

Teaching Materials and Services

Schieffelin Leprosy Research and Training Centre: Karigiri, Courses for 1997*

Course	Duration	Commencing Date	Fees		
			India Rs.	Saarc US \$	Other US \$
I COURSES RECOGNIZED BY THE GOVERNMENT OF INDIA					
1 Medical Officers' Course	6 weeks	Jan. 20–Mar. 1 Jul. 28–Sep. 6	1925	250	750
2 Nonmedical Supervisors' Course	3 months	Apr. 1–Jun. 30	1325	150	300
3 Physiotherapy Technicians' course	12 months	Jul. 1–Jun. 30	3000	275	700
4 Laboratory Technicians' Course	12 months	Jul. 1–Jun. 30	6000	300	750
5 Smear Technicians' Course	3 months	Jan. 13–Apr. 12 Sep. 8–Dec. 7	1500	175	350
6 Paramedical Workers' Course	6 months	Jul. 1–Dec. 31	1850	200	450
7 Shoe-Makers' Course	6 months	Jan. 2–Jun. 30 Jul. 1–Dec. 31	800	95	200
8 Diploma in Prosthetic & Orthotic Engineering	30 months	Jul. 1–Dec. 31	7500	600	1500
9 Ophthalmic aspects in leprosy	1 week	Mar. 3–8	700	85	185
10 Eye care in Leprosy	1 week	Sep. 8–13	700	85	185
II OTHER COURSES OFFERED BY THE INSTITUTION					
1 Medical Records Technologist	1 year	Jul. 1–Jun. 30	2575	250	600
2 Condensed Course in Leprosy	1 week	Nov. 3–8 Nov. 24–29	700	85	185
3 Refresher Course in Skin Smears	2 weeks	Apr. 21–May 3 Aug. 18–Aug. 30	1000	90	200
4 Ophthalmic Nursing care in Leprosy	2 weeks	May 19–31	1000	90	200
5 Research Methods in Leprosy	1 week	Nov. 10–15	700	85	185
6 Programme Management issues in Leprosy Control	1 week	Nov. 17–22	700	85	185
7 Training of Trainers	2 weeks	Mar. 17–29	1000	90	200
III IN-SERVICE TRAINING					
a) Inservice training in Med., Surgery Surgical Rehabilitation, Pathology, Lab. Technology, Ophthalmology & Epid. and Lep. Control	3 months	By arrangement	150	25 (per week)	25
		1 time payment for other amenities	100	35	7
b) Medical Record Keepers	2 months	By arrangement		Same as given above	
c) Basics of Physiotherapy in Leprosy	1 week	By arrangement		Same as given above	

* These courses are run every year, please check dates for 1998.

Course	Duration	Commencing Date	Fees		
			India Rs.	Saarc US \$	Other US \$
d) Medical Students Course	1 week	By arrangement		Same as given above	
e) Psycho-social aspects in Leprosy	1 week	By arrangement		Same as given above	

Facilities: Hostel: 60 men, 16 women & Guest house: Single & Double Rooms.

Courses: English fluency essential. Recognized by WHO and Indian Government (all paramedical technical courses are fully recognized by the Indian Government).

Mailing Address: Director or Registrar, Training Unit, S.L.R. & T. Centre, Karigiri, 632 106, N.A.A. Dist., Tamil Nadu, S. India.

Telephone: (0416) 74227, 74229, 74251; Telegram: 'LEPSEARCH' Vellore-7; Fax: 91-416-74274 or 32103

Contact Institution: Mr T. Jayarajan, Registrar, Schieffelin Leprosy Research & Training Centre, 632 106 Karigiri, Tamil Nadu, South India. Tel.: +91/41674227, +91/41674229, +91/41674221 (Director). Fax: +91/41632103, +91/41671274.

The London School of Hygiene and Tropical Medicine

In the context of professional partnership with the Special Programme for Research & Training in *Tropical Diseases* (TDR) issue No. 50 (June 1996) describes the main activities as follows:

The London School of Hygiene & Tropical Medicine has been a strong partner of TDR from the beginning, and staff across the School continue to be heavily involved in TDR's steering committees and in TDR projects overseas. Much of the collaboration has involved the School's strengths in laboratory research, clinical medicine, public health, epidemiology and social and economics sciences.

The School was founded in 1899, and now has four academic departments, Public Health & Policy, Epidemiology & Population Sciences, Medical Parasitology, and Clinical Sciences, with a total of 305 academic staff, of whom approximately 50% work on the tropical side. The School's mission is to contribute to the improvement of health worldwide and this is reflected in research which addresses major issues of public health in the UK, Europe and the tropics.

The School collaborates with over 300 institutions worldwide, and raises \$20 million annually through research grants and contracts. The School is keen for its overseas collaborations to result in institution building and capacity strengthening and it therefore maintains and develops long-term partnerships in research and training schemes such as those supported and encouraged by TDR.

