An analysis of 118 cases of leprosy in the Tarntaran Asylum (Punjab), and On the arrest and cure of leprosy by the external and internal use of the gurjun and chaulmoogra oils / by J.C. Phillippo; communicated to the Epidemiological Society of London, January 8, 1890, by Phineas S. Abraham.

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## ANALYSIS OF 118 CASES OF LEPROSY IN THE TARNTARAN ASYLUM

(PUNJAB),

(21)

AND ON

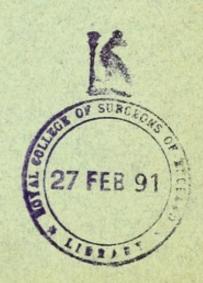
THE ARREST AND CURE OF LEPROSY
BY THE EXTERNAL AND INTERNAL
USE OF THE GURJUN AND CHAULMOOGRA OILS. By THE HON. J. C.
PHILLIPPO, M.D.

Communicated to the EPIDEMIOLOGICAL SOCIETY OF LONDON,

January 8, 1890,

BY

PHINEAS S. ABRAHAM, M.A., M.D., B.Sc., F.R.C.S.I.





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27 FEB 91

### ANALYSIS OF 118 CASES OF LEPROSY IN THE TARNTARAN ASYLUM (PUNJAB).

REPORTED BY GULAM MUSTAFA, ASSISTANT SURGEON.

BY PHINEAS S. ABRAHAM, M.A., M.D., B.Sc., F.R.C.S.I.

(Read: January 8th, 1890)

In the discussion on my paper on Leprosy, read before this Society in May 1889, it will be remembered that the Rev. E. Guilford, who had lately returned from India, made some interesting remarks upon the disease as he had seen it among the patients at the Tarntaran Leper Asylum (Punjab), of which he had been superintendent for some time. That gentleman then promised to obtain, for the information of the Society, further particulars and histories of the cases. This he has done, and a volume of MS. notes which he wrote for, has been handed to me, through the kindness of our member, Brigade-Surgeon Scriven, M.D.

The notes have been compiled by Mr. Gulam Mustafa, and although incomplete in some respects, they appear to me to be of very great interest, and quite worthy of the consideration of the members of the Society. They consist of short histories of some 120 adult cases, now, or recently, inmates of the asylum; and, on the whole, they illustrate several points of etiological significance. The language may sometimes appear a little quaint—at any rate, to an unimaginative European mind; but, with the exception of a few obvious inaccuracies, particularly in reference to dates, the accounts bear evidence of considerable care and knowledge of the subject on the part of the compiler.

I have tabulated the cases, giving particulars as to sex, age, variety of the disease, its duration, number of relations affected, number of progeny, evidence as to a fish diet, the

first symptoms observed, and some other details.

Two of the cases (Nos. 77 and 81) are evidently purely syphilitic, although one, it is stated, "thinks himself a leper"; two are incipient (Nos. 83 and 84); and a third (No. 38) is said by the doctor to have "no symptoms of leprosy on her body, though she pretends to say that she has got the disease".

Of the 118, seventy-five are males and forty-three females (i.e., in the proportion of 1.7 to 1)—a much higher proportion of the latter than we should expect from the census returns of the lepers of India in 1881. Fifty of the inmates are Mussulmans (twenty-six males and twenty-four females); the rest are mostly Hindoos. The highest age recorded is eighty years for two males and one female; the lowest eighteen. The very young lepers, of whom there are evidently several in the asylum, are not included in the Report.

The comparative ages are as follows:

Number of Cases.

Males1 Females	20 to 29 10 4	30 to 39 15 5	12 11	50 to 59 23 5	11 16	70 to 80	= 75 = 43
Total	14	20	23	28	27	5	118

The average age being about forty-eight years.

These ages are manifestly only approximate; it struck me as curious, that of the whole number of cases recorded, only five ages are not put down as multiples of five. I have seen it stated that on the matter of their ages the statements of Indian natives are generally more or less unreliable. The figures above given, therefore, and those relating to the duration of the disease and time of onset, cannot be regarded as absolutely correct.

In sixteen of the cases the symptoms of the disease seem to have appeared in childhood or early youth; in sixty-six between puberty and thirty-five years of age (thirty-six of these being between twenty and thirty years of age); in twenty-one cases the onset has apparently been between the ages of thirty-five and fifty-five; and in two cases the disease manifested itself in old age, one being a woman of seventy, affected only three years; the other a man of eighty, who had been a leper for six years. The mean age of onset in 105 cases is about twenty-two years.

As regards the duration of the disease in the asylum cases-

11	had been	affected	for 5	years	or under
25	"	,,		to 10	
45	"	,,		to 20	,,
17	,,	,,		to 30	"
4	"	, ,,		to 40	"
3 2	"	"	41	to 50	"
Z	"	,,,	-	55	2,7

Average duration for 107 cases = 16.25 years.

Concerning the relative number of cases of the chief varieties of leprosy, the data given are not quite sufficient to arrive at a certain conclusion. As far as can be made out, however, the form of the disease in which the atrophic and anæsthetic symptoms are most marked is represented in seventy-six cases (or 64.4 per cent.), forty-eight being males and twenty-eight females, while the variety characterised by nodular dermal growths is exhibited particularly in fourteen cases, nine males and five females. Twenty-five cases appear to be "mixed", sixteen males and nine females.

