OPERATIONAL RESEARCH AND ITS AIMS

Sir,

In an effort to encourage more submissions on this topic we would like to express how useful the exchange of ideas in the field would be and that Leprosy Review would be well placed for doing this.

The basic aim of operational research is to carry out work to improve the operational efficiency as well as the effectiveness of leprosy work. This could be issues such as the packaging of drugs and their distribution; major reviews of the operation of a leprosy programme. Many simple studies are done looking at the compliance rates which involved interviewing field staff and patients, reviewing reports on the programme and then making simple changes which are effective in improving treatment and compliance. Other projects include looking at trials of health education materials, and validation of diagnostic criteria.

These projects are worth reporting for the benefit of others working in the field because they could have important effects on other programmes if this kind of information were shared.

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CONSIDERATIONS IN THE INTEGRATION OF EYE CARE INTO LEPROSY CARE SERVICES

Sir,

Courtright & Lewallen1 rightly draw attention to the often neglected subject of the integration of eye care into leprosy services. I would like to comment on their selection criteria for the need of an eye-care programme within a leprosy-control programme.

A common and easy to recognize eye complication in leprosy, with good prospects for treatment, is lagophthalmos due to facial nerve damage. Most lagophthalmos is the result of reversal reaction in borderline patients (BT, BB, BL) and occurs either before registration or shortly (within 6–12 months) after the start of antileprosy therapy,2 that is early in the disease and among young patients. At least half of such patients belong to the paucibacillary BT group. Overall, facial nerve damage, will exist or develop in 2–3% of all newly registered leprosy patients, in spite of multidrug therapy (MDT).