

Leprosy Archives
The Maltese Islands



Compiled by
C. Savona-Ventura

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The Grand Priory of the Maltese Islands
The Military and Hospitaller Order of Saint Lazarus of Jerusalem
Malta

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Coverpage illustration: Medieval view of leper with physician,
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Hansen's Disease in Malta

A Historical view

The Sunday Times (Malta), 29th January 1995, p.32-33

The 29th January is designated World Leprosy Day. Leprosy or Hansen's Disease is a chronic, infectious disease of human beings that primarily affects the skin, mucous membranes, and nerves. The disease is caused by a rod-shaped bacillus, *Mycobacterium leprae*, which is similar to the bacillus that causes tuberculosis. The leprosy bacillus was identified in 1874 by the Norwegian physician Gerhard Henrik Armauer Hansen.

In both the Old and New Testaments the name leprosy is given to a number of physical conditions which were often unrelated to leprosy. These conditions were considered a punishment from God for sin. The victim was said to be in a state of *tsara'ath*, or defilement. This Hebrew term was later translated as *lepros*, from which came the word leprosy. The Old Testament gives detailed instructions in the Leviticus (13:1-23) regarding the recognition of an infectious skin lesion and a non-infectious lesion.

The disease spread from its probable area of origin in the Indus Valley in India to the Mediterranean and North African regions; all of Europe was eventually affected. The disease is much less common now. It is estimated that less than 5 percent of the world population is susceptible. The disease is found more frequently in countries where nutrition is poor. Approximately 5500 known cases of leprosy exist in the United States, and nearly 200 new cases are reported annually. In the western hemisphere, about 336,000 cases are registered; worldwide figures indicate about 5.25 million registered cases and about 10 million estimated sufferers. Leprosy is perhaps the least infectious of all the contagious diseases. At present, newly diagnosed patients are seldom isolated.

Leprosy is classified, according to symptoms and histopathology (abnormalities of tissue cells affected by the disease), as lepromatous, a generalized form; tuberculoid, a localized form; or dimorphous (borderline), a form between tuberculoid and lepromatous. Strong resistance to the disease is shown by the development of the tuberculoid form. Lack of resistance to the organism results in the lepromatous form, in which the disease attacks not only the peripheral

nerves but also the skin, the extremities, the mucous membranes, and the eyes.

The earliest symptom is often anesthesia (loss of sensation) in a patch of skin. In the lepromatous form, large areas of the skin may become infiltrated. The mucous membranes of the nose, mouth, and throat may be invaded by large numbers of the organism. Because of damage to the nerves, muscles may become paralyzed. The loss of sensation that accompanies the destruction of nerves may result in unnoticed injuries. These may result in secondary infections, the replacement of healthy tissue with scar tissue, and the destruction or absorption of bone. The classic disfigurements of leprosy, such as loss of extremities from bone damage or the so-called leonine facies, a lionlike appearance with thick nodulous skin, are signs of advanced disease, now preventable with early treatment. The use of chaulmoogra oil was for many years the established treatment for leprosy.

The origins of leprosy in Malta is unknown. It has been suggested that the first cases of the disease in the Islands were possibly introduced from the east and south Mediterranean region by the Arabs during the two centuries of Saracen domination which started in the ninth century A.D. This hypothesis was based on the fact that the Maltese word for leprosy is *djem* or *gdim*, the origin of which is the Arabic word for the disease *djudsam*. The recent suggestion that the Islands may have been depopulated during this period suggests a later introduction. It is more probable that the disease was introduced with the advent of the Knights of St John of Jerusalem to the islands in 1530. The ceding of Malta to the Order markedly augmented the population by the arrival of the knights, soldiers, attendants, and refugees from Rhodes. Leprosy was apparently

quite prevalent in Rhodes, so much so that the Order of St John during its stay there found it necessary to issue segregatory regulations to attempt limit the spread of disease. The earliest recorded case of leprosy in Malta was that of a Dominican friar who died in the Rabat convent on the 30th April 1630.

The second half of the seventeenth century saw an increasing preoccupation with the disease. In 1659, the Council of the order expressed its concern about the fate of lepers on the Islands, while a 1679 Commission appointed to assess the management of the Sacra Infirmaria suggested that while local lepers should be given financial aid and treated in their own homes, foreign lepers should only be admitted to the *falanga* reserved for contagious disease. Academic interest was first shown in 1687 when Dr. Giuseppe Zammit read a paper before a

OCCUPATION OF IDENTIFIED LEPERS DURING PERIOD 1900-1929

OCCUPATION	MALE	FEMALE
Agricultural labourers	81	22
Day labourers	47	-
Hawkers/shop-keepers	18	4
Stone masons	18	-
Fishermen	16	-
Carters/cabmen	16	-
Coalheavers	15	-
Servants/housemaids	6	12
Plasterers	4	-
Carpenters/blacksmiths	4	-
Soldiers/seamen	4	-
Students/clerks	4	-
Priests/nuns	2	1
Washerwomen/seamstresses	-	7
Housewives	-	27
Lacemakers/spinners/weavers	-	15
Beggars	4	2
Other/unspecified	25	18