These numerical averages may be contrasted with those calculated by various observers in some other parts of India, as in the following table, which is necessarily incomplete:—

	Almora,	Sidlkok.	Rung- pur.	Bombay.	Western India.	Madras.	Central Provinces
Proportion of Males to Females	1.5 to 1	4 to 1	2 to 1	4.38 to 1	3.3 to 1		
Average age of Patients	37.2 yrs.			30 to 35	30 to 35	32.4	
Average age of attack	23.7 yrs.	•••			25	26	20 to 25
Average duration at time of observation	13.7 yrs.	***		5 to 10		6.4	

Relations affected.—The reporter seems to have made very careful inquiries as to the antecedents and family history of nearly every case in the asylum. In most instances he gives particulars concerning the parents, and the brothers and sisters; their deaths, marriages, and offspring; and often details regarding the uncles and aunts, and other relations. It is quite evident that he is a believer in the heredity of the disease, and that in every case he seeks for this as an etiological factor.

In seventy-one cases it is definitely affirmed that no trace of the disease existed in the locality. Thirty-eight patients—
i.e., 32.2 per cent. of the whole number—admit that one or more of their blood relations are, or were, lepers; and four state that the disease was present only in distant relations. In five instances, connections by marriage alone were affected. Both parents were diseased in three cases; the father in twelve; the mother in five; a grandmother in one; uncles in eight; brothers in eleven; sisters in four; "mothers'" relations in three; cousins in three; other distant relations in one; sons

(first affected) in three; husbands in two; husbands' relations in four; an uncle's wife in one.

In some cases several of the relatives were leprous; e.g.,

in case 108, as many as fourteen.

Progeny of the Lepers.—Seventy-three of the total number appear to have been married before the onset of the disease, viz., forty-three males and thirty females; and whilst still in the healthy condition, the males are credited with seventy-one children, now or lately living, and in most cases free from the disease, and the females with sixty-five; total, 136. Four only, all females, are stated to have given birth to off-

spring, five in all, after the disease had declared itself.

Until recently, it was the custom in this asylum to allow the patients to intermarry. Thirty-nine of those whose histories are here recorded—viz, sixteen males and twentythree females—availed themselves of the privilege, and some of them married more than once; thus, one man united himself with no less than five leper wives one after the other, and several other patients were married two or three times. Altogether, the number of marriages contracted by the men in the list amounts to twenty-six, and those of the females to twenty-nine. Only five of the men proved prolific, with a result of ten children, and eight of the women with a result of fifteen children. Four of the children are dead, so that we have left twenty-one as the progeny of fifty-five marriages. As the notes give no information as to the names of the leper or lepers which each man or woman married, it is impossible to say whether the children and the marriages are not counted twice in the above calculation. It is probable that the actual sterility is even greater than these figures indicate.

The desire for matrimony does not seem, however, to be quite universal among the inmates of the asylum, for we read of one woman who "did not marry with any lepers,

though she was excited by lepers to marry".

Particulars as to a Fish Diet.—The reporter seems to have had his mind open as to the possibility of a fish diet being a cause for leprosy; for in the majority of the cases he specifically alludes to the former habits of the patients in this respect. In thirty-one instances he makes some such remark as this: "Never tasted fish in his life;" five of the patients are stated to have "seldom" or "rarely" partaken of fish; forty-two to have "sometimes" eaten it; and only four of the 118 to have indulged in a fish diet "in excess" or "in plenty", or "often". In thirty-six of the histories fish is not alluded to, but in several of these the words "no special diet"

occur, and there is reason to believe that by this expression it is meant that fish was not eaten. In others, again, it is simply stated that the patient lived on the usual food of his

class—" dal, bread, vegetables, etc."

First Symptoms Observed .- The attention of the patients seems to have been first directed to their malady by the occurrence of a "whitish eruption" in forty-seven cases, "blisters" on the joints in twenty-three, a reddish eruption in ten, swelling of the face, hands, etc., in nine, and weakness and anæsthesia of hands and feet in eight. A sensation of heat in the skin, general weakness, fissures on the soles of the feet and toes, a pricking sensation in the throat, and the atrophy of a digit, are variously put down as the first symptoms observed in other cases. Prodromates, if any, appear to have been for the most part overlooked, but previous attacks of fever are mentioned in a few cases. Some three or four of the patients ascribe the origin of their complaint to some traumatic injury, such as a snake-bite; and one man is said to have been pricked on the buttock by a pointed piece of stone, the part inflamed, a large ulcer remained, not healing for four years, and leaving an anæsthetic surface.

In nineteen cases it is reported that chaulmoogra and gurjun oils have been used, but only in two is there stated to have been any benefit. Few or no details are given as to the persistency or thoroughness of their application. With reference to one of the successful cases (No. 98), we are told, "She is taking chaulmoogra oil from Oct. 1877; she says she is stronger than before; the disease is stopped in future"; but in the corner of the page is to be seen the ominous word, "Died", no doubt subsequently written. As an etiological factor, the reporter seems to attach some importance to the existence of syphilitic taint, for he has evidently inquired into the matter in nearly every case. Of one case (No. 71) he writes, "There is history of syphilis in his family and in him, which easily describe the cause of the disease." He could find evidence of syphilis only in four others.

In one case (43), "the disease has subsided since twenty years"; and in three others it is said to have stopped its course. In some eight cases it is stated that only the extremities are or have been affected. (I mention this because, in the case of a patient shown at this Society last May, some doubt was expressed as to whether he was really a leper, partly, I believe, on the ground that it was supposed that there were no very obvious symptoms of the disease on other parts of the man's body besides the extremities.)

Although it cannot be said that we learn very much that is novel with regard to leprosy from these notes, the facts detailed should be useful in corroborating, or otherwise, the information obtained by observers in other parts of India and elsewhere. I should have liked, indeed, on this occasion, to contrast, in a comprehensive way, these details with the similar data of the various other asylums of India, but unfortunately the reports available are so few and incomplete (with one or two exceptions, notably the excellent account of the Almora Asylum by Drs. Lewis and Cunningham in 1876), and compiled so many years ago (chiefly 1874-77), that not many general conclusions of value up to date could be arrived at. There can be no doubt that our knowledge of the disease would be greatly enhanced if full and systematic reports of every asylum were annually, or at definite intervals, published on a uniform plan. The present lack of reliable data well illustrates the need of a thorough and systematic investigation, such as is likely to be shortly set in motion through the initiation and support of the Damien Committee and of the Colleges.

