Editorials

SYMPOSIUM ON DAPSONE RESISTANCE

This Number of *Leprosy Review* is devoted to a single and highly relevant theme, namely, dapsone resistance. For over 25 years dapsone has been standard first line treatment for leprosy almost everywhere, its advent a turning point in the history of the disease. Millions of patients have been benefited by it and large numbers restored to health and strength. Equally important are the changes in outlook it initiated, so that leprosy treatment and control began to figure in the health programmes of many nations, and numerous leprosy control schemes were developed, based on chemotherapy with dapsone. At the same time the interest of research workers was awakened, leprosy became an attractive sphere of study, and enormous progress in our understanding of the disease has resulted. This process has culminated in the acceptance by the World Health Organization of leprosy as one of the 6 diseases selected for intensive research and attack.

Mercifully and quite empirically, for over a decade dapsone was administered in high dosage, and in contrast to experience in the chemotherapy of tuberculosis, drug resistance to dapsone was not encountered. The euphoria then generated tended to gloss over what might happen with small dosage and irregular treatment. These conditions have arisen and are widespread. A vogue for low dosage followed experimental work in the mouse. The very expansion of leprosy control programmes inevitably introduced situations of diminished oversight and poor patient co-operation. Dapsone resistance is now a rapidly growing problem full of menace for future chemotherapy in leprosy.

The Editorial Board, very aware of the importance, dangers and impact of this problem, decided to allocate a whole Number of *Leprosy Review* to it, and experts in the field and those with most experience were invited to co-operate. The response was most generous. In the pages of this Number there is to be found a unique consensus of experience and reflection on the problems involved, extending geographically from S. E. Asia, through India to Africa and the Near East. It includes the first authenticated reports of primary dapsone resistance. Appropriately the list of distinguished contributors is headed by our Consulting Editor, who as Chairman of the WHO Expert Committee on Leprosy and Secretary-Treasurer of the International Leprosy Association is in touch with developments everywhere and was invited to contribute the opening Editorial. Without doubt this Number of *Leprosy Review* will be the standard reference on dapsone resistance in leprosy for some time to come.

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