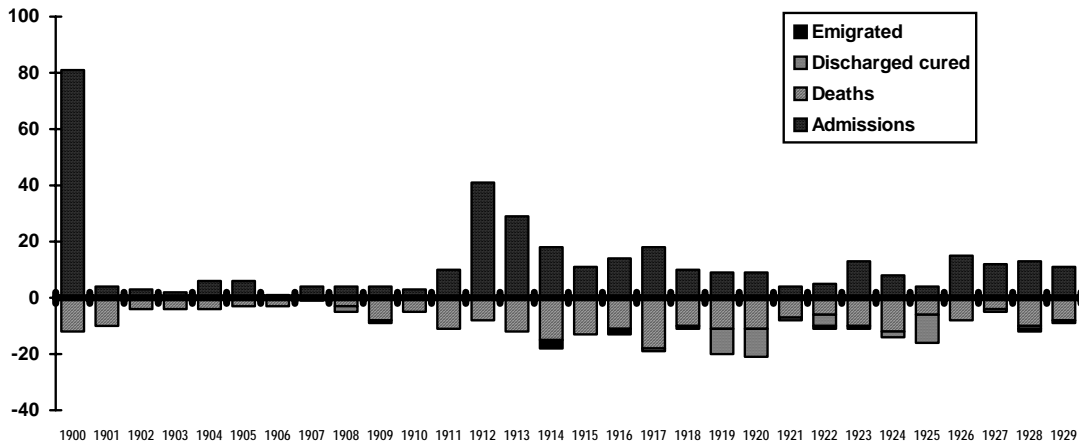
The gradual and steady increase in the number of leprosy cases stimulated the authorities to appoint in 1883 a committee composed of seven doctors to investigate the epidemiology of the disease and suggest methods of control. The

medical assembly wherein he described five cases of leprosy. A number of isolated cases were reported during the eighteenth and early nineteenth centuries, while the disease was academically discussed in a dermatological book written by Dr. Giuseppe DeMarco in 1762, and the discussions of the Accademia Medica Maltese which functioned until 1837. By 1847 Malta was included among the seats of leprosy, though it was not apparently commonly encountered. The latter half of the nineteenth century saw a marked increase in the number of affected cases probably resulting from increasing contact with North Africa through returning migrants, refugees and increased shipping. The stationing of a large detachment of Indian Troops at Imriehel in 1878 may also have been contributory since the earliest statistics of origin of leprosy cases showed that the majority of local lepers came from villages in the vicinity.

main result of the Committee's work after examining 30 cases was the decision to introduce compulsory segregation, even though they believed that the disease was hereditary rather than contagious. A survey was conducted in 1890 to assess the size of the problem. Only 69 known cases of leprosy were identified, eight of which lived in Gozo. Only eleven cases were in an advanced stage of the disease and had admitted themselves to the Asylum for the Aged and Incurables, commonly known as the poor House. The greater number of cases in Malta came from rural areas, mainly Qormi and Mosta. Only one came from Valletta. Half the cases from Gozo were from Nadur.

As a result of the committee's report, the Council of Government issued the Lepers Ordinance entitled *An Ordinance for checking the spread of the disease commonly known as Leprosy*. The ordinance provided for the compulsory notification under pain of legal penalties of every cases of leprosy immediately it was recognized. Cases confirmed by the Leprosy Board, composed of five doctors, were to be immediately segregated in a Leprosarium for as long as they were deemed a public danger. An ad hoc Leprosarium was constructed near the Poor House, the male section being occupied in 1900, while females were admitted after 1912. The annual admissions to the Leper Asylum are shown in the accompanying graph.

**ADMISSION - DISCHARGES
LEPERS ASYLUM 1990-1929**



Concurrently with the opening of the Leper Asylum, special regulations were issued to ensure and maintain complete segregation from the outside community. The severe restrictions imposed by these regulations were greatly resented by the lepers so that the first five or six years were marked by incessant complaints, frequent disturbances, escapes from the Asylum, and attacks on the personnel. The first disturbance occurred in May 1900 - only five months after the first patients were received. Fifty-four male lepers overpowered their attendants and found their way out of the Asylum. Another disturbance occurred in September 1900. Order was restored on both occasions after intervention by the police. In view of these repeat disturbances, a detachment of police were retained in the Asylum to maintain order. This detachment was removed in 1903 when the hospital attendants were given executive police powers. The lepers settled to a normal life in the hospital by 19067, though complaints continued to crop up. While the 1893 Ordinance did not allow the lepers to leave the Asylum except to visit sick family members or to emigrate abroad, individuals were granted special leave of absence for a few hours for domestic, legal or financial transaction which required their presence. By 1901 inmates were being allowed to go out accompanied two at a time for walks in the country. This was extended in 1902 to a drive in a cart, cab (after 1910) or bus (after 1930).