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Case No.	Name.	Sex.	Caste.	Age.	Variety of Disease,	Duration of Disease,	Relations Affected.
1 2	Gaza Ohdo	m. m.	Hindoo jat Brahmin	32 30	Mixed Do,	10 years 5 ,,	None
3	Ram Tall	m.	Ditto	30	Anæsthetic,	10 ,,	Father
4 5 6 7 8	Bannan Sardanis Chhaboo Mihal Das Boola	m. m. m. m.	Ditto Hindoo Ditto Chamar Mussulman	18 47 22 55 25	? mixed Anæsthetic Do. Do. Do. Mixed	7 " 3 " 7 " 7 "	Mother and an uncle None Father and 3 brothers None None
9	Natho	m.	Ditto	25	Do.	10 ,,	Mother
10	Shadee	m.	Sweeper	35	Anæsthetic	12 ,,	Maternal relatives
11	Jamala	m.	Hindoo	30	Do.	6 ,,	Father
12	Makhan	m.	Mussulman	50	Do.	12 ,,	None
13 14	Bolund Shah Khewan	m, m.	Ditto Ditto	50 25	Mixed Tuberc	P 20 ,, 5 ,,	None None
15	Gurdetta	m.	Chamar	3()	Anæsthetic	? 5 ,,	Maternal uncle
15a	Bariptoo	m.	Jheur	25	Do.	7 ,,	None
16	Bhairon	m.	Kohle	50	Do.	20 ,,	None
17	Sodaga	m.	Brahmin	50	Do.	20 ,,	None
18	Hera	m.	Hindoo	60	Do.	7 ,,	None
19	Jawala Singh	m.	Jat	35	Do.	15 ,,	None
20	Jaute	f.	Mussulman	60	Do.	50 ,,	None
21	Hari Singh	m.	Jat	60	Do.	20 ,,	None
22 23	Nabya Dani	m. f.	Rajpoot Mussulman	50 80	Do. Tuberc	25 ,, 55 ,,	None Husband was affec- ted; none of other relations
24	Gansee	f.	Ditto	60	Anæsthetic	30 ,,	None ; 6 children were affected
25	Nathoo	m.	Jat	50	Do.	30 ,,	None
26	Ghasita	m,	Chamar	40	Do.	28 "	Mother

No. of Children.	How Commenced.	Fish Diet	REMARKS.
Not mar,	Bullæ on legs and arms	Never	
Not mar	Whitish patches on body and extremities	Never	
Not mar	Whitish patch on thigh	Never	History of Syphilis.
None		Never	
2 (youngest 12)	Whitish patches on body	?	
None	Numb spots on thigh Ditto	9	
Not mar	Whitish spots on body,	?	
Mar. ? noue	etc. Whitish spots on back	Sometimes	
1 son (died at 1 year)	and buttock Blisters on fingers and	Seldom	
None	feet Anæsth, of leg		healthy; only hands and feet
Was man . I shild died at	Numb patches on thigh Queer sensation of heat		affected. Wife free from dis-
Was mar. ; 1 child died at 2 years	and had anæsthesic	r	ease.
2 sons, 20 years	patches on body Weakness in limbs and	Sometimes	Had syphilis
1 son and 1 daughter (born when he was	afterwards redness and swollen face		-and of Paris.
healthy)			~
Was married and had 3 children	Numbness of right foot	Sometimes	ago; only hands
Not man	Whitish spots on body	Samatimas	and feet affected.
Not mar	Wintish spots on body	Sometimes	from chaulmoo- gra oil.
Not mar	Anæsth. of right hand	Sometimes	Extremities only af-
Mar. a leper (? no children)		Sometimes	fected, and eyes, and some teeth
Was mar.; 4 children	A fissure at root of right	Rarely	dropped out (as- cribes it to taking milk and fish to-
Mar. twice; had children,	Whitish erupt. on left	Sometimes	gether).
but died Not mar	The state of the s	?	No ulceration or
Was mar.; no children	over body Reddisherupt.over body	Never	loss of sight; praises oil of Tara
Mar. a leper; no children	and swelling of face Whitish patch on back	Never	meera.
2 daughters before she	Tubercles on chest	Seldom	There is now anæs-
was affected; one was leprous			thesia of extre- mities.
6 children born before she was affected, healthy	Pricking on thumb	1000	Was told she was bitten by a snake.
Not mar	Blisters in joints of fingers	?	Has tried chaul- moogra and gur-
2 danshtana and 1 ann al	Pad amort on book on l	9	jun.
2 daughters and 1 son who is becoming leprous	Red erupt. on back, and blisters in joints	ř	Has children by a leger woman born
and the state of t			in the Asylum.

