

Teaching Materials and Services

LEPRA/TM Ophthalmic Course, Karigiri, India 1998

The 13th annual 5-day ophthalmic teaching module was held at the Schieffelin Leprosy Research and Training Centre, Karigiri from the 2nd to 7th March 1998. The course, which was sponsored jointly by LEPRA through the Barclays Bank/English Speaking Union International Training Scheme and The Leprosy Mission, was designed to give instruction to leprologists on the detection, prevention and management of the ocular complications of leprosy by means of a series of lectures and clinical and surgical demonstrations, augmented by videos and a field trip.

Teaching included formal didactic presentations on the basic anatomy, physiology and pathology of the eye with a special emphasis on leprosy: in addition, there were lectures on the pathogenesis and treatment of corneal ulcers, rehabilitation, community ophthalmology and global aspects of blindness in the disease.

A preference was given this year to clinical demonstrations and discussions dealing with important aspects of ocular leprosy such as the diagnosis and management of lagophthalmos, intra-ocular inflammation and infiltrative lesions, and 'hands on' teaching methods were employed more than in previous years.

The course was attended by seven sponsored participants working in India, and was organized by Dr Ebenezer Daniel of Karigiri, with the assistance of members of the Staff of the Centre. Mr Timothy ffytche from St Thomas's Hospital, London and Dr Kirsteen Thompson from Purulia, West Bengal were invited members of the Faculty.

The Director of Karigiri, Dr P. S. S. Sundar Rao, is to be thanked for his continued support for this important and popular contribution to teaching.

Research synthesis: its importance in developing countries

The following article by Helga Patrikios, Medical Librarian, University of Zimbabwe, appeared in volume 8, number 1, April 1997 of *Liaison*, published by WHO.

As potential users and as people working with health information, we all need to believe that the decisions made about the health care dealt out to us are based on the best available scientific evidence. Yet, most doctors agree on one thing: that the current volume of medical information is unmanageable; they report that they do not know about important advances, feel overwhelmed by new scientific information, are not good at finding new information and do not know how to evaluate it when it is found. Many of them base their decisions on their own opinions or those of colleagues who are no more knowledgeable than they. One study showed that practitioners often 'don't know what they don't know'. Richard Smith, the Editor of the *British Medical Journal*, reporting on these studies, summarised the situation this way: ... 'experienced doctors use about two million pieces of information to manage their patients' ... Unfortunately some of the information in doctor's heads is out of date and wrong, new information may not have penetrated ...' (Smith R. What clinical information do doctors need? *BMJ* 1996; 313: 1062–8).

That's why the concept of research synthesis may be the most significant trend for medical librarians since information technology (PCs, CD-ROM, e-mail and all that) came into our lives. The most surprising thing about research synthesis is that its principles were not applied to medical practice long since.

Research synthesis is the relatively recent response to a decades-old and rapidly worsening problem for clinicians and policy makers: how to manage a biomedical knowledge base that is presently doubling itself every 19 years (and in the case of HIV/AIDS every 22 months.) It is now widely accepted that reviews of research based on studies using randomized controlled trials are what is needed; these trials are generally agreed to be the best research method on which to base decisions. In effect, doctors have now progressed beyond the realization that they cannot cope with the growth in the literature; the Cochrane Collaboration and the systematic reviews of the literature being made in key areas of medical practice are acknowledgements of the need for rational solutions to the problem of information management.

Inevitably as research synthesis gains ground in continuing medical education and medical school curricula, criticisms of the concept are raised. Controversies are arising around reliability of the meta-analyses of pooled clinical trials of similar design; there is evidence that they are not always reliable. (A more fundamental question is also raised: whether EBM can be applied in a *population-health* ethic of efficiency, or whether it will be limited to an *individual-patient* ethic of effectiveness). At this point, the usefulness of research synthesis in poorer countries where population-health is the governing criterion may be questioned. The question should perhaps be reversed: why should every possible effort *not* be made to bring the benefits of research synthesis to the poorer countries? There are even fewer resources to waste on interventions that are not effective. Problems of accessing, evaluating and managing information are even more acute in situations where the pressure on health services is acute and libraries are impoverished. In such context, syntheses and summaries of critical information are essential. How systematic reviews are applied in making decisions on cost-effective interventions is a matter for national policy makers, who ought to have access to the best evidence available.

Many groups in the Cochrane Collaboration are publishing relevant reviews, including the Infectious Diseases Group, the Acute Respiratory Group and the Pregnancy and Childbirth Group. Cochrane Parasitic Diseases Group (CPDG) reviews are due to be published soon and others of relevance to developing countries should follow. Printed digests with a regional or national focus could be an economical way to bring summaries of salient reviews to health professionals whose access to electronic sources is still limited and these are something all of us should consider, whether we are librarians, practitioners or researchers.