In 1916 as a result of complaints regarding the food and clothing supplies, the Governor

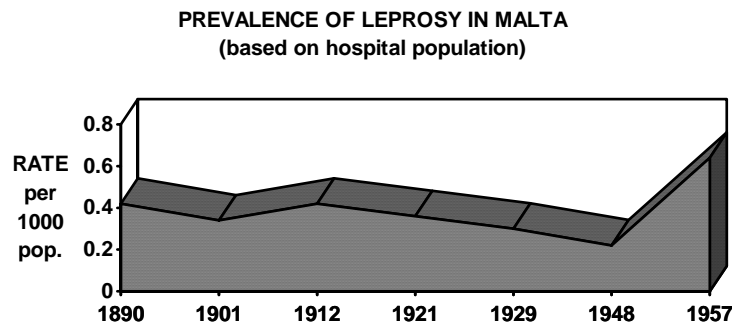
appointed a Board *to inquire into the discipline of the Leper Asylum, and to recommend efficient measures for its proper maintenance, and to ascertain whether the inmates had any substantial grounds of complaint, and to suggest the means of removing any grievances that were well founded.* The board reported that the grievances were generally unfounded and were the result of the restrictive circumstances. It also opinionated the low degree of communicability of leprosy. A second Committee was appointed in 1918 *to study de novo the question of the seclusion of lepers enforced by the law.* This Committee maintained that compulsory segregation was still necessary, but emphasized that patients should have the right to all the necessary comforts and the best therapeutic treatment. As a result of this report, an amended Lepers Ordinance was published in 1919, while the hospital regulation were revised. The new regulations required internment of the leper only seven days after confirmation, and allowed for the eventual discharge of the patient when the disease process was considered arrested and there remained no further risk to the public.

As a result also of the 1919 Committee's recommendations, a number of innovations were instituted to alleviate the lepers' situation in the Asylum. The patients were given the facility to be usefully employed for domestic work and maintenance in the Institution, while the surrounding grounds were given over for poultry farming and cultivation by the inmates. The increasing useful activity was well received by the inmates. Furthermore a common-room with

indoor games and reading material was made available, while entertainment was regularly provided. The realization and acceptance that leprosy had a very low infectivity rate allowed the introduction after 1929 of family visits by the inmates accompanied by an attendant.

Further amendments to the Lepers Ordinance were made in 1929 to enable the examination of contacts of diagnosed cases, while a new leprosarium was opened at Fort Chambray in Gozo in 1937. In the same period the Lepers Hospital, previously managed in conjunction with the Poor House, was given an autonomous

management; while the hospitals name were eventually changed to St. Bartholomew Hospital (Malta) and Sacred Heart Hospital (Gozo) to remove the stigmata associated with the disease. The low infectivity of the disease was eventually accepted and the segregation policy was removed in 1953 when compulsory internment was abolished except under special circumstances. The decrease in the number of patients allowed for the eventual transfer of St Bartholomew Hospital to Gharghur. The number of known lepers in the Maltese Islands in 1957 was 151 (a rate of 0.64 per 1000 population).



The medical authorities have always been on the forefront in the treatment of leprosy. At the time of the Asylum's opening in 1900 until 1915, the crude Chaulmoogra oil constituted the only anti-leprosy treatment. This was poorly tolerated by the patients and treatment was often refused and ineffective. Experiments with an auto-vaccine were started by Col. Croffon in 1915, but after two years showed little promise and further treatment was refused by the inmates. After 1918, a number of preparations were made available with varying success. In 1972 a Leprosy eradication project was initiated in Malta. This was based on the Freerksen's trial which combined treatment with rifampicin, INH,

prothionamide, and DDS. This medication was given for 2 years only to all patients. At resurvey after 4 years no cases of relapse were found. The Malta trial has served to confirm the importance of combined therapy which was initially suggested in 1962. In 1989, there were only a few spent-out individuals apart from three active cases notified to the Medical and Health Department. Because of its relative infrequency and the availability of adequate therapy, leprosy no longer carries the same stigma as in previous centuries. The diagnosed leper need not be assigned to the living dead population, the hardships of whom are so clearly illustrated in the New Testament.

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A Prominent Maltese Leprologist - biography



Briffa Ruzar: b. Valletta, Malta 16/01/1906, d. 22/02/1963. **Education:** Malta Lyceum, University of Malta qualified B.Sc. (1928), B.Pharm. (1928), and M.D. (1931); awarded scholarships to follow postgraduate courses in dermatology and tropical disease at the Institute of Dermatology and St Thomas Hospital in London and the Calcutta School of Tropical Disease. **Career:** 1932 houseman in skin diseases; 1936-37 assistant medical officer at the Lazaretto Isolation Hospital; 1938 assistant medical officer in charge of the Department of Skin and sexually-transmitted disease and leprosy control officer; 1944 Visiting Physician to St Bartholomew Leper Hospital; 1950 appointed senior consultant in skin disease at the Central Hospital and Chambray Hospital; also nominated honorary skin disease specialist at the Malta War Memorial Hospital for Children. 1950 occupied post of lecturer on dermatology and venerology at the university. **Achievements:** His medical contributions were in the field of leprosy. His contributions in the literary field included a number of poems in Maltese; co-founded the *Ghaqda tal-Malti* in 1931.