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Case No.	Name,	Sex.	Caste.	Age.	Variety of Disease,	Duration of Disease.	Relations Affected.
27	Bhagan	 f.	Mussulman	60	Anæsthetic	20 years	None
28	Rabdi	 f.	Hindoo	40	Do.	33 ,,	?
29	Bhagan	 f.	Mussulman	60	Do,	35 ,,	None
30	Sultani	 m.	Jat	40	Do.	14 ,,	One half-brother
31	Rulya	 m.	Musician (beggar)	25	Do.	20 ,,	Father and mother, both died in Asylum
32	Sundari	 f.	Chamar	40	Do.	28 ,,	Father and a cousin
33	Panon	 f.	Jat	30	Do.	12 ,,	2 brothers
34	Gayanon	 f.	Chamar	60	Do.	25 "	None
35	Jeemee	 f.	Sweeper	60	Anæsthetic	After birth of the	None
36	Maula	 m.	Mussulman	50	Do.	children ?	None
37	Rajee	 f.	Do. potter	25	Do.	18 years	None
38	Budhee	 f.	Do. Teli	25	No symp- tom of the disease	Has been in the Asylum since 12	Both parents died of the disease
39	Sulheta	 m.	Hindoo	50	Anæsthetic	years old 17 years	None
40	Chetoo	 m.	Mussulman, water-	65	Do.	40 ,,	None
41	Amira	 m.	bearer Hindoo Sien	55	Do.	25 ,,	2 younger brothers
42	Gangee	 f.	Bahte	60	Mixed	16 ,,	None
43	Tachmer	 f.	Sweeper	60	Anæsthetic	From childhood	Father and 1 brother
44	Rajan	 f.	Mussulman	50	Do.	18 years	Paternal uncle
45 46	Varyam Mam Din	 m. m.	Do. potter Mussulman	60 30	Do. Do.	12 ,, 10 ,,	Father Maternal relation

No. of Children.	How Commenced.	Fish Diet,	REMARKS.
9 children born before and 2 after she became leprous; none affected 4 children, 2 lepers; three of them with symptoms Mar. before she was affec- ted; 3 children, Mar.	Atrophy of little finger  Erupt. on body and blisters on fingers, etc.  Pain in right side of chest.	?	After entering Asy- lum, married a leper
a leper in Asylum; no children 2 sons and 1 daughter be- fore he was affected	Whitish erupt. on thigh	Sometimes	Has tried chaul- moogra and gur- jun.
2 children, 1 a leper; 1 died 4 children, 3 lepers; 1 died	Erupt. on body Ditto		Has tried chaul- moogra and gur- jun.
Mar. to a leper for 10 yrs.; no children 8 children before she was affected, and 1 shortly after she married a	Blisters on body  Face red and swollen and blisters on joints	?	
leper; no issue  9 children before disease appeared. Mar. in Asy- lum 2 lepers; no child- ren	Burning sensation of body and whitish erupt.	?	
Mar. 3 lepers, by one 3 children; 1 died 2 children by a leper; 1	Erupt. on body Ditto	? Sometimes	
died Mar. a leper and has 3 children		?	
Was mar.; 1 son and a daughter 3 years old; both healthy. Mar. a leper; have no children	Swelling and redness of whole body	Sometimes	
Mar. 2 or 3 lepers; have no children	Anæsth, of left hand and foot		Thinks himself a born leper be- cause fingers of
Was mar.; 3 children and full grown and healthy Was mar.; 2 children, 1 girl now 10 years, born after she was affected, and now with incipient leprosy	Whitish patch on fore- arm Blister on ankle	?	left hand are con- tracted on palm at birth.
Mar.; no children  Was mar.; 5 children before she was affected.  Mar. a leper; no children	then vesicle in joints	Sometimes	Father was buried alive "on account of the suffering". The disease has subsided since 20 years.
Mar. 5 lepers; no children		Never Sometimes	

			11				
Case No.	Name.	Sex.	Caste.	Age.	Varlety of Disease,	Duration of Disease.	Relations Affected.
47	Bahadur	m,	Sweeper	60	Anæsthetic,	15 years	None
48	Chanda Singh	m.	Jat	50	? mixed Anæsthetic, ? mixed	30 "	None
49	Geewa	m.	Mussulman	50	Anæsthetic	17 ,,	Maternal grandmo-
50	Mohamada	m.	Ditto	35	Do.	10 ,,	ther None
51	Jamita	m.	Ditto	60	Do.	18 "	None
52	Mangtoo	m.	Hindoo	50	Do.	12 "	None
53	Jawahar	m.	Chamar	50	Do.	18 ,,	None
54	Choohar	m,	Ditto	50	Do.	18 "	An uncle's wife
55	Kesi .	f.	Ditto	60	Do.	50 ,,	None
56	Jewani	f.	Mussulman	40	Do.	28 ,,	The husband's family
57	Manon	f.	Sweeper	30	Tuberc	9 "	2 uncles
58	Ilahi Bakhish	m.	Mussulm. jat	20	Do.	14 ,,	Father, uncle, and
59	Bahto	f.	Brahmin	50	Anæsthetic	25 "	step-uncle Mother - in - law's family
60	Pargash	m.	Hindoo	40	Do.	30 ,,	None
61	Jewan	m.	Mussulman	60	Do.	16 ,,	A brother
62	Bira	m.	Ditto	60	Do.	12 ,,	None
63	Budhuo	m.	Ditto	55	? mixed Anæsthetic	21 "	Maternal uncle's son
64	Dauli	f.	Dítto	35	Do.	20 ,,	None
65	Manon	f.	Ditto	35	Anæsthetic	20 ,,	An uncle
66	Punnoon	m.	Ditto	50	Do.	16 ,,	None
	1						

