

LEPROSY—INTERESTING HISTORICAL SKETCH—HEREDITARY OR INFECTIOUS—ITS DANGERS.

THE recent death of Father Damien and the action of the Prince of Wales has turned public attention to leprosy. The following brief extracts are chiefly from a reliable address given before the New York Academy of Medicine, June 6, 1889, in connection with the exhibition of fifty lantern slides of typical forms of leprosy, by Prince A. Morrow, A. M., M. D., from personal observations in Mexico and the Sandwich Islands, as published in the New York Medical Journal of July 27th.

By the great majority of the profession, Dr. Morrow said, leprosy is looked upon as possessing at the present day only a historical interest. It is classed in the same category as the pestilences and plagues which formerly swept away entire populations and devastated countries, but which are now practically extinct. Unfortunately, leprosy cannot be relegated to the past: it is still a living, actual reality, and to-day prevails over more than one fourth of the habitable surface of the globe. While it affects principally maritime populations, inland countries are by no means exempt; it prevails in both marshy and mountainous regions, in the lowlands of Louisiana as well as in the elevated tablelands of Mexico.....

It would not be possible to give an accurate compilation of the number of lepers upon the face of the earth at the present day. In India it has been estimated that there are over two hundred and fifty thousand; In China, Japan, Africa and Egypt there are large numbers. In Europe the most important centre of the disease in the present century is in Norway and Sweden.....

The spread of leprosy throughout a great portion of Europe early in our present era may be traced along the routes of the Roman armies, and its general diffusion throughout Christendom in the eleventh, twelfth, and thirteenth centuries was materially influenced by the return of the Crusaders. In the western hemisphere leprosy was first introduced into Central and South America by Portuguese traders, in Mexico probably by the Spanish, and in Canada by the French *émigrés*. It per-

sists in New Brunswick at the present day, the most important centre being at Tracadie.

In our own country the introduction of leprosy may be traced to at least four separate and distinct sources. In Louisiana it was carried by the Arcadians, in the north-western states of Iowa, Illinois, Wisconsin and Minnesota by the Scandinavian colonists, along the Pacific coast in California and Oregon by the Chinese, and along the southern Atlantic coast it was brought from the West Indies. In Salt Lake City the disease was imported by a colony of Kanaka women brought by the Mormons from the Sandwich Islands. My own observation of leprosy during the past winter began at New Orleans, where, it will be remembered, Dr. Blanc has recently reported the existence of forty-two cases.

Leprosy is a parasitic disease; the bacillus of leprosy has a definite form, a slow rate of development, and is endowed with an extraordinary vital resistance, presenting many analogies with the bacillus of tuberculosis. Like all specific microbes, it has an elective affinity or predilection for certain tissues and fluids of the organism. The bacilli occur in all forms and stages of leprosy; they are found in the skin and mucous membranes, in the connective tissue of the peripheral nerves, in the cornea, cartilages, liver and spleen, lymphatic glands and spaces. They are absent from the blood and the physiological secretions, such as the tears, saliva, milk, urine, &c. It is worthy of note, however, that when the nasal, pharyngeal and intestinal mucous membranes are the seat of leprosy lesions the secretions from these surfaces swarm with bacilli.

Leprosy has an exclusive origin; it is invariably derived from the lesions or secretions of a person similarly diseased; it never originates spontaneously, nor does its virulent principle attach to the soil, the water, or the food. Its origin and spread can always be traced to human contact. It is not inoculable to the lower animals, as is abundantly proved by the negative results of numerous experiments. The question of its inoculability to man has