

Leprosy and the Community

THE 1ST INTERNATIONAL WORKSHOP ON CHEMOTHERAPY OF LEPROSY IN ASIA, MANILA, PHILIPPINES, 26–28 JANUARY, 1977

Published by Sasakawa Memorial Health Foundation, Sabokaikan, 2–7–5 Hirakawa-cho, Chiyoda-ku, Tokyo, 102, Japan, August 1977

The Proceedings of this important workshop have recently become available from the publishing address above in a 213-page document which is well worth study by those who are involved in the treatment of leprosy, whether for individual patients, or nation-wide control schemes.

The workshop was jointly sponsored by the Department of Health, Republic of the Philippines and the Sasakawa Memorial Health Foundation, Japan. Lectures on the most important aspects of anti-leprosy chemotherapy were given by Dr J. Walter (WHO, Geneva), Dr R. R. Jacobsen (U.S.A.), Dr M. F. R. Waters (U.K.), Dr S. Hazama (Japan), Dr S. G. Browne (U.K.), Dr R. S. Guinto (Philippines) and Professor M. F. Lechat (Belgium). These are recorded verbatim in the first half of this report, the second half being devoted to discussions which arose between the main speakers and delegates and observers from various parts of Asia.

The lectures contain much valuable and fully referenced information, but the discussions provide an exchange of views which is even more revealing, especially when the guest speakers are challenged by delegates with considerable clinical experience. Pages 185 to 187 give final recommendations on the chemotherapy of leprosy, with particular reference to sulphone resistance, and bacillary persistence after long periods of effective therapy. Neither in these recommendations nor elsewhere in the proceedings will the reader find a consensus view for the indications and dosage of all the drugs concerned, but the principles are stated very clearly. One thing is made abundantly clear by this workshop—and that is that we are now on the verge of asking field staff, para-medical workers, nurses, medical assistants and their colleagues to undertake work of a higher standard and greater complexity than ever before. This includes the life-long treatment of all lepromatous patients, the use of dual therapy and the prevention and treatment of adverse reactions of both cell-mediated and immune-complex type. The drugs concerned will include dapsone, rifampicin, clofazimine, the steroids and thalidomide. It will be interesting to see, in the next few years, to what extent the advice from this workshop, which is very close to that of the WHO Expert Committee on Leprosy (1976), is put into practice in areas of the world where there are still many patients with leprosy, most of them inadequately supervised.

A. C. McDOUGALL

HIND KUSHT NIVARAN SANGH: ANNUAL REPORT FOR 1976

The Hind Kusht Nivaran Sangh (Indian Leprosy Association) is one of the most important national Leprosy Associations in the world. The Sangh has a long and distinguished record of service to the people of India, and its Annual Report for 1976 comes at a time when leprosy control is forging ahead. With the President of India as its President, and many distinguished leprologists and men of public affairs on its Governing Body, the Sangh is able to play a very important role in bringing together in close relationship the Governmental and Voluntary Agencies engaged in leprosy control, especially in organizing and sponsoring Conferences and Seminars, and through publications, training programmes, scholarships and research. These diverse interests all figure in the 1976 Report, which not only reports the direct activities of the Sangh, but includes summary reports on the work of important leprosy centres in different parts of India and on the State Branches of the Sangh, all together comprising an interesting picture of anti-leprosy activity in India today. The following are some points of international interest.

The National Leprosy Control Programme in India is gaining strength. Enhanced Government funds for implementing it have allowed the introduction of Zonal Leprosy Officers in the States, the establishment of temporary 20-bed leprosy hospitalization wards in District hospitals, and also Reconstructive Surgery Units in various parts of the country. About 372 million people live in endemic zones of leprosy in India. Out of 3.2 million estimated leprosy cases about 25% are infectious and 20% suffer from deformities. About 400,000 patients have suffered socio-economic dislocation and about 200,000 have become itinerant beggars.

There are now 361 Leprosy Control Units, 4460 S.E.T. Centres, 279 Urban Leprosy Centres, 54 Reconstructive Surgery Units, 120 temporary hospitalization wards, 28 Government and 9 Voluntary Agency Training Centres. Every one of these totals represents a substantial increase over 1975.

A syllabus for leprosy teaching has now been prepared for inclusion in the standard MB. BS. at medical colleges throughout India.

XIV All India Leprosy Workers Conference

This important large biennial event, sponsored by the Sangh, was held at Baroda in April, 1976, and as usual was attended by leprosy workers of various types, and not confined to doctors. Resolutions included the request that mass media in India should consult the H.K.N.S. before transmitting information on leprosy, in order to establish scientific accuracy. The avoidance of the word "leper" was advocated, as was the need to make dapsone freely available to all leprosy institutions and in the open market. It was also requested that the basic facts about leprosy should be included in the curriculum of all secondary schools.

“Leprosy in India”

Leprosy in India is making excellent progress under the distinguished editorship of Dr Dharmendra. More than 250 fresh subscribers were enrolled in 1976 and the size of the Journal has been increased to 460 pages for the 4 issues.

(We cordially associate ourselves with these sentiments and congratulate Dr Dharmendra on a great achievement.)

Training Courses

Training courses sponsored by the H.K.N.S. include the Leprosy Physiotherapy Technicians training course at Vellore, refresher courses for the same type of worker, and orientation courses for doctors.

Publicity and Publications

Health education has been for many years an important emphasis of the H.K.N.S. A *Manual for Public Health Nurses in Leprosy* by Dr D. D. Enna has been published in India among several new publications and revisions of others.

World Leprosy Day

World Leprosy Day receives a great deal of attention in India. The H.K.N.S. takes a leading role in organizing and publicizing functions in support of it.

In addition to the statistics given above the Report of the National Leprosy Control Programme, included as an Appendix to the Report, states that the anti-leprosy programme in India is making rapid strides, and most of the high and moderately high endemic areas of leprosy have been brought under the surveillance of the Programme.

The JALMA Centre at Agra has been taken over by the Government of India and is functioning as a training, research and referral centre (CLIL).

There are also very useful concise reports from: The Indian Council of Medical Research; The Leprosy Mission; The Central Leprosy Teaching and Research Institute, Chingleput; Gandhi Memorial Leprosy Foundation; The Christian Medical College and Hospital, Vellore.