WOODEN BOX FOR THE TAKING, FIXATION AND TRANSPORT OF SLIDES FOR SLIT-SKIN SMEARS IN LEPROSY UNDER FIELD CONDITIONS

Sir,

Over 2 years ago, with the further extension of our work from the base in Istanbul to an increasing number of the leprosy-endemic regions of Turkey, we developed a wooden box for the taking, fixation and transport of slides for slit-skin smears in leprosy, suitable for use under field conditions. Essentially it consists of a robust wooden box with a zinc-lined lid and various compartments for the spirit bottle, cotton wool, scalpel and slides, as shown in Figure 1. The wood for the main box is 1 cm thick; that for the inner partitions 0.5 cm. The external dimensions are 20 × 16 × 13 cm. The inner dimensions and design are shown in Figure 2. ‘Dove-tailing’ of the wooden joints is not essential, but it considerably strengthens the whole structure and is worth the extra effort. In Istanbul we are fortunate in having the simple materials for the construction of the box readily available and the total cost, including labour, is less than US$5, although we realize that this figure may be higher in other countries. Dr David Payne of the Malaria Unit in WHO has written to inform us that a similar box for the transportation of malaria slides (Slide box, Hans Luhr, for 100 slides; WHO standard Malaria Unit pattern) was designed many years ago for the Malaria Eradication Programme and that some are still in daily use after 25 years. Our experience with the leprosy box illustrated here over the past 2 years is that it stands up well to daily use, including thousands of kilometers of travel by road, and that it is extremely effective in protecting slides from UV light, dust and breakage. We hope that it may prove valuable in other leprosy programmes, where skin smears are taken, fixed and transported in the field.

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Figure 1. The main part of the wooden box consists of compartments for the spirit bottle, cotton wool, knife handles and blades, spare slides and record cards. The draw on the right carries the used slides in wooden slots. The heat-resistant zinc-lined lid on the left is for the fixation of slides, using the flame from a ball of cotton wool saturated in spirit. External dimensions: 20 × 16 × 13 cm.
Acknowledgment

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REPLY: AMYLOIDOSIS

Sir,

A H Patki (Lepr Rev, 1990; 61: 398–9) suggests that amyloidosis played a role in the decline of the European leprosy epidemic. I would like to revise another, probably more relevant set of circumstances: as an airborne-droplet or dustborne-disease the spread of leprosy depends on two factors: 1, the number of people per room, sleeping quarters, living or working accommodation; and 2, the mobility of the population.

The importance of the 'sneezing distance' is generally recognized. What is less commonly realized is that if a relatively isolated community harbours Mycobacterium leprae, the natural tendency is for the epidemic to follow a classical epidemiological curve, that may well stretch over several centuries, eventually leading to maintenance of the epidemic at a low level or total disappearance.

On the other hand, if at regular intervals such a community has close contact with other, also relatively isolated communities (mustering for military service, Viking fleets, seasonal gatherings for offshore fishing, ocean-going cutters manned from several homesteads, trading fairs, religious gatherings, etc.), then the chances are that the epidemic will not only spread, but also maintain a high level. It is clearly demonstrated in the history of leprosy in Scandinavia that this latter factor is of prime importance.

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