-		1	
No. of Children.	How Commenced.	Fish Diet.	REMARKS.
Was mar.; 4 children	Red and swollen hands	Sometimes	
Mar. a leper; no children	Front of knee	Never	
2 children by a leper; 1	Whitish patch on joints. After "anæmia"	Sometimes	
Was mar,; no children Mar, a leper; no child- ren		Sometimes	Only extremities affected; rest of body healthy. "The disease is stopped."
Was mar., and had 4 children	Anæsth, patches on breast and thigh	Sometimes	The disease has stopped its course.
Was mar.; 5 children	Blister on ankle	Sometimes	"No eruption of any kind on the
Was mar.; 6 children. Mar. 2 lepers; no child- ren	Blister on elbow	Sometimes	body."
Was mar.; 3 children. Mar. a leper; 1 daughter with incipient symptoms	Blister on joints	Sometimes	"No sort of erup- tion on any part of the body" (but general anæsthe- sia).
Mar. a leper; no children	Blisters on legs and feet	Sometimes	
Was mar.; 2 children, 1 died. Mar. 2 lepers; now pregnant	Whitish erupt, on fore- arm	Sometimes	. Accordi.
Was mar.; 1 son born be- fore disease commenced, but suckled aferwards	7 1		Derives benefit from "Mundi Booti".
Not mar	Blisters on hands and feet		
None	Burning heat—head, hands, and feet	None	"Did not marry with any leper, though she was excited by lepers to marry. No eruption on any
Was mar.; none	Whitish erupt. on leg	Sometimes	part of the body." Treated with gur- jun oil without benefit.
Was mar.; none, and mar. a leper; no issue	Blisters on fingers and feet	Sometimes	
	Blisters and swelling after snake bite	Never	
Was mar.; 2 children. Mar. again at Asylum; no issue		Sometimes	
	Whitish erupt, of body	Sometimes	
Mar. a leper; no issue	Whitish erupt, on body	Never	
Mar. a leper; 2 sons	Whitish erupt, on ankle after a chill	Sometimes	

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Case No.	Name.	Sex.	Caste,	Age.	Variety of Disease,	Duration of Disease.	Relations Affected.
65a	Dittesha	m.	Mussulman	70	Anæsthetic ? mixed	55 years	None
66a	Bhagan	f.	Ditto	45	Anæsthetic	18 ,,	Father, a sister
67	Walate	f.	Ditto	60	Do.	10 ,,	None
68	Rehmal	m.	Ditto	45?	Do.	30 ,, (at12 yrs.)	None
69	Karem hibi	f.	Ditto	45	Do.	? since youth	None
70 71	Gokal Jassa	m. m.	Hindoo Brahmin	50 40	Do. Do. ? mixed	10 years 10 ,,	None None
72	Dana	m.	Hindoo	50	Anæsthetic	10 ,,	None
73	Ushnag	m.	Ditto	32	Do.	18 "	None
74	Baldeo	m.	Ditto	50	? mixed Anæsthetic	1 "	A maternal uncle
75	Ganga Ram	m.	Brahmin	50	Do.	18 -,,	In distant relatives
76	Dayala	m.	Hindoo	50	Tuberc., ? mixed	27 ,,	Father and 1 brother
77 78	Reora	m.	Sweeper	30	Anæsthetic	3 ,,	None
79 80	Kahan Singh	m. m.	Hindoo Brahmin	60 50	Tuberc. Anæsthetic	5 ,, 10 ,,	None
81 82	Jeeta	 m,	Sweeper	 40	Mixed	10 ,,	None
83	Jhandno	m.	Chamar	25	? incipient	2 ,,	Paternal uncle
84	Rukko	f.	Sweeper	20	Incipient	P	Mother and 2 brothers
85	Shamas Din	m.	Mussulman	45	Tuberc	10 ,,	None
86	Sharif Khan	m.	Ditto	60	Mixed	?	None
87	Umra	m.	Ditto	25	Tuberc., ? mixed	12 ,,	None

No. of Children.	How Commenced,	Fish Diet.	REMARKS.
Was mar.; 1 daughter, and mar. a leper; no	Anæsth. patches	Sometimes	
Was mar.; 3 children, and	Whitish patches	Never	
mar, a leper; 2 sons Was mar.; 6 children.	Reddish patches on but-	Never	
Mar. a leper; no issue Mar. a leper who had a child	tock Whitish erupt. on body	Very often	
Was mar.; 3 children, youngest 14 years old with incipient leprosy	Ditto	Sometimes	
Was mar.; 3 children Was mar.; 1 daughter	Ditto	Never	44 m
Was mar.; no children	"Œdema" of left leg Sensation of heat in the body		of syphilis in his family and in him which easily des cribe the cause o
Was mar.; 1 daughter died		?	the disease." Syphilis in the
	pimples over body Hands became weak and anæsth. grad. to elbows and knees	Sometimes	family.
Was mar.; 3 children	A pointed stone pricked his buttock, causing ulcer, healing after 4 years with anæsth. surface		Ulcers only on ex- tremities. "No history of whitish erupt. on body."
•••	Anæsth, patch on knee	Never	
Was mar.; 2 sons, youngest 6 years.	Whitish erupt. on body	?	This is a pure case of syphilis.
Was mar.; 3 sons	Red erupt, on body Loss of sensation in leg after fracture of pa- tella	Never Never	Takes chaulmoogra (produces nausea) and gurjun.
Was mar.; no children	Whitish erupt, on body	?	No symptoms of leprosy, but thinks himself a
Was mar.; no children	Gen. weakness. Swell- ing and redness of	?	leper. No marked symptoms of leprosy;
Mar. a leper; no children	patch on buttocks and	?	chiefly suffers from weakness of extremities.
Vas mar.; 2 children	thighs Whitish patches on arms and hands	?*	Diedfrom dysentery after three years
Was mar.; 4 children	Attack of fever followed by insensibility of hands and feet	"In ex-	in Asylum. Chaulmoogra and gurjun without relief.
far.; 2 children		Never	Chaulmoogra and gurjun without