The cooperation of medical schools, ministries of health, health information providers and medical librarians should eventually enable health professionals and students everywhere to apply the principles of research synthesis to their work—using whichever format or media are found to be appropriate, affordable and user-friendly. (At this Medical School we've started by subscribing to the BMJ's journal *Evidence Based Medicine*, which looks like a good buy at the institutional price of £80 for 24 issues).

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WHO International Exchange of Health Literature

The following reminder has been taken from a back number of *Liaison*: Newsletter of the WHO Office of Library & Health Literature Services.

'We wish to remind you of this exchange scheme which has been run by the WHO Library for the last thirty years; it has 216 members in 69 countries. It acts as a clearinghouse for libraries who wish to dispose of health science and related publications, including books and periodicals and those who need such items. Libraries with material they wish to give away send us a list of what they have to offer. We

duplicate this list and send it to all members. Librarians then can contact each other directly to obtain specific items on the list. The only obligation that we ask is that libraries in the developed world pay the postage for material going to developing countries. Each member can request or donate material as they wish. We do suggest that lists of books should not include out-of-date material: books should not be more than five years old and periodicals not more than ten. Last year we distributed 200 duplicate or superseded books and 2500 issues of periodicals from our own collection. If you are interested in joining the scheme please contact us at the following address: International Exchange of Health Literature, WHO Library, 1211 Geneva 27, Switzerland, and we will gladly send you further information.'

TALC: 'Clinical Tuberculosis' by Crofton, Horne & Miller—now available in 18 different languages

The standard description of this book from *Teaching Aids at Low Cost* (TALC, PO Box 49, St Albans, Herts AL1 4AX, (United Kingdom) reads as follows:

'This book is sponsored by the International Union against Tuberculosis and Lung Disease and by TALC. A low cost edition for developing countries has been financially supported by the World Health Organization and other bodies. It is written primarily as a practical guide for busy non-specialist doctors working in areas with few resources. The language is simple and there is an extensive glossary. The book can therefore be useful to Health (Medical) Assistants and senior nurses with a limited knowledge of English. It can also serve as a helpful reference for younger doctors in developing countries who now have less experience of tuberculosis.

The book covers diagnosis and treatment of all types of tuberculosis, pulmonary and non-pulmonary, both in adults and children. It deals fully with the effects of HIV infection on the disease and describes the essential elements of a National Tuberculosis Control Programme. There are many line drawings and flow charts as aids to training, learning and clinical practice. 'Stories' about individual patients highlight practical points.

The three authors have had many years experience of dealing with tuberculosis and of teaching both undergraduates and postgraduates. They have advised in many countries in Asia, Africa and South America. The final text incorporates constructive comments on an earlier draft by experienced consultants from the IUATLD, WHO and consultants working in several countries in Asia, Africa and the Pacific. The book therefore represents much collective wisdom.'

Since publication a few years ago the English version has had an astonishing circulation worldwide, with many calls for translation. Very largely due to the vast network of contacts known to Professor David Morley in TALC, 18 translations have now been produced (or are in progress and soon to appear). The list is as follows.

CLINICAL TB TRANSLATORS/PUBLISHERS

India	CBS Publishers and Distributors 4596/1-A 11 Darya Ganj New Delhi 110002 India	Turkish	Dr Elif Dagli Associate Professor of Paediatrics Marmara University Altunizade 81190 Istanbul Turkey
Chinese	Chinese Anti-Tb Association 5 Dong-Guang Hu-Tong Beijing 10035, China	Italian	Dr Stephano Nardini Ospedale di Bormio e Sondala Presidio Multizonale di Riabilitazione, via Zubiani 33 23039 Sondalo, Italy

French	IUATLD 68 Boulevard Saint-Michel 75006 Paris France	Croatian	IBIS Grafika doo (Mr Kresimir Krmic) IV Ravince 25 1000 Zagreb Croatia
Portuguese	Editora Guanabara Koogan Tv do Ovidor 11 Rio de Janeiro RJ, Brazil 20040-040	Urdu*	Dr Ghazala Ansari Director/Chest Specialist Ojha Institute of Chest Diseases University Road 75270 Karachi 32 Pakistan
Spanish	Imprimerie CMI Zl de Mitry-Compans 25 rue Marc Seguin 77290, Mitry-Mory France	Mongolia	Dr G Tsogt Mongolian Anti TB Assoc PO Box 90 Ulaan Baatar-49 Mongolia
Vietnamese	National Institute of TB & Respiratory Diseases 120 Hoang Hoa Tham Hanoi Vietnam	Russian	Prof A G Khomenko Central Tuberculosis Research Inst 2 Yauzskaya Alley Moscow 107564, Russia
Thai	Prof Vichitbandha Faculty of Medicine Thammasat University Ransit Campus Klong-Luang Prathum-Thanse 12120 Thailand	Arabic (ACML)	Dr Y Al-Sharrah Assistant Secretary General Arabic Center for Medical Literature PO Box 5225 Safat 13053 Kuwait
Farsi (Iran)	Dr H Heidarnajad PO Box 51335-1618 Tabriz Iran	Indonesian*	EGC Medical Publisher PO Box Jakarta 10042 Indonesia
Romanian*	Dr Traian Mihaeseu EDIT-DAN Publishing Co PO Box 209-6600 Iasi, Romania	Bengali*	Dr Zafrullah Chowdhury Gonoshashteya Kendra (GK) PO Nayarhar via Dharmrai Dhaka, Bangladesh