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Maltese Leprosaria

Reports on the various leprosaria with patient population and financial costs can be found in the annual reports published by the Office of Charitable Institutions [1900-1936] and the Department of Health [1936-1971].

St. Bartholomew's Hospital, Malta



Established as a separate building in the “Poor House - St. Vincent de Paule Hospital” grounds in 1900. Originally occupied by males only; female wing opened in 1912. The hospital population reached its high-water mark in 1917 with 114 inmates (71 males; 43 females). The leprosarium was named St. Bartholomew Hospital in 1937. In 1956, the leprosarium was described as an old but fine and spacious building with a bed complement of 118 beds. However during 1953-54, it only housed an average of 74 patients. The hospital had better amenities than many of the other hospitals in Malta. The wards, corridors and gardens were noted to be spacious

and pleasing. There was an entertainment hall and efforts were being made to organize shows and outings for the inmates. The hospital was managed by one medical officer, the Medical Superintendent, who was relieved by one of the doctors at contiguous St Vincent de Paule Hospital on his off-days. The building was renamed Ruzar Briffa Hospital in 1973 to commemorate the physician who had been a torch-bearer in the control of leprosy. The decrease in the number of patients following the Leprosy Eradication Project of 1972 allowed for the closure of St Bartholomew Hospital in the late 1970s and in February 1980 was taken over to augment the geriatric services at St Vincent de Paule Hospital (now renamed Has-Serh Hospital).

Sacred Heart Hospital, Gozo



Established in 1937 in the building previously used as the Married Quarters at Fort Chambray in Gozo. The Sacred Heart Hospital in Gozo, had a bed complement of 27 beds. Thirteen men and two women, originally from Gozo, were transferred to this hospital from Malta in 1937. The Gozo hospital closed down in December 1956 due to lack of patients.

Hal Ferha Estate, Malta



Established in 1974 in an abandoned gun battery at Gharghur, Malta. Used as a leprosarium to house the sufferers transferred from Ruzar Briffa Hospital. In 1989, there were only a few spent-out individuals apart from three active cases notified to the Medical and Health Department. By 1995, there were only five remaining residents living at the Hal Ferha Estate Leprosarium. The last remaining case was transferred to St. Vincent de Paule geriatric Hospital in 2001. This leprosarium was closed down in 2004.

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The Grand Priory of the Maltese Islands Military and Hospitaller Order of St. Lazarus of Jerusalem

The Order of St. Lazarus was originally instituted as a hospitaller Order in Jerusalem after 1090 with the specific purpose of caring for sufferers of leprosy. The presence of the Order of St Lazarus in Malta was a relatively late occurrence. There is no evidence of any leprosaria being extant in Malta during the Medieval Period, though reference has been made to the possibility of the Hospital of St Francis at Rabat, Malta [subsequently renamed to Santo Spirito Hospital] having been initially established as a leprosarium. No documentary proof has however been found to substantiate this assertion. The *hospitallis Sanctj Franciscj*, situated outside the Medieval walls of Mdina, is known to have been definitely in existence by 1372 and probably by 1347. It may in fact have been extant as far back as 1299. The hospital was managed by members of the Franciscan Order.



Shield: Grand Priory of the Maltese Islands

The Order of St. Lazarus in the Maltese owes its presence in the Maltese Islands to the traditional Anglo-Maltese links established during the nineteenth and twentieth century and dates only to the latter third of the twentieth century. In the mid-1960s, a number of Maltese individuals were admitted to the Order. The Maltese members of the Order soon established their own *Independent Commandery of Malta*. This commandery, on the 15th April 1969, was raised to the status of a priory with the title of "*Priory of Malta*". The Roll of Member of the Order published in 1969 includes 17 Maltese members among a list of 500 members worldwide. The Priory of Malta continued to increase its membership. It was elevated to its present status of *Grand Priory of the Maltese Islands* after the Order established its Chancery in Malta in 1973. By 1983, the Grand Priory of Malta was represented by 55 members.