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Case No.	Name.	Sex.	Caste.	Age.	Variety of Disease.	Duration of Disease.	Relations Affected.
88	Tahee	f.	Mussulman	50	Anæsthetic,	10 years	In father - in - law's
89	Sin Dhor	m.	Hindoo	35	? mixed Tuberc., ? mixed	15 ,,	family 1 cousin
90	Imam Din	m.	Mussulman	35	Anæsthetic	3 ,,	None
91	Budh Das	m.	Hindoo	25	Tuberc	5 ,,	None
92	Bhumba I	m.	Mussulman	80	Anæsthetic	6 ,,	None
93	Bhumba II	m.	Ditto	30	Tuberc.	7 ,,	None
94 95	Nanakoo Chumbo	m. f.	Hindoo Ditto	35 40	Anæsthetic Do. ? mixed	14 ,, 22 ,,	None An elder sister
96	Tara Singh	m.	Ditto	60	Anæsthetic	10 ,,	None
97	Rali	f.	Ditto	30	Muscular, ? tuberc.	Since very young	Father and 5 uncles
98	Ramee	f.	Ditto	35	? mixed	15 years	None
99	Dayan	f.	Ditto	45	Anæsthetic	12 "	None
100	Tikho	m.	Ditto	45	Do.	15 ,,	In mother's relations
101	Jawalee	f.	Ditto	40	? mixed	15 ,,	Husband's uncle and aunt
102	Matte	f.	Ditto	60	Anæsthetic	35 ,,	A son first affected; no other relation
103	Bahto	f.	Ditto	60	Tuberc	10 ,,	A member of the same caste, but not close- ly related, and a son
104 105	Bhagan Bisnandai	f. f.	Ditto Brahmin	60 50	Anæsthetic Do.	20 ,, 17 ,,	Mother None
106	Budhoo	m.	Hindoo	80	? mixed	? 45 ,,	None
107	Amseree	f.	Mussulman	40	Anæsthetic	12 ,,	Father, 2 sisters, and 1 brother
108	Mannan	f.	?	60	Do.	30 ,,	Both parents, 3 bro- thers, 1 sister, 1 son, uncles, etc.
109	Mamoon	m.	Mussulman	40	Do.	8 "	None

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No. of Children,	How Commenced,	Fish Diet.	REMARKS.
Was mar.; 6 children	Whitish erupt. after	2*	
Was mar.; 1 son 7 years old	Fissures on soles of feet, epistaxis, and patch		
Was mar.; 2 children, died	on forearm Patches on back	?	Chaulmoogra and
	Whitish erupt. on body	?*	gurjun; no effect. Chaulmoogra and gurjun; no effect. Died of phthisis.
Was mar.; 3 sons	Numbness of hands	Sometimes	
Was mar.; had children, all died	Pricking sensation over body	None	The state of the s
Was mar.; 2 daughters Was mar.; no children. Mar. a leper; no child- ren	Blister on little finger Whitish erupt. on thigh	Sometimes Rarely	Died from phthisis.
Was mar.; 6 children	Reddish erupt, on body, and subsequently bullæ	Never	
Was mar.; and with a leper		Never	
Was mar.; 1 son of 15	Reddish erupt	Never	"She is taking chaulmoogra oil from Oct. 1887.
Was mar.; 4 children grown up, and mar. a leper	Weakness of hands	Never	She says she is stronger than be- fore; the disease is stopped in fu- ture. Died."
	Whitish erupt. in abdomen	?*	Vegetable diet and milk.
	Pimples on nose, and red erupt. on forehead	Sometimes	-
Was mar.; 1 son	Whitish erupt. on shoul- der	Sometimes	
Was mar.; 11 children	Redness and swelling of face	Rarely	Husband had syphilis. Her third son first became affected; she lived with him, and was diseased 2 years after his death.
Was mar.; 2 children Was mar.; 2 sons	Whitish erupt. on body Swelling of hands and feet	? Sometimes	Her mother æt. 80, still in Asylum.
Was mar.; 4 children	Œdema of whole body Whitish erupt. on arms and legs	Sometimes Sometimes	"The disease has abated in him."
Was mar.; 2 daughters, 1 living, 1 son died of leprosy	Whitish erupt. on forearm	Never	Lived in the Asylum 25 years.
	Whitish erupt. on ankle	Sometimes	Only extremities affected.

Case No.	Name.	Sex.	Caste,	Age	Variety of Disease,	Duration of Disease,	Relations Affected.
110	Bihee	 f.	Mussulman	70	Anæsthetic	3 years	6 maternal relations, husband, and son
111 112 113	Chundee Karmbhari Mohamad Bakhsh	 f. f. m,	Sweeper Mussulman Ditto	25? 40 40	Do. Do. ? mixed	10 ,, 20 ,, 30 ,,	No history 2 brothers None
114 115	Mihra Bibo	 m. f.	Ditto Ditto	40 60	Mixed ? mixed	20 ,, 12 ,,	Father None
116	Kariman	 f.	Ditto	60	Tuberc	20 ,,	None
117	Bannon	 f.	Ditto	45	Mixed	12 ,,	A brother and a son
118							

No. of Children.	How Commenced.	Fish Diet.	REMARKS.
Was mar.; 1 son now a leper. Her husband 5 years ago died of leprosy, son then af- fected		Sometimes	
Mar. a leper; no children Mar. 2 lepers Mar. a leper	Ditto	Sometimes	
Was mar.; 3 children, all	on joints Whitish patch on thigh Fever and red swollen	Sometimes	His father bitter by a snake.
healthy. Mar. a leper; no children Was mar.; no children. Mar. 2 lepers	Red elevated erupt, over body	Never	
Was mar.; 1 son, died young. Mar. a leper; 1 son 12, 1 daughter 5 years old		Never	

### ON THE ARREST AND CURE OF LEPROSY BY THE EXTERNAL AND INTERNAL USE OF THE GURJUN AND CHAULMOOGRA OILS.

BY THE HON. J. C. PHILLIPPO, M.D., OF JAMAICA.

WITH INTRODUCTORY REMARKS, AND ABSTRACT OF PATIENT'S ACCOUNT,

By P. S. ABRAHAM, M.A., M.D., B.Sc., F.R.C.S.I.

