Lepr Rev (1984) **55,** 177–178

Domiciliary and Field Work

Laboratory services in the context of primary health care. ***WHO Chronicle*****, 33, 334–7 (1979)**

The summary of this 4-page article reads 'WHO's programme of health technology relating to primary health care and rural development includes collaboration with national health authorities in establishing laboratory services that are appropriate, inexpensive, acceptable and easily performed by laboratory personnel at the peripheral level. In that connection, WHO has prepared a 20-page document "Laboratory services at primary health care level".' The introduction draws attention to the regrettable fact that laboratory services in developing countries are usually only well established at the central, rather than the peripheral level, but that an attempt has been made to change this pattern in Indonesia, Malaysia, the Sudan and Cameroon. The main headings in the article are: the health centre laboratory; essential laboratory tests for use in the health centre; laboratory services in a primary level hospital; collection and despatch of laboratory specimens and training of laboratory workers. The table of essential tests is of considerable interest because of its brevity and simplicity; only 13 are listed and 2 of these (for sputum in TB and skin smears in leprosy) involve the Ziehl–Neelsen stain. Available from Health Laboratory Technology, WHO, 1211 Geneva 27, Switzerland.

Manual of Basic Techniques for a Health Service Laboratory. **WHO, Geneva, (1980) US $13.50**

This is a comprehensive manual of 478 pages, plus index, covering: general procedures; parasitology; bacteriology; serology; mycology; examination of urine; cerebro-spinal fluid; haematology; blood chemistry and blood transfusion. It is profusely and extremely well illustrated with black, white and grey-shaded drawings and diagrams. Section 31 describes the hot method, for staining tubercle bacilli with Ziehl–Neelsen; Section 32 the cold method, using Kinyoun stain; and Section 33 the examination of leprosy bacilli with a modified Ziehl–Neelsen, using a cold method (only). The precise composition of all the reagents involved in these procedures is given in a section at the end of the manual. (The figures at the top right-hand corner of page 263, for the numbers of leprosy bacilli seen in 1 field, 10 fields or 100 fields range from 0 to 5 and do not correspond to the widely used Ridley scale for the Bacteriological Index; BI.)

A Medical Laboratory for Developing Countries. **M. King (1973)**

A paperback of *c* 70 pages, with a vocabulary index (mainly of technical and medical terms). It is extremely well illustrated, with hundreds of line drawings and diagrams and also has 107 colour plates of microscopy in haematology, helminthology and other subjects. The main sections cover: equipment; making the laboratory ready; records and specimens; weighing and measuring; the microscope; blood; urine; cerebro-spinal fluid; stools; some other specimens; blood transfusion and, finally, a chapter for pathologists, stores officers and medical administrators. Eight pages are devoted to the examination of smears in leprosy, beginning with an outline of the classification of leprosy with some indications of where bacilli are likely to be found. The skin-smear technique is fully illustrated and there is a detailed description of the bacteriological and morphological indices. Price US $14.00; English Language Book Service (ELBS) countries US $4.50). Oxford University Press.

A Medical Laboratory Manual for Tropical Countries. **Monica Cheesbrough (1984)**

Section 44.3 deals with the leprosy bacillus, covering: classification; microscopy; the indices; collection of skin smears; relapse; nasal smears; noseblows; biopsies; staining; interpretation and records. The author has kindly supplied the following information about her organization—'Tropical Health Technology (THT) Ltd' which has been formed to help developing countries by sharing 'our knowledge and helping to transfer appropriate medical laboratory technologies especially in the fields of publication and equipment. It also ensures the continuity of the manual project for which money was donated. Our main activity in the publishing line is to produce the three reference training manuals (Vols I–III), a health centre manual, loose-leaf laboratory diagnostic sheets (covering the major diseases), all using artwork and knowledge originated with Vols I–III. Publishing programme takes us up to the end of 1984.

In the equipment line, our major work is to design, manufacture and distribute a good low-cost (self-servicing) microscope with the aim of having it at least assembled in developing countries. We also hope to produce design drawings for smaller much-needed items of laboratory equipment for manufacture locally as well as here in UK at low cost. We also advise laboratory workers overseas and those going overseas and generally try to assist in whatever way we can.

These volumes can be obtained directly from Tropical Health Technology, 14 Bevills Close, Doddington, Cambridgeshire, England PE15 OTT. Price US $12.50.

0305-7518/84/055177+02 $01.00

Leprosy for laboratory workers, Ponape Hospital, Ponape, Caroline Islands. Carol Murray (1982)

The author has kindly submitted this 26-page manuscript (in draft for further development), which has been used locally in Ponape for the training of laboratory personnel and is still in the stage of revision and development. It covers all basic steps in the examination of smears and is illustrated with line drawings which are in keeping with the equipment and techniques in use in this area. The staining techniques are those used at the USPHS Hospital in Carville, USA.

