the host-parasite relation in this disease, and omits nothing that could be compressed into its 15 well-packed pages. Leprologists would perhaps wish for fuller treatment of such subjects as immunology in relation to the various types of leprosy, of cell-mediated immunity, and of recent microbiological experimental work. But for the general reader, the pathologist to whom leprosy is no longer a far-off disease but one that may arrive in his laboratory as a skin-smear or a "sarcoid" granuloma or a skin section showing a sheet of foamy cells, this chapter should be sufficient to whet his appetite for more exotic fare.

Misprints are rare. The statement that "pure anaesthetic leprosy is a relatively common clinical entity" (p. 264) would not go unchallenged in Africa, or even outside Africa.

The paperback edition is good value at £5; a hard-back edition is available at £10.

We predict a most useful life for the first edition of this work.

*Essays on Tropical Dermatology*, ed. by R. D. G. PH.  
SIMONS and J. MARSHALL. (Amsterdam.) Excerpta  
Medica Foundation, 1969. 292 pages. Price:  
U.S. \$20.00/£8 7s. Sterling/Dfl. 72.00.

There is some truth in the jibe that leprologists see leprosy when they should not, and that dermatologists do not diagnose leprosy as often as they should. Although written primarily for physicians dealing with dermatoses, particularly as they present themselves in tropical countries, these *Essays on Tropical Dermatology* will help both leprologists and dermatologists to recognize skin conditions that are not infrequently misdiagnosed. Unusual appearances of common dermatoses as they are modified by environmental factors in the tropics, are described and illustrated.

Of particular interest to our readers would be the chapters on Granuloma multiforme and Sarcoidosis,

in addition to chapters entitled *The fight against leprosy* (Latapi), *The treatment of leprosy* (Cochrane), *Borderline leprosy* (Jonquières) and *Treatment of the acute lepra reaction* (Languillon). These chapters provide a useful summary for the non-specialist reader, without advancing any views that are novel or epoch-making. Latapi emphasizes the importance of domiciliary treatment integrated into a comprehensive medical programme and the need to counteract outmoded attitudes. Cochrane concentrates on unexceptionable advice on treatment with a few standard drugs. Jonquières deals competently with the difficult problem of the intermediate forms of leprosy, while Languillon gives useful hints on the management of patients with lepromatous leprosy undergoing acute exacerbation.

Some abbreviations might well have been written in full: thus on p. 143, I.L.A. stands for International Leprosy Association, and O.M.S. for *Organisation Mondiale de la Santé* (World Health Organization).

The photographs in these chapters, and indeed throughout the book, are excellent.

Synthetic phenazine derivatives and mycobacterial disease: A twenty-year investigation, by VINCENT C. BARRY. *Scient. Pro. R. Dubl. Soc., Series A*, **3**, 153.

Dr. Barry has again placed us in his debt. In this Boyle Medal Lecture he retraces with unadorned skill the fascinating Odyssey he pursued in company with his Dublin colleagues in the search for an antimycobacterial drug. He allows us to peep into the captain's chart-room and to share with him, in retrospective imagination, some of the hazards of the voyage, the false courses taken in ignorance, and the crucial calls at the Isle of Serendip, where he made valuable and unsought discoveries.

From synthetic antimetabolites to the conscious and

progressive modification of diploicin (the first organic chlorine compound found in nature), we can follow the story of the synthesis of scores of rimino-phenazine compounds, until the development of some that were far more active than streptomycin or the thiosemicarbazones in experimental murine tuberculosis. B 663 proved to be the most active, both as a causal prophylactic and also as a treatment for the established infection: it is still the only compound known to achieve this effect on oral administration. It is strange that no published report has appeared concerning its value in human tuberculosis. However, B 663 is still the only drug that has held murine leprosy in check for as long as 816 days without the development of drug-resistance. The supposition that B663 is of no value in human tuberculosis may be correlated with the observation that the drug is concentrated in macrophages. This fact suggested to Barry and his fellow chemists, and subsequently to Cochrane and Browne, that B 663 should be tried in human leprosy. The subsequent results of the clinical investigations conducted at Uzuakoli have received wide publicity.

B 663 has been found of value in treating ulceration due to *Myco. ulcerans* and also to an atypical avian strain of bacillus.

The anti-inflammatory properties of B 663 in erythema nodosum leprosum may be associated with some impairment of macrophage action in processing antigen, and hence to some immunosuppressive activity.

Barry briefly touches upon the mode of action of these rimino-phenazine compounds. Since B663 is strongly taken up by living mycobacteria, it is possible that it interferes with terminal hydrogen transfer, but much is still obscure.

B 663, or Lamprene (Geigy), has now passed the Dunlop Committee, and has received the approved name of clofazimine.