(Read: January 8th, 1890).

Dr. Phillippo has requested me to bring this case under the notice of the Epidemiological Society. It is hardly necessary for me to allude to that gentleman's high position as one of the chief medical practitioners in the West Indies, and to his extensive experience of the endemic diseases of that part of the world; but I may mention that so long ago as 1873 he was quoted by Dr. Gavin Milroy\* as an authority on this very disease. His observations, therefore, must be regarded as of especial value, and his conclusions received with attentive consideration by all who are interested in the subject of leprosy.

In a private letter to me, Dr. Phillippo calls the case "a unique one—for it is written by the patient himself"; and I think it will be admitted that a more graphic and well-written account, both as regards expression and calligraphy, has seldom been penned by a non-medical convalescent, and never before by one who is a cured leper. As the notes are rather

detailed, I append an abstract.

The young man's father was an Englishman, long resident in Jamaica, whom I happen to have known, as well as several other members of the family, on the paternal side, both in England and in Jamaica. They are all healthy people, and, as far as one can on such a point, I can testify to their freedom from any trace of the disease. The mother, a creole, is, according to Dr. Phillippo, "a very fair woman, whose mother, grandmother, and other relations" he knows, "and there has never been any disease of the kind in them." It will be difficult, therefore, for those who believe in the heredity of leprosy to assign family taint as the cause in this instance.

The appearances in the case were evidently typical of the

<sup>\*</sup> Report on Leprosy in the West Indies.

"nodular dermal" or "hypertrophic" form of the disease; and one point of interest to me is the apparent connection between the initial traumatic lesion and the onset of the symptoms. In looking over reports of cases occurring in various parts of the world, we find several instances in which accidental wounds of the skin are described as refusing to heal, ulcerating, etc., and in a shorter or longer

time the signs of leprosy becoming manifest.

With regard to the treatment, one is struck by the thoroughness and perseverance with which it was carried out. As the patient remarks, for some five and a half years he practically lived "in grease". How many lepers are there who have so pertinaciously continued to use such irksome remedial measures, and how many of their physicians and friends would not have given up hope in a year or two at the utmost? Dr. Phillippo's remarks on the difficulty of following up a treatment of this kind in private practice deserve attention; as a rule, it must be only in properly appointed special hospitals and asylums that the necessary conditions can possibly obtain. lengthened disquisition on the treatment of leprosy would hardly be in place in this Society; but I may be allowed to observe that there is reason to think, on perusing the conflicting accounts, that many of the reported failures with the gurjun and chaulmoogra oils may be due to their improper and insufficient use, both as regards time and quantity.

Dr. Phillippo writes as follows:—

"Leprosy has been so much and so thoroughly discussed of late that there remains little to be said on the subject, and my only excuse for prolonging the discussion lies in the fact that I have something to say as to its arrest and cure. Before doing so, however, I must state, as one who has had considerable practical acquaintance with the disease, that I am thoroughly opposed to the fish-diet theory. I know numbers of people who have eaten fish almost daily for many years who have shown no symptoms of this disease. The peasantry of this country are, as a rule, practically vegetarians, their principal animal food, but in very sparing quantity, being salted mackerel, shad, and cod, imported from Halifax, which sometimes reaches them in a state of decay, and yet leprosy in proportion to number is much less common amongst them than among other classes who are in a better position in life, and able to afford a more mixed and generous diet.

"Moreover, this disease generally makes its first appearance amongst adolescents, who have not gone through so long a period of fish eating as others who show no symptom of the disease.

"It is true that more leprosy is to be seen in this as in most other countries on the sea-coast, but this is, I think, largely due to the fact that the poorer class of sufferers flock to the cities and towns, which are generally there situated, for the sake of the charity to be obtained in these larger centres of

population.

"That it is both hereditary and contagious I firmly believe. but it never affects a whole family, and will sometimes skip a whole generation. The contagion is by no means active, for the healthy members may be in daily intercourse with the diseased, without contracting it; only occasionally does it happen that one or more take it, and these may, perhaps, have less to do with the diseased member than the others. I know of a family in which two sons had the disease and died of it, and another had incipient symptoms arrested by gurjun oil; the other members in daily attendance had shown no symptoms, whilst the wife of one who belongs to a perfectly healthy family, and who only occasionally came in contact with them, has now ulnar nerve paralysis, with shrinking of the interessei and anæsthetic patches. and other instances of a similar kind lead me to believe that there must be some constitutional predisposition—I should say of a strumous character. This view I took years ago in my replies to Gavin Milroy's questions on the subject, mentioning the case of an English family resident here of a strumous constitution, in which an uncle developed the disease, and died years before his niece, who was not born at the time, also developed it.

"The treatment of the disease is, however, my subject on this occasion, and I shall now proceed with a short account,

which will, I hope, be of interest.

"Gurjun oil was first brought to my notice some twenty years ago in a paper published in the Edinburgh Medical Journal, by the surgeon in charge of the penal establishment in the Andaman Islands. At that very time a case came under my observation of a lad who belonged to a family with considerable hereditary history of the disease. The initial sympton was a deep punched-out ulcer at the bottom of one foot, looking like a perforating ulcer, and insensible to pain—a very common commencement of tubercular leprosy. Not being able to get any gurjun oil in England, I sent to Singapore for some, and made use of it, but with very small success, as I left the district shortly after, and could not follow up the treatment.

"In private practice it is difficult to follow up a treatment of this kind. The patients are generally young, careless, and insensible of the terrible malady under which they suffer. The relatives are afraid to make use of direct applications themselves, servants and nurses soon grow weary of a long-continued and apparently useless treatment, and all are ready to give it up for any new remedy or nostrum suggested by sympathising friends.