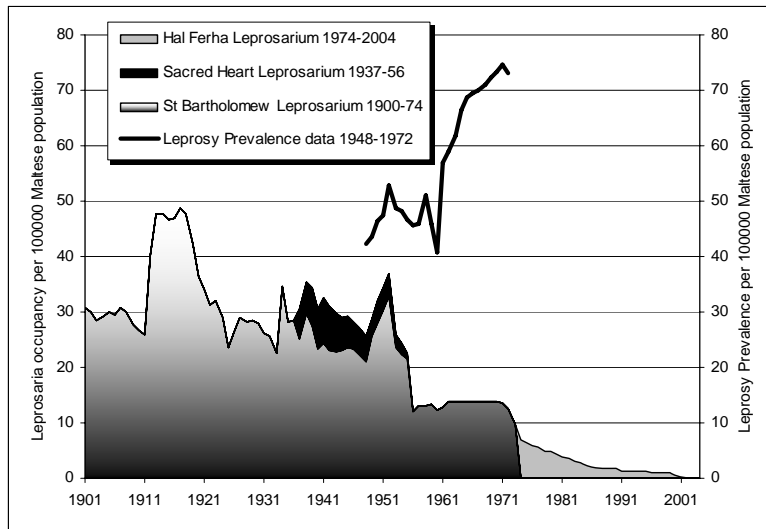
The Maltese Grand Priory and its individual members have furthermore been particularly active in the general affairs of the International Order with Maltese members holding high posts in the central government of the Order. The Priory of Malta also hosted the Grand Magistral Council held in Malta on the October 1969 and again recently in November 2005. In 2005 it expanded its services in Gozo by the establishment of the Commandery of Gozo – an expansion that has resulted in the setting up of services being offered gratuitously at a dedicated clinic in Gharb for the management of brain-injured children.



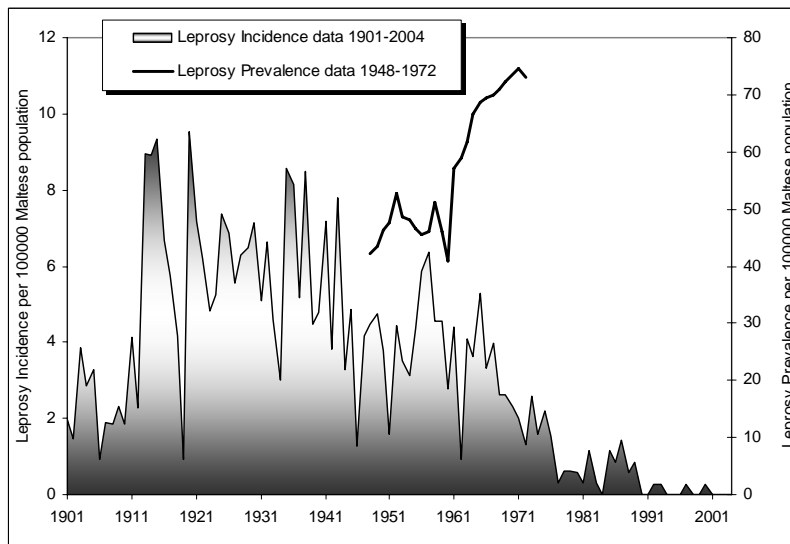
Shield: Commandery of Gozo

The Grand Priory of the Maltese Islands initiated its activities with a social contribution to the leper community in Malta. It further collected funds to assist the amelioration of the social conditions of sufferers of Hansen's disease in countries where the disease remains particularly rife, such as Kenya and Egypt. The Grand Priory of Malta also contributed to other worthy charitable causes not linked to leprosy. In 1973 it donated an ambulance to the Hospital of St Catherine of Siena at Attard; and has given financial support to philanthropic organizations such as Dar il-Providenza and Razzett tal-Hbiberija, as well as the Youth Institution St Francis Ravelin. While Hansen's disease has today been eradicated from the Maltese Islands, the Order remains committed to carrying out charitable works and projects for the care of the poor, the sick, the elderly and the very young. During 2005, it affiliated with the Step-by-Step Foundation which assists brain injured children and the Special Rescue Group – St. Lazarus Corps which offers first aid and rescue services to the community.

Prevalence, Incidence & Hospital Statistics



Maltese Leprosaria Occupancy statistics compared to known Prevalence of leprosy



Incidence and Prevalence of Leprosy in the Maltese Islands

Relevant Timeline

- 1893: publication of Ordinance No.VII entitled *An Ordinance for checking the spread of the disease commonly known as Leprosy.*
- 1900: opening in Malta of first residential leprosarium for males.
- 1912: residential services in Malta extended to females.
- 1937: opening in Gozo of residential leprosarium for males and females.
- 1953: *Act XI* repealed a large part of Lepers Ordinance abolishing compulsory internment except under special circumstances.
- 1972: initiation of the Leprosy Eradication Project.

