

## Book Reviews

**The diagnosis and management of early leprosy**, by SG Browne, 1979, London, The Leprosy Mission, 50 Portland Place, London, WIN3 DG

This booklet of 35 pages is a revised third edition, the first having been reviewed by Dr TF Davey in *Leprosy Review*, 1975, 46, page 241. It is part of a series 'Leprosy Today', obtainable free from the publishers, and intended for medical practitioners in countries where leprosy does not constitute a major problem and is therefore in danger of being overlooked. Its content reflects the great experience of Dr Browne and his well-known descriptive ability in this and other subjects; it is altogether a pleasure to read. There are some important changes in the matter of treatment and the fear of drug resistance is mentioned in relation to altered concepts in the treatment of reactions. Although some practitioners, even after reading this excellent book, may not feel able to 'recognize leprosy with assurance and treat it with confidence' it is nevertheless to be heartily recommended for all those who may encounter this disease for the first time.

J E LANDHEER

**Three for Compassion**, by Val Bock, 1979. The Leprosy Mission, London.

Three young and compassionate Christians recount how they came to leave their home countries to take up work with The Leprosy Mission (TLM), and describe their early experiences of leprosy work: a nurse in India, a physiotherapist in Thailand, and a doctor in Nepal.

**A Child in the Midst**. The Leprosy Mission, 1979.

The first 11 pages tell the stories, in pictures and captions, of children under treatment in TLM centres and hospitals in various parts of the world, and the final pages contain notes on personnel working in Africa and Asia.

W H JOPLING

**Leprosy in the Three Wangas, Kenya: Stigma and stigma management**, by I. Bijleveld, Koninklijk Instituut voor de Tropen, Amsterdam-Oost, 63 Mauritskade, Netherlands, pp. 135.

The literature on leprosy is still defective in sociological studies which illuminate the causes of stigma and prejudice, so important in the approach to leprosy control. Dr Bijleveld deserves our gratitude for this detailed and sympathetic study of leprosy stigma among the Wangas of Kenya. By dint of tape recordings of conversations, and of answers given by 85 people to a very carefully devised series of questions, a mass of information on the subject was gathered which is here analysed. It became possible to distinguish between stereotyped traditional thinking about 'the leprosy patient' and the life he must lead according to inherited ideas, and the actual attitude which became possible through personal contact with individual patients in today's setting. Traditionally, the leprosy patient became sociologically 'dead', and many actual patients find this still a powerful

source of anxiety. To increasing numbers of the general public the impact of western ideas is diminishing the potency of tradition, so that the person with leprosy who attends a treatment clinic faces less discrimination than traditional ideas would permit. This is just one of several grounds for hope that with suitable and sustained education on the subject, the destructive pressures of prejudice could be eased. It was interesting to

discover how much in line with modern thinking the traditional ideas of the Wangas on the infectivity of leprosy really are. This is a study to be read by anyone interested in the background against which rural leprosy control has to be promoted in Africa. Copies are available from the Department of Social Research at the above address.

T F DAVEY