"Still, in this case, as in some dozen or more others which came under my observation during the last fifteen years, it did good. Ulcers were almost invariably and rapidly cured by its application, and I have been frequently applied to for it on that account. Indeed, I almost look on it as a proof of the correctness of the diagnosis in an early case, though

I daresay it may be useful for other ulcers.

"After using the gurjun on these cases under these circumstances I began to despair of ever doing any good, or, rather, seeing any cure as a result, when the following case came under my notice. On taking charge of him I told him that I would only do so on condition that he would under all circumstances stick to my prescription, and take no other advice—that the remedy had been used with good effect, and that he must resist all importunities to change it. This he religiously did, heroically aided by his mother, with the result recorded by himself. He is restored to health, and the mother not only has the gratification of seeing and aiding in this, but has doubtless been saved from taking the disease by the constant use that she made of the remedy.

"As I said before, I was so dispirited with former failures that I took no notes, but this case presents several points

of interest, in addition to its successful termination.

"I. The long period that elapsed from the first appearance of the sores, and the constitutional effects. When I first, and casually, saw him, in 1874, he was under no treatment, and I recommended the amputation of the toe, which led to his father placing him under the care of his medical adviser. Had it been amputated then, years of suffering might have perhaps been spared him.

"II. The sudden change after the administration of chaulmoogra. Too sudden for that medicine to have had any effect—yet how likely to have secured for it all the credit.

"III. The complete immunity of the mother, who lived, ate, and drank with him, and dressed his sores day after day, and washed his clothing."

The following abstract of the case is compiled from the patient's own notes and observations.

In the early part of 1872, while bathing in the sea, the great toe of the left foot was injured. The cut remained open, and was treated with some lotion which a school-mate had been using for a bruise. It did not heal for two or three months, during which a boot could not be worn. About six months afterwards the same toe became swollen and black, and the cut reopened. Poultices and lotions were applied, and ultimately the toe got better, but minus the nail. The cut, however, continued to give trouble-opening about once every six months, but always yielding to treat-Sometime in 1874 it was noticed that there was a scaly appearance round the ankle, and the cut which had opened again was very stubborn. In January 1875, it reopened, and the scaly band round the ankle was then broader. Cashew-nut oil was applied with benefit. Towards the end of 1875 it again reopened; and subsequently generally remained so. In 1876, it was noticed that the hands were not the natural size, and the hairs on the left leg seemed to be withering. Towards the end of 1877 the left ear appeared a little enlarged, and the scaly band around the ankle seemed to be slowly creeping up the leg. In February 1878 the general health had become so bad, that change and rest for a month in the mountains was advised; but no good resulted. The day after the ride home, the face appeared puffed and spotted. From this time, the toe would not yield to treatment, the general health became worse, and fever began to add to the patient's troubles, and he became unable to walk. At this time, early in 1879, the great toe, on which the ulceration had much increased, was so enlarged that it spread over the second toe, upon which there was also an ulcer, with the loss of the nail. The left foot had swollen to a very large size, and it had lost all feeling. The right foot was also a little swollen, the hands very much so, and on two or three of the fingers were small ulcers: one nail was already gone. The ears were much enlarged, particularly the left one; the nose and lips were swollen, and on the nose and upperlip were pimples, which would not discharge, but remained hard. The forehead was swollen, and the face altogether much disfigured. Spots, too, began to appear on several parts of the body. He moved about with great difficulty on account of the size of the left foot, and he had become very nervous. In September 1879, Dr. Phillippo took the case in hand, and prescribed gurjun oil. This was to be rubbed in (prepared with lime-water) over every part of the bodyhands, face, etc.—twice a day, bathing before each application. The washing off was done with sapolio. The rubbing was effected by the patient himself, that he might get the benefit of the exercise. The oil was also applied as an ointment to all swellings and ulcers; and when renewing it, cashew-nut oil was first applied and allowed to dry in. A tablespoonful of the gurjun oil, prepared with a smaller proportion of limewater, was taken internally morning and evening. For an hour or two after rubbing in the oil the feeling was uncomfortable, and there was a pricking, warm sensation all over the body. In consequence of the difficulty of obtaining the oil at first, and of the frequent attacks of fever, sometimes lasting several weeks, it was impossible to rub it in continuously. It was, however, always used as an ointment. From 1880 the fever was accompanied by outbursts of bumps and eruptions on the fingers, toes, legs, and even face, and these would discharge plentifully, like the older enlargements, which became gradually smaller, and disappeared. The worst time was the latter part of 1880 until late in 1881. He was then very weak and nervous, and could not use the legs, or even stand upon them. To go from one room to another he had to sit on the floor and proceed with the help of hands and arms. He sometimes had pains in the knees. Attacks of fever and eruption were frequent. The nails were all gone, some of them leaving minute bits: the hairs on legs, arms, etc., and on the eyebrows were gone. In 1881, chaulmoogra oil was substituted for the gurjun internally, but the rubbings with the latter were continued. Improvement was first seen in the face; the lips, ears, and nose gradually becoming natural before the end of 1881. spots about the body also began to disappear, and the hands were getting better: the left foot, and especially the great toe, was the last to yield. The outbursts continued even after the old enlargements had disappeared, but were less severe each time, until they ceased. From 1882 the gurjun oil was rubbed in only once a day. The treatment was kept up, with some intermissions, until January 1886, when, at last, he "ceased to live in grease". He was at that time cured, all symptoms having disappeared, and having regained the use of his limbs, and discarded the crutches, with which he had been able to get about since 1884. upwards of five years he has now been quite free from any return of the old troubles: his strength has steadily increased, and general health improved; and although there are marks left of the old disease, the nails and hairs have been coming back; even the eyebrows have been slowly growing.

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