Incidence & Prevalence Data

Year	population	year of publication	Number notified			Leprosy Incidence data 1901-2004	Number known cases			Leprosy Prevalence data 1948-1972
			Males	Females	Total		Males	Females	Total	
1900										
1901	202134				4	2.0				
1902	205059				3	1.5				
1903	206689				8	3.9				
1904	209974				6	2.9				
1905	212888				7	3.3				
1906	215879				2	0.9				
1907	213395				4	1.9				
1908	215332				4	1.9				
1909	216617				5	2.3				
1910	216879				4	1.8				
1911	218542				9	4.1				
1912	220968				5	2.3				
1913	223741				20	8.9				
1914	224323				20	8.9				
1915	224655				21	9.3				
1916	224859				15	6.7				
1917	226224				13	5.7				
1918	215439				9	4.2				
1919	218510				2	0.9				
1920	220060				21	9.5				
1921	223088				16	7.2				
1922	225242	1925			14	6.2				
1923	227440				11	4.8				
1924	228575				12	5.2				
1925	230618				17	7.4				
1926	232832				16	6.9				
1927	234454				13	5.5				
1928	237782				15	6.3				
1929	247338				16	6.5				
1930	251846	1932			18	7.1				
1931	255197	1932			13	5.1				
1932	256140	1933			17	6.6				
1933	262165	1934			12	4.6				
1934	264663	1935			8	3.0				
1935	268668	1936			23	8.6				
1936	269912	1937			22	8.2				
1937	270755	1938	?	?	14	5.2	?	?	?	
1938	271359	1939	?	?	23	8.5	?	?	?	
1939	269090	?	7	5	12	4.5	?	?	?	
1940	272121	?	5	8	13	4.8	?	?	?	
1941	279187	1943	11	9	20	7.2	?	?	?	
1942	286596	1943	6	5	11	3.8	?	?	?	
1943	295247	1945	13	10	23	7.8	?	?	?	
1944	303998	1947	6	4	10	3.3	?	?	?	

1945	308929	1948	6	9	15	4.9	?	?	?	
1946	312722	1948	0	4	4	1.3	?	?	?	
1947	312447	1949	10	3	13	4.2	?	?	?	
1948	312600	1949	7	7	14	4.5	71	61	132	42.2
1949	314907	1950	10	5	15	4.8	81	56	137	43.5
1950	317248	1951	6	6	12	3.8	88	59	147	46.3
1951	319787	1953	4	1	5	1.6	93	59	152	47.5
1952	314369	1954	9	5	14	4.5	101	65	166	52.8
1953	314066	1954	6	5	11	3.5	92	61	153	48.7
1954	319668	1956	10	0	10	3.1	94	60	154	48.2
1955	321940	1956	6	8	14	4.3	90	60	150	46.6
1956	324842	1958	12	7	19	5.8	89	59	148	45.6
1957	328854	1959	13	8	21	6.4	94	57	151	45.9
1958	329011	1961	7	8	15	4.6	104	64	168	51.1
1959	328116	1961	9	6	15	4.6	?	?	?	46.0
1960	323591	1962	6	3	9	2.8	?	?	132	40.8
1961	319164	1968	10	4	14	4.4	112	70	182	57.0
1962	317482	1969	1	2	3	0.9	113	74	187	58.9
1963	318573	1969			13	4.1	118	79	197	61.8
1964	302218	1969			11	3.6	121	80	201	66.5
1965	302340	1970			16	5.3	128	80	208	68.8
1966	302486	1970			10	3.3	128	82	210	69.4
1967	302820	1970			12	4.0	128	84	212	70.0
1968	303161				8	2.6	134	81	215	70.9
1969	303114				8	2.6	134	85	219	72.3
1970	302219				7	2.3	139	83	222	73.5
1971	301892				6	2.0	139	86	225	74.5
1972	306551				4	1.3	138	86	224	73.1
1973	311150				8	2.6				
1974	315466				5	1.6				
1975	318320				7	2.2				
1976	322535				5	1.6				
1977	325721				1	0.3				
1978	328375				2	0.6				
1979	331859				2	0.6				
1980	335169				2	0.6				
1981	338276				1	0.3				
1982	340907				4	1.2				
1983	343334				1	0.3				
1984	345636				0	0.0				
1985	345705				4	1.2				
1986	348372				3	0.9				
1987	350914				5	1.4				
1988	354532				2	0.6				
1989	358188				3	0.8				
1990	361908				0	0.0				
1991	365781				0	0.0				
1992	369455				1	0.3				
1993	373161				1	0.3				
1994	376433				0	0.0				

1995	378404			0	0.0	
1996	381405			0	0.0	
1997	384176			1	0.3	
1998	386397			0	0.0	
1999	388759			0	0.0	
2000	391415			1	0.3	
2001	397296			0	0.0	
2002				0	0.0	
2003				0	0.0	
2004				0	0.0	

Hospital Data

Year	population	year of publication	St. Bartholomew's Hospital				St Bartholomew Leprosarium 1900-74
			Remaining end year				
			Male	Female	voluntary patients	Total	
1900			69			69	34.1
1901	202134		63			63	30.7
1902	205059		62			62	30.0
1903	206689		60			60	28.6
1904	209974		62			62	29.1
1905	212888		65			65	30.1
1906	215879		63			63	29.5
1907	213395		66			66	30.7
1908	215332		65			65	30.0
1909	216617		60			60	27.7
1910	216879		58			58	26.5
1911	218542		57			57	25.8
1912	220968		54	36		90	40.2
1913	223741		63	44		107	47.7
1914	224323		62	45		107	47.6
1915	224655		63	42		105	46.7
1916	224859		66	40		106	46.9
1917	226224		67	38		105	48.7
1918	215439		69	35		104	47.6
1919	218510		61	32		93	42.3
1920	220060		51	30		81	36.3
1921	223088		46	31		77	34.2
1922	225242	1925	45	26		71	31.2
1923	227440		45	28		73	31.9
1924	228575		40	27		67	29.1
1925	230618		32	23		55	23.6
1926	232832		37	25		62	26.4
1927	234454		37	32		69	29.0
1928	237782		41	29		70	28.3
1929	247338		41	31		72	28.6
1930	251846	1932	46	25		71	27.8
1931	255197	1932	43	24		67	26.2