Recent collaboration between the School and TDR is illustrated by the large-scale randomized, controlled trials of insecticide-treated nets (ITNs). Following collaborations by members of the Tropical Health Epidemiology Unit in field research in ITNs at the MRC Laboratories, The Gambia in the late 1980s, and preliminary discussions with TDR, a workshop was hosted by the School in 1991 to develop guidelines for the design of trials to assess the effect of the treated nets on child mortality. Draft project protocols were drawn up by six research groups and a further workshop was held in the School in 1992 to standardize the protocols as far as possible and finalize the designs. A coordinator, Dr Christian Lengeler, was appointed to the School for the four studies in Kenya, The Gambia, Ghana and Burkina Faso with financial support from ODA through TDR. The coordinator was initially responsible to the TDR Steering Committee on Applied Field Research in Malaria and later to the Task Force on Insecticide Impregnated Bednets and other Materials. The role of coordinator was crucial not only in assisting with the logistics of getting enough nets and insecticide to the trial sites in time for the initial distribution, but also in keeping the investigators in touch with other sites, implementing standard procedures where appropriate, and organizing football matches! In addition, a statistical epidemiologist from the School was attached to each site, to assist with aspects relating to data collection and management, and data analysis. A key role was also played by economists from the Department of Public Health & Policy in planning and supervising studies of cost-effectiveness and cost-benefit, and by entomologists from the Department of Medical Parasitology in advising on technical aspects of the intervention and monitoring of the vector.

During the progress of the trials, a number of workshops for investigators were held in Africa, covering economic issues, entomology and operational issues, and a final workshop was held in London in May 1995 to discuss strategies and methods for analysts. Since clusters of villagers were randomized to receive treated nets or no nets, the analysis of these trials has been based on the mortality rates in each cluster. The analysis of such community randomized trials presents interesting methodological problems which have been addressed by members of School staff, and which have wider application to trials of other interventions which are delivered to communities, such as improved treatment and diagnosis of sexually transmitted diseases (STD).

The School has a flourishing post-graduate teaching programme and offers Ph.D. training, 23 M.Sc. courses and a growing number of short courses. The M.Sc. programme is taught on a modular system which allows students great flexibility to choose units which reflect their training needs and interests. The student body form a truly international group, representing 89 countries in the current year. A further development to be promoted this summer is the opportunity for external participants to take individual units from the M.Sc. programme, as short courses. TDR has given training awards to many Ph.D. students over the years, and four Ph.D. are based on studies planned within the framework of the ITNs trials.

TDR has, on many occasions, encouraged the School to examine its research priorities and training portfolio. The close relationship between members of School staff and TDR continues to be fruitful and stimulating.

For further information write to: The Secretary, The London School of Hygiene & Tropical Medicine, Keppel Street, London WC1E 7HT, UK.

Illustrated history of tropical diseases, The Wellcome Trust, London

The Wellcome Trust brochure for the above title, edited by Professor F. E. G. Cox, Professor of Parasite Immunology, King's College, London, reads as follows:

'The discovery and investigation of tropical diseases has long fascinated scientists and non-scientists alike. This meticulously researched and richly illustrated book traces the history of humankind's understanding of these diseases from the earliest written records to the most sophisticated findings of today.

Tropical disease was first recognized as a separate branch of medicine at the turn of the century and this book emphasizes the spirit and personality of those individuals who devoted their lives to understanding these diseases and working out how to treat them.

The *Illustrated History of Tropical Diseases* has been published to mark the sixtieth anniversary of the founding of the Wellcome Trust, one of the world's major supporters of research into tropical disease and in the history of medicine.

Each of the book's 41 chapters is written by a scientific expert in the field, presenting a unique historical perspective and a real understanding of the conditions described. Written for a general scientific audience, each chapter includes a brief introduction into the aetiology of the disease and includes information on its current status and treatment. This unique work will appeal to everyone with an interest in tropical diseases and their treatment.'

It is published in hardback, has 454 pp and 488 colour, and black and white images. Copies of the above can be obtained from: Publishing Department, The Wellcome Trust, 210 Euston Road, London NW1 2BE, UK. Price: £35.00 plus postage and packing £5.00 (UK), £11.50 (EU), and £15.00 elsewhere.

New Manual on TB-HIV co-infection, WHO

Sir John Crofton, Emeritus Professor on Respiratory Diseases and Tuberculosis, University of Edinburgh, Scotland, has reviewed this new Manual:

'This manual provides a pocket-sized guide to the clinical management of tuberculosis, particularly

in patients suffering from co-infection with HIV. Designed for use by busy clinicians, the manual aims to promote the best possible diagnosis and treatment in low-income countries where the prevalence of TB and HIV infection is high, case loads are heavy, and laboratory support may be limited. With these needs in mind, the manual combines the latest scientific knowledge about these diseases with authoritative advice based on extensive field experience in several of the hardest hit countries.

