

COMMENT: DIVORCE AMONG SAUDI FEMALE LEPROTIC PATIENTS: AN EXPERIENCE AT IBN SINA HOSPITAL

Sir,

With reference to the Letter to the Editor published in *Lepr. Rev.* (1993) **64**, 163–73. It is appreciated that the authors have analysed the factors leading to divorces. They have rightly enumerated the factors that would decrease the length of hospitalization. It is also appreciated that they are concerned to decrease the number of divorces, this is shown in their efforts to arrange marriages in the hospital. However, I would like to mention the following points.

Observations made and conclusions drawn are that the single most important cause of divorce in those patients was a prolonged period of hospitalization, which leads me to presume that the actual or real cause of divorce is not the social stigma or hatred attached to the disease as in other parts of the world; but that the leprosy patients are well accepted by the family members and society at large.

What causes such long periods of hospitalization (from 0·5 to 4·5 years, Table 5) of leprosy patients when they are being cared for in the best possible place? The administering of supervised pulses without hospitalization is agreed and practised the world over. None of the indications for hospitalization causes a patient to be in hospital for 4·5 years. The only possibility that comes to my mind is that the same patient has been admitted and discharged several times for various indications over a period of many years (if it is, it is not mentioned by the authors), but that period too is quite long.

Another reason for hospitalization in Saudi could be to isolate the patients for better

compliance and management of the patient, but that too should not exceed 6–9 months for paucibacillary (PB) cases or 2–3 years for multibacillary (MB) cases. Also isolation is unreasonable in PB cases, so why hospitalization?

It would seem that the earlier detection of cases would help. The early detection, and prompt and regular treatment are the factors that can arrest leprosy, cure the patient, and prevent the complications that can make hospitalization necessary.

The authors have rightly enumerated the factors that will help them to not only decrease the duration of hospitalization but also avoid it. They must add to the list, the encouragement of the early detection of cases, and the training in leprosy of general duty doctors.

Of course, the role of social workers cannot be denied as it is they who can impart the health education for the removal of stigma and the importance of early and regular treatment.

Early detection, prompt and regular treatment should be given priority over other factors to decrease the length of hospitalization.

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