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Reports, News and Notes

ILEP; Guidelines for the Campaign against Leprosy (2nd edition)

The XIVth General Assembly of ILEP in Amsterdam adopted the English version of the final text of the Guidelines. The French version will be submitted to the Working Session in December 1982. These guidelines have been drawn up by the ILEP Medical Commission, in agreement with Member-Associations and various Ad Hoc Working Groups. They are for the use of ILEP Member-Associations, both for the assistance of their own staff and for distribution, if Associations so wish, to those with whom they are working in the field – whether governments, other voluntary agencies or project managers – in order to facilitate mutual understanding. (Source: ILEP Co-ordinating Bureau, 234 Blythe Road, London W14 OHJ.)

Leprosy Relief Work Emmaus-Suisse and PAHO; project in 11 Caribbean countries

Leprosy Relief Work Emmaus-Suisse and the Pan American Health Organization recently signed an agreement totalling US\$275,489 to assist 11 Caribbean countries to organize a leprosy control program. Those involved in the 3-year project include Anguilla, Antigua and Barbuda, Bahamas, Barbados, Dominica, Grenada, Montserrat, St Kitts/Nevis, St Lucia, St Vincent and the Grenadines, and Turks and Caicos Islands.

The long-term objectives of the project are:

- 1. To achieve control of leprosy so as to protect the healthy population and reduce the prejudices against the disease in the general population and in those affected.
- 2. To prevent or reduce deformities, and to detect early at least 90% of non-infectious cases.
- 3. To ensure that 100% of the registered infectious cases receive regular treatment, under supervision.
- 4. To ensure that no less than 80% of the registered noninfectious cases receive regular treatment.
- 5. To review patients regularly and to 'release from control' (discharge) all those who qualify, excluding infectious cases.
- 6. To provide each year services and facilities for rehabilitation of approximately 50% of the cases found in that year.
- 7. To provide short-term hospital care for patients with the acute complications of leprosy, who may represent about 10% of registered cases annually, and facilities for reconstructive surgery as necessary and feasible.
- 8. To ensure the provision of appropriate instruction in leprosy control for all trainees in health-teaching institutions.

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Plans for 1982 include visits to each of the participating countries to assess and review the leprosy control programs with the national designated Leprosy Control Officer. Standard patient record forms (approved by the Standing Committee on Leprosy Control in the Caribbean) recently printed at CAREC* are being distributed to countries in order to facilitate both individual patient supervision and the collection of data for national programme assessment.

OMSLEP; recording and reporting system for leprosy patients

This system has now been published in English and French from the Epidemiology unit of the Catholic University of Louvain, Brussels, with the sponsorship of the World Health Organization. The authors are MF Lechat, CB Misson and J Walter. The summary reads as follows:

- 1. The OMSLEP system involves recording leprosy patients on an individual patient form. The information recorded summarizes the patient's condition on detection and following each year of treatment.
- 2. Two statistics forms summarize the data for all the patients detected or registered each year and can be used to evaluate a leprosy control programme. It is possible to use only the statistics forms if an individual patient form containing the required information is already in use.
- 3. By this system it is a simple matter to calculate operational indices at the time of detection and after detection, together with epidemiological indices, in order to evaluate the performance and effectiveness of leprosy control programmes. The meaning of the various indices is explained. It is possible to process the data by computer if so desired.

Carville; International Seminar on Hansen's Diseases, September 1982

The programme for this 7-day seminar covered clinical aspects, treatment, history and development of the Center at Carville, reactions and their treatment, pathology, microbiology, rehabilitation, psycho-social aspects, skin smear techniques, vocational rehabilitation in the field, occupational therapy, orthotics, recent progress in biomedical research, training and education and prospects for the next decade. Thirty-five participants were listed from India, Brazil, Mexico, Africa, Haiti, Nepal, Pakistan, Trinidad, Virgin Islands, Taiwan, Egypt, England and China.

Brazil; College of Hansenology founded

Dr Celio Paula Motta has kindly drawn our attention to the founding of this College which is open to workers in the fields of medicine, biology, chemistry, psychology, anthropology, history, social sciences, nursing, health education, communication – and others who wish to cooperate. Apply to Rua Nascimento Silva, 16/201–IPANEMA–Rio de Janeiro/RJ, Brazil, CEP 22.421.

Resignation of Dr Gordon Ellard from the Editorial Board of Leprosy Review

We record with regret Dr Ellard's resignation from the Editorial Board of this journal. His numerous contributions not only to *Leprosy Review*, but also to a wide range of other

*CAREC Surveillance Report 8 (1): January 1982.

journals, are well known to all who work in leprosy and for many years this Board has benefited from his immense experience, particularly in the field of chemotherapy and compliance to prescribed drugs. We record our sincere thanks for his many years of service, not only as a contributor, but also in the expert assessment of articles submitted for publication.

EDITOR

Bureau of Hygiene and Tropical Diseases, photocopy service

The Bureau is introducing for a trial period a photocopy service for its readers. Photocopies of most items abstracted in the two journals, *Tropical Diseases Bulletin* and *Abstracts on Hygiene and Communicable Diseases*, except entire publications (e.g. complete books), can be supplied, provided that a copyright declaration form is completed and signed. The charges for photocopies are 20 pence per page for delivery in the UK and 25 pence (US\$0.60 cents) per page elsewhere (inclusive of delivery by air mail). The minimum charge is £2.00 (US\$5.00) per order. Orders should be prepaid to avoid delay.

For the necessary form please write to: Bureau of Hygiene and Tropical Diseases, Keppel Street, London WC1E 7HT, England.

Correction

We are grateful to Drs Titia Warndorff and Wilhelm Beaumont of ALERT in Addis Ababa for drawing our attention to errors in the figures of the Editorial on 'Drug compliance in the treatment of leprosy' and the article by Ellard *et al.* on 'The self-administration of dapsone by leprosy patients in Ethiopia' in *Lepr Rev* 52, Number 3, 1981. The correct number of outpatients studied was 358 and the numbers quoted in the Editorial (368) and in the summary of the paper (295) are unfortunate errors. *Editor*.