Throughout the manual, tables, flow charts, lists of do's and don'ts, questions and answers, and numerous practical tips are used to facilitate quick reference and correct decisions. Information ranges from advice on how to distinguish TB from other HIV-related pulmonary diseases, through a coloured score chart to aid the diagnosis of TB in children, to the simple reminder that in sub-Saharan Africa, anyone with TB is in a high risk group for HIV. Though primarily addressed to clinicians working at district hospitals in sub-Saharan Africa, the manual is also suitable for use in areas of Asia and South America where the problem of TB and HIV co-infection poses a growing clinical challenge.

The manual has twelve concise chapters presented in a convenient spiral-bound format. Background information is provided in the first chapters, which summarize basic facts about TB, HIV, and HIV-related TB, and outline a framework for effective TB control. Diagnosis is covered in four chapters, which set out detailed principles and procedures for the diagnosis of TB in adults and in children, and for the diagnosis of HIV infection in adults and in children with TB. Chapter seven presents standardized TB case definitions, by site of disease, result of sputum smear, and by previous treatment, and explains how these case definitions allow categorization of patients for treatment purposes.

Extensive treatment guidelines are presented in chapters covering the treatment of TB patients, management of the side-effects of specific anti-TB drugs, and the management of other HIV-related diseases in TB patients. The manual concludes with a discussion of the importance of coordinated care in different settings, followed by advice on the prevention of TB, including the role of BCG, in HIV-infected individuals.'

The main chapter headings are as follows:

- Diagnosis of HIV infection in adults with tuberculosis: Clinical recognition; HIV testing; Counselling.
- Diagnosis of HIV infection in children with tuberculosis: Clinical recognition; HIV testing; Counselling.
- Standardized TB case definitions and treatment categories.
- Treatment of TB patients: Mode of action of anti-TB drugs; TB treatment regimens—new cases, retreatment cases, standard code for TB treatment regimens, recommended treatment regimens, and use of streptomycin and thiacetazone in areas of high HIV prevalence
TB treatment regimens; Use of anti-TB drugs in special situations: pregnancy, renal failure, liver disease; The role of adjuvant steroid treatment; Monitoring of TB patients during treatment; Response of HIV-positive TB patients to anti-TB treatment.
- Side-effects of anti-TB drugs: Prevention of side-effects; Where to manage drug reactions; When to stop anti-TB drugs; Side-effects of anti-TB drugs; Symptom-based approach to management of drug side-effects; Management of itching/skin rash; Desensitisation; Management of hepatitis.
- Management of other HIV-related diseases in TB patients: Sexually transmitted diseases; Skin and mouth problems; Gastrointestinal problems; Respiratory problems; Neurological problems; Fever; Other HIV-related problems which may occur in TB/HIV patients.
- Coordinated care in different settings.
- Prevention of TB in HIV-infected individuals.

TB/HIV, A Clinical Manual by A. D. Harries and D. Maher, with contributions from M. C. Raviglione, P. Chaulet, P. P. Nunn and E. van Praag. 1996, 135 pages (available in English; French and Portuguese in preparation). WHO/TB/96.200; order no. 1930088. Sw.fr. 12.–/US \$10.80. In developing countries: Sw.fr. 8.40.

Apply to: WHO, Distribution & Sales, 1211 Geneva, Switzerland.

Dermatologists in the National Leprosy Eradication Programme, India

In *Leprosy; a glimpse at the changing scenario* published by Acworth Leprosy Hospital for Research, Rehabilitation and Education in Leprosy and Bombay, India, Dr R. Ganapati comments as follows:

'It is interesting to note that in spite of the low endemicity reported in many areas the dermatologists are encountering a large number of leprosy patients. Besides all clinical types, they seem to be dealing with even histoid forms of lepromatous leprosy which have a great transmission potential. The Government of India has done an excellent job under NLEP to make MDT available to almost all identified patients in most parts of the country. They have taken the help of several leading NGOs, both Indian and international, in this massive undertaking. The fact that progressive cases of leprosy are still reporting to the dermatologists calls for more vigorous involvement of the dermatologists of the country in the NLEP. In fact, if one can manage to count all the patients being managed by the dermatologists all over the country, the number will still be phenomenal, justifying the group of dermatologists to be considered as a major NGO. However, this group at present is not cohesive as far as leprosy management is concerned.'

For further information write to: Dr R. Ganapati, Bombay Leprosy Project, Vidnyan Bharan, 11, V.N. Purav Marg, Sion-Chunabhatti, Mumbai 400 022, India.