1932	256140	1933	42	25	67	25.6
1933	262165	1934	39	21	60	22.7
1934	264663	1935	36	57	93	34.6
1935	268668	1936	53	23	76	28.2
1936	269912	1937	55	24	77	28.4
1937	270755	1938	43	25	68	25.1
1938	271359	1939	51	29	80	29.7
1939	269090	?	49	26	75	27.6
1940	272121	?	43	22	65	23.3
1941	279187	1943	43	27	70	24.4
1942	286596	1943	?	?	68	23.0
1943	295247	1945	?	?	69	22.7
1944	303998	1947	?	?	71	23.0
1945	308929	1948	?	?	74	23.7
1946	312722	1948	?	?	73	23.4
1947	312447	1949	?	?	70	22.4
1948	312600	1949	43	23	66	21.0
1949	314907	1950	52	29	81	25.5
1950	317248	1951	58	31	89	27.8
1951	319787	1953	63	32	95	30.2
1952	314369	1954	66	37	103	32.8
1953	314066	1954	54	21	75	23.5
1954	319668	1956	53	19	72	22.4
1955	321940	1956	50	20	70	21.5
1956	324842	1958	28	12	40	12.2
1957	328854	1959	29	14	43	13.1
1958	329011	1961	29	14	43	13.1
1959	328116	1961	29	14	43	13.3
1960	323591	1962	26	13	39	12.2
1961	319164	1968	26	15	41	12.9
1962	317482	1969	27	17	44	13.8
1963	318573	1969	23	19	42	13.9
1964	302218	1969	24	18	42	13.9
1965	302340	1970	24	18	42	13.9
1966	302486	1970	23	17	42	13.9
1967	302820	1970	22	16	42	13.9
1968	303161		23	17	42	13.9
1969	303114		24	17	42	13.9
1970	302219		24	17	42	13.9
1971	301892		24	17	42	13.7
1972	306551		22	17	39	12.5
1973	311150					9.8
1974	315466		closed down December 1974		22	
1975	318320					
1976	322535					
1977	325721					
1978	328375					
1979	331859					
1980	335169					
1981	338276					

1982	340907		
1983	343334		
1984	345636		
1985	345705		
1986	348372		
1987	350914		
1988	354532		
1989	358188		
1990	361908		
1991	365781		
1992	369455		
1993	373161		
1994	376433		
1995	378404		
1996	381405		
1997	384176		
1998	386397		
1999	388759		
2000	391415		
2001	397296		
2002			
2003			
2004			

Year	population	year of publication	Sacred Heart Hospital			Sacred Heart Leprosarium 1937-56	Hal Ferha Leprosarium 1974-2004
			Remaining end year				
			Male	Female	Total		
1900							
1901	202134						
1902	205059						
1903	206689						
1904	209974						
1905	212888						
1906	215879						
1907	213395						
1908	215332						
1909	216617						
1910	216879						
1911	218542						
1912	220968						
1913	223741						
1914	224323						
1915	224655						
1916	224859						
1917	226224						
1918	215439						

1919	218510					
1920	220060					
1921	223088					
1922	225242	1925				
1923	227440					
1924	228575					
1925	230618					
1926	232832					
1927	234454					
1928	237782					
1929	247338					
1930	251846	1932				
1931	255197	1932				
1932	256140	1933				
1933	262165	1934				
1934	264663	1935				
1935	268668	1936				
1936	269912	1937				
1937	270755	1938	13	2	15	5.5
1938	271359	1939	13	2	15	5.5
1939	269090	?	14	4	18	6.7
1940	272121	?	16	4	20	7.3
1941	279187	1943	16	7	23	8.2
1942	286596	1943	?	?	23	8.0
1943	295247	1945	?	?	21	7.1
1944	303998	1947	?	?	18	5.9
1945	308929	1948	11	6	17	5.5
1946	312722	1948	9	6	15	4.8
1947	312447	1949	8	7	15	4.8
1948	312600	1949	7	8	15	4.8
1949	314907	1950	4	6	10	3.2
1950	317248	1951	6	7	13	4.1
1951	319787	1953	6	7	13	4.1
1952	314369	1954	6	7	13	4.1
1953	314066	1954	3	5	8	2.5
1954	319668	1956	3	3	6	1.9
1955	321940	1956	3	0	3	0.9
1956	324842	1958	closed down Dec 1956		0	0.0
1957	328854	1959				
1958	329011	1961				
1959	328116	1961				
1960	323591	1962				
1961	319164	1968				
1962	317482	1969				
1963	318573	1969				
1964	302218	1969				
1965	302340	1970				
1966	302486	1970				
1967	302820	1970				
1968	303161					

