

INDIAN RAILWAYS IN LEPROSY

Sir,

Lep Rev (1986) 57, Number 2 carries an Editorial about leprosy education, and the reference to Bombay is most encouraging. I write to let you know about another aspect of leprosy in India. The Indian Railways, which are 1 lakh miles long and carry 4 million passengers a day, took up and adopted leprosy as a project. I am delighted to describe this because I had a great deal to do with its concept and development.

I started with the idea that the railways are the biggest media, reaching from one corner of the country to the other and also reaching a wide cross-section of society. The Railways bear a two-edged responsibility towards leprosy. One is, of course, the migration of a leprosy patient from place to place, and the other is that it is an employer of a vast number of people (20 lakhs) for which the railways have a certain responsibility to promote the Leprosy Control Programme. Over and above that, we thought the easiest way for the railways to participate in the Control Programme of Leprosy would be through posters in trains, to write a slogan in the most widely read book in the country, i.e. the railway timetables, and to have exhibitions and displays at the busiest railway stations. It may be surprising information to some that in Bombay alone nearly 20 lakhs people travel by train every day. The project was taken up by Indian Railways and especially by the Western Railway with Bombay as the centre. Progress has been impressive and the project now covers: (1) treatment, (2) control, (3) education, (4) survey, and (5) rehabilitation.

Education is the backbone of a control programme. In Bombay alone, 20 lakhs people travel by

suburban trains and their journey period averages one hour during which time they become 'captive scholars' if the proper posters and information boards are displayed in the railway compartments. Suppose out of 20 lakhs passengers, only 100 look at these posters it is quite possible that we motivate 365 cases every year.

We also organize exhibitions and check-up points on busy railway stations, with the idea that while a passenger is waiting for the train, he can enter the booth to see a video film or a poster and if desired, get himself checked on the spot. We have had as many as 70,000 visitors in one week.

Railway timetables carry educative slogans against leprosy, e.g. 'Leprosy is curable' and 'Leprosy is not hereditary'. The Western Railway alone is selling 2 lakhs of these tables, which can be multiplied by 5 to give us the actual number of readers.

Survey. Our home-to-home survey work is done with the help of a non-government institution—The Bombay Leprosy Project, to whom we are very grateful for assistance. All the residential colonies of the Western Railway are screened to find the leprosy cases and contacts.

Here the control programme and treatment go side by side and we are also involved with tuberculosis surveys since the two diseases so often occur together.

Rehabilitation. If non-medical government concerns such as the railways take up this aspect of the work, especially for employees who require help but have reached retirement age, we envisage great improvements in the future. The railways are backing us and we would also like to record our appreciation to the wizard Dr Jopling for his encouragement in these endeavours.

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Postscript

Since receiving the above letter Dr Garg has supplied the following further information:

'Anti-Leprosy Trains' were organized by Western Railway in Bombay earlier this year with the objective of creating awareness of leprosy and of providing free, on the spot, medical examinations. With the approval of the General Manager of Western Railway we prepared two 'Leprosy Trains', each consisting of: 1, a coach decorated with posters about leprosy and its treatment; 2, several coaches equipped for medical examinations (including eye examinations); 3, a coach equipped for routine laboratory tests; and 4, a restaurant coach for the medical team. Prior propaganda had informed the populace of the project and the stopping places, and had invited people to attend at the various designated stations along the line. The first train was flagged off on 30 January and the second one (to an up-country destination) on 3 March. There was a good attendance at all stopping places and about 500 persons were examined; those requiring treatment were referred to local hospitals, clinics or voluntary bodies. Initial treatment was given on the spot. Further 'Leprosy Trains' are being planned in view of the very encouraging response of this novel experiment.