International Federation of Anti-leprosy Associations (ILEP)—membership list

Here follows the membership list of ILEP, dated December 1996:

ILEP Secretariat and Co-ordinating Bureau, 234 Blythe Road, London W14 0HJ, United Kingdom. Tel.: 44/171-602.69.25. Fax: 44/171-371.16.21. E-mail: 100450.1011@compuserve.com.

AIFO, Associazione Italiana Amici di Raoul Follereau, 4 via Borselli, 40135 Bologna, Italy. Tel.: 39/51-44.34.02 and 39/51-61.45.437. Fax: 39/51-43.40.46. E-mail: aifo@iperbole.bologna.it.

ALES, Aide aux Lépreux Emmaüs-Suisse, 9 Spitalgasse, 3011 Berne, Switzerland. Tel.: 41/31-311.77.97. Fax: 41/31-318.08.41.

ALM, American Leprosy Missions, 1 Alm Way, Greenville SC 29601, USA. Tel.: 1/864-271.70.40 and 1/800-537.76.79. Fax: 1/864-271.70.62. E-mail: amlep@leprosy.org.

CIOMAL, Comit Exécutif International de l'Ordre de Malte pour l'Assistance aux Lépreux, 3 place Claparède, 1205 Geneva, Switzerland. Tel.: 41/22-346.86.87. Fax: 41/22-347.08.61.

DAHW, Deutsches Aussätzigen-Hilfswerk, P.O. Box 9062, 97090 Würzburg, Germany. Tel.: 49/931-79.480. Fax: 49/931-79.48.160.

DFB, Damien Foundation Belgium, Boulevard Léopold-II 263, 1081 Brussels, Belgium. Tel.: 32/2-422.59.11. Fax: 32/2-422.59.00. E-mail: damien@pophost.eunet.be.

FF, Association Française Raoul Follereau, BP No. 79, 75722 Paris Cedex 15, France. Tel.: 33/1-53.68.98.98. Fax: 33/1-48.56.22.22. E-mail: tom75@infonie.fr.

FL, Fondation Luxembourgeoise, Raoul Follereau, 151 avenue du 10 Septembre, 2551 Luxembourg, Luxembourg. Tel.: 352/44.66.06 and 352/45.78.07. Fax: 352/45.96.53.

FO, Foperda, Boulevard Léopold-II 263, 1081 Brussels, Belgium. Tel.: 32/2-422.59.39. Fax: 32/2-422.59.00.

HF, Hartdegen Fund, Reppersgergstrasse 66, 66119 Saarbrücken, Germany. Tel.: 49/681-346.18. Fax: 49/681-374.174.

ICLL, Institut Cardinal Léger Contre la Lèpre, 130 avenue de l'Épée, Montreal H2V 3T2, Canada. Tel.: 1/514-495.2409. Fax: 1/514-495.2059.

LEPRA, British Leprosy Relief Association, Fairfax House, Causton Road, Colchester CO1 1PU, Great Britain. Tel.: 44/1206-56.22.86. Fax: 44/1206-76.21.51. E-mail: 100657.2556@compuserve.com.

LWM, Leonard Wood Memorial, 11600 Nebel Street, Suite 210, Rockville MD 20852, USA. Tel.: 1/301-984.1336. Fax: 1/301-770.0580.

NSL, Nederlandse Stichting voor Leprabestrijding, Postbus 95005, 1090 HA Amsterdam, Netherlands. Tel.: 31/20-59.50.500. Fax: 31/20-668.08.23. E-mail: infolep@antenna.nl.

PLF, Pacific Leprosy Foundation, Private Bag 4730, Christchurch, New Zealand. Tel.: 64/3-3663.685. Fax: 64/3-3667.771.

RD, Red Barnet, Rantzausgade 60, 2200 Copenhagen N, Denmark. Tel.: 45/35-36.55.55. Fax: 45/31-39.11.19. E-mail: redbarn@inet.uni-c.dk.

SF, Santorio San Francisco de Borja, 03791 Fontilles Alicante, Spain. Tel.: 34/63-51.15.83 and 34/65-58.33.50. Fax: 34/65-58.33.76. E-mail: fontilles@dirac.es.

SJ, Sasakawa Memorial Health Foundation, The Sasakawa Hall, 3-12-12 Mita—Minato-ku, Tokyo 108, Japan. Tel.: 81/3-34.52.82.81. Fax: 81/3-34.52.82.83.

SLC, Le Secours aux Léproux, 1275 rue Hodge, Bureau 125, Montreal H4N 3H4, Canada. Tel.: 1/514-744.31.99. Fax: 1/514-744.90.95. E-mail: secours-lepreux@msn.com.

TLMI, The Leprosy Mission International, 80 Windmill Road, Brentford, Middlesex TW8 0QH, Great Britain. Tel.: 44/181-569.72.92. Fax.: 44/181-569.78.08. E-mail: tlmint@cityscape.co.uk.