1969	303114				
1970	302219				
1971	301892				
1972	306551				
1973	311150				
1974	315466	0	0	22	7.0
1975	318320				6.5
1976	322535				6.0
1977	325721				5.7
1978	328375				5.0
1979	331859				4.8
1980	335169				4.4
1981	338276				3.8
1982	340907				3.5
1983	343334				3.0
1984	345636				2.7
1985	345705				2.4
1986	348372				2.0
1987	350914			6	1.7
1988	354532				1.7
1989	358188				1.7
1990	361908				1.7
1991	365781				1.3
1992	369455				1.3
1993	373161				1.3
1994	376433	3	2	5	1.3
1995	378404	3	2	5	1.3
1996	381405			4	1.0
1997	384176			4	1.0
1998	386397			4	1.0
1999	388759			2	0.5
2000	391415			1	0.3
2001	397296			1	0.3
2002				0	0.0
2003				0	0.0
2004				closed down formally in 2004	0.0

KAPITOLU 45

ORDINANZA DWAR IL-LEBBRUŻI

Biex tipprovdi dwar il-marda mag]rufa b]ala Lebbra.

(19 ta' Settembru, 1919)*

Saret li[i bl-ORDINANZA XX ta' l-1919 kif emendata bl-Att XV ta' l-1929; bl-Ordinanzi: XXV ta' l-1939 u XVI ta' l-1942; bl-Atti: XXXIX ta' l-1948 u XI ta' l-1953; bl-Avvi\ Legali 46 ta' l-1965; bl-Att LVIII ta' l-1974; bl-Avvi\ Legali 148 ta' l-1975; u bl-Att VIII ta' l-1990.

- | | |
|--|--|
| <p>1. Din l-Ordinanza tista' tissejjah l-Ordinanza dwar il-Lebbużi.</p> | <p>Titolu fil-qosor.</p> |
| <p>2. (1) Ebda lebbuż li jkun ġej minn barra Malta ma jista' jiżbarka f'port f'Malta.</p> <p>(2) Id-disposizzjoni tas-subartikolu (1) ta' dan l-artikolu ma tghoddx għall-persuni mwielda f'Malta.</p> <p>(3) Il-kaptan jew xi hadd ieħor li jkollu l-triġija ta' bastiment, illi jhalli jsir jew jippermetti li jsir jew ma jzommx l-iżbark minn dak il-bastiment f'port f'Malta ta' persuna li huwa jkun jaf jew ikollu raġun jaħseb li hija lebbuża, jehel, meta jinsab hati, il-pieni tal-kontravvenzjonijiet.</p> <p>(4) Kull lebbuż li jiżbarka kif jinghad hawn fuq jista' jiġi, b'mandat tal-President ta' Malta, meħud fl-isptar imsemmi fil-mandat u miżmum hemm għaž-żmien li jiġi stabbilit fil-mandat.</p> <p>(5) Kull lebbuż li jiżbarka kif jinghad hawn fuq jista' jingieħ quddiem maġistrat tal-Qrati tal-Maġistrati, illi jista' jeżamina lil dan il-lebbuż u lil kull xhud ieħor taħt ġurament, dwar il-port mnejn dan il-lebbuż ikun ġie f'Malta, u jista' jordna li dan il-lebbuż jerga jittieħed lura f'dak il-post bil-mod li jiġi ordnat mill-President ta' Malta.</p> <p>(6) L-ispiza li tkun meħtieġa għal din l-investigazzjoni u sabiex il-lebbuż jiġi mibgħut lura, ibatiha u jhallasha l-kaptan jew dak li jkollu t-triġija tal-bastiment li fuqu l-lebbuż ikun ġie f'Malta, jew li bl-egħmil jew nuqqas tiegħu l-lebbuż ikun thalla li jiżbarka.</p> <p>(7) Il-hlas ta' din l-ispiza jiġi mitlub bhala dejn ċivili favur il-Gvern, fil-Prim'Awla tal-Qorti Ċivili.</p> <p>(8) Għall-finijiet tad-disposizzjonijiet ta' qabel dan l-artikolu, id-deċiżjoni jekk persuna hijiex lebbuża tinghata minn bord kompost mit-Tabib Prinċipali tal-Gvern jew rappreżtant tiegħu u żewġ tobbja oħra eżerċenti magħżulin mill-President ta' Malta. Id-deċiżjoni ta' dan il-bord tkun finali u konkluziva.</p> | <p>Il-lebbużi frustieri ma jistgħux jiżbarkaw f'Malta.
<i>Emendat.</i>
<i>XI.1953.3;</i>
<i>A.L. 46 ta' l-1965;</i>
<i>LVIII. 1974.68;</i>
<i>A.L. 148 ta' l-1975;</i>
<i>VIII.1990.3.</i></p> <p>Provvedimenti fil-każ ta' żbark.</p> |

*Ara Proklama Nru. XVII ta' l-1919.