Technical Guide for Smear Examination for Leprosy by Direct Microscopy

Published by the Leprosy Documentation Service (INFOLEP), Royal Tropical Institute, Mauritskade 63, 1092 AD Amsterdam, The Netherlands. Requests for single copies should be sent to: The Leprosy Mission International, 50 Portland Place, London W1N 3DG. Requests for bulk orders may best be made through representatives of ILEP; the International Federation of Anti-Leprosy Associations. Please note the following errata—Inside cover: list of ILEP members; the correct title is International Federation of Anti-Leprosy Associations, *not* Organisations. The title 'Amici dei Lebbrosi' should be changed to: Associazione Italiana 'Amici de Raoul Follereau'. Page 11: under 1.4, line 10 of the paragraph at top left, the word 'these' should read 'there'. Page 11: Under 1.6. in the first main paragraph, the section reference 2.7 should read 2.8. Page 24: under 3.2.4, the percentage of alcohol should read 70% *not* 95%. Page 25: under 3.3, item i) the period of staining with methylene blue should be 1 minute *not* 3 minutes. Page 26: under 4.1, lines 4 and 5; the figure in brackets should read (× 100) *not* (× 40 and × 100). Page 28: under 4.3.3, fifth line up from the end of the page, omit '. . . . and percentages. . .' It should read 'to express the numbers of solid, fragmented and granular bacilli separately as percentages.' Page 29: under Figure 8, line 3 of the caption; the figure for length should read '. . . between 2 and 8 microns. . .' *not* '. . . 1 and 8 microns. . .' In the one from last line, μ should read 1 μ. Page 31: in the table in Appendix 1, the average for Fatima d/o Hussein under F% should be 2, *not* 0. Page 34: Appendix IV; this diagram has been reproduced with the permission of Dr Gjalt Boerrigter, Malawi, from *Leprosy Review* (1983), *54,* 115.

The Unquiet Eye; a Diagnostic Guide. A J Bron

This is a 98-page booklet with 79 colour prints and a glossary. Some of the points in the booklet are also discussed by Mr Bron in a filmstrip 'The Unquiet Eye' (18 minutes). The main headings are: a guide to techniques; interpretation of symptoms and signs; dry eye; ocular trauma; subconjunctival haemorrhage; conjunctivitis; keratitis; anterior uveitis; angle closure glaucoma; episcleritis and scleritis; the red eye with proptosis; the red lid; summary of treatment; ocular screening by the general practitioner; anatomy; list of useful diagnostic equipment. This is not a book for the specialist and it has not been assembled with third world or tropical diseases in mind. Nevertheless, it is full of information and superbly illustrated. There is no charge and *bona fide* applicants should contact Glaxo Laboratories Ltd, Greenford, Middlesex UB6 OHE, UK, or their local representative for the booklet and/or filmstrip.

Cristoffel Blindenmission; the Local Production of Eye Drops

An A4 paperback, 18 pages, typed sheets, it is intended as a set of practical notes for rural hospitals and comes from the African Region Medical Office of this organization, P.O. Box 1363, Moshi, Tanzania. No charge is stated but we advise paying at least for the cost of postage. The opening paragraph of the introduction explains that the intention is to give information which will enable people to produce their own eye drops locally, at a cost which is often only 10–20% of the ready-made manufactured product. The early sections describe: materials required, including advice on bottles, droppers, basic chemicals, preservatives, antibiotics; the production of distilled water; sterilization by autoclaves; weighing. The ensuing notes on the use of eye drops cover mydriatics, myotics, local anaesthetics, antibiotics, steroids and artificial tears. Detailed information is given on the prescription and production of drops, and the text ends with some notes on eye ointments and drugs that lower intra-ocular tension. This is a supremely practical document which should be studied by all who are concerned with the diagnosis and treatment of eye diseases in the tropics. The Africa Region Ophthlamic Consultant of the Cristoffel Blindenmission has offered to answer questions, sent to the above address.

Teaching Leprosy to Medical Students in Liberia

We gratefully acknowledge the 1982–83 Annual Report of the National Leprosy Control Programme in Liberia and note with particular interest the initiative which has been taken to design a programme for the teaching of leprosy to medical students. Professor Togha, Chairman of the Department of Public Health and Preventive Medicine and Dr J C Johnson, Director of the National Leprosy Control Programme, have recorded their plans for an outreach programme to sensitize final year medical students to early diagnosis and treatment of leprosy, thus aiming at the reduction of the prevalence and morbidity of leprosy in Liberia—and its eventual eradication. There will be intensive training at Ganta Leprosy Centre in January and February each year. We look forward to hearing of progress and hope that this initiative with medical students (who are perhaps even more important than qualified doctors in this context) will be taken up in other countries. Contact Dr J C Johnson, The National Leprosy Control Programme, P.O. Box 1240, Monrovia, Liberia, Africa, for further information.