*Indicates translations in progress.

Further information: TALC, PO Box 49, St Albans, Herts, AL1 5TX, United Kingdom. Tel: +44(0)1727 853869 Fax: +44(0)1727 846852

Topics in International Health: 'CD-ROMs tackle global diseases': The Wellcome Trust, London, UK, 24 April 1998

The Governors and Director of the Wellcome Trust (183 Euston Road, London, NW1 2BE, UK) invited over 100 people, most of them involved in tropical or third world medicine, to a meeting in London on 24 April, 1998, to celebrate the launching of an important new series of educational CD-ROMs (Compact-Disc-Read Only Memory), 'Topics in International Health'.

Those invited included representatives of the London medical schools, the schools of tropical medicine in London and Liverpool, The Wellcome Trust, The Department of Health, The National Institute for Medical Research, the Health Education Authority, the Royal Society of Medicine, the UK Cochrane Centre, the Department of International Development, The British Medical Association, the Royal College of Physicians of London, The Hospital for Tropical Diseases, INASP-Health and CAB International, together with other agencies and individuals involved in the production and distribution of appropriate health education in the UK to lesser developed countries.

Following the opening address by Dr Bridget Ogilvie, Director, the Wellcome Trust, Mr Paul Boateng, member of Parliament and Parliamentary Under-Secretary of State for Health, gave an address in which he emphasized the measures currently being taken by the Government to alleviate poverty in third world countries, whilst at the same time supporting initiatives which tackle the burden of tropical diseases.

The first four CDs on malaria, sexually transmitted diseases, trachoma and sickle cell disease, were published in April 1998. Four more, on leprosy, tuberculosis, diarrhoeal diseases and schistosomiasis, are due in the autumn of 1998 and two more, on AIDS/HIV and nutrition in 1999. The series is intended for use by medical and life science students, lecturers, health care professionals, academics and researchers in both developed and under-developed countries. It can be run on Windows 3.1, Windows 95 or Windows NT.

To disseminate these materials as widely as possible, the Wellcome trust is working with CAB International, a not-for-profit organisation with world wide publishing expertise. CABI's '*Information for Development*' programme specializes in disseminating information in developing countries.

Further Information: Topics in International Health, The Wellcome Trust, 183 Euston Road, London NW1 2BE. Tel: 0171 611 8888/Direct 8777. Fax 0171 611 8545/Direct: 8237. Email c.griffiths@wellcome.ac.uk or *CAB International* a) UK. Wallingford, Oxon, OX10 8DE, United Kingdom. Tel: 44 (0) 1491 832111. Fax: 44 (0) 1491 826090. Email publishing@cabi.org b) USA. 198 Madison Avenue, New York, NY10016-4314, USA. Tel: 1 212 726 6490/6491. Fax: 1 212 686 7993. Email cabi-nao@cabi.org

TALC, UK: Leprosy in Childhood: colour transparency teaching set with text

The original set of 24 slides and text, issued in 1979, sold 5,681 copies to virtually all leprosy-endemic countries. A revised set sold an additional 687 between 1990 and 1998, bringing the total to 6,368. The text has now (1998) been revised and up-dated, to include recent WHO recommendations on short-course chemotherapy. Apply TALC *Teaching Aids at Low Cost*, PO Box 49, St Albans, Herts AL1 4AX, United Kingdom. Fax (0) 727 46852.

ALERT Training Calendar 1999

January 25–February 26

Prevention and management of disabilities

Target group: physiotherapists, occupational therapists, podiatrists as well as experienced leprosy workers involved in POD. Emphasis on both patient care (early detection of nerve deterioration, health promotion, problem solving) and programme management (POD management, home based care and rehabilitation).

March 8–March 19

Introduction to leprosy for physicians

Highly recommended for the participants in the following 'Management of Combined Programmes' course who need to refresh their knowledge of clinical leprosy. The course can also be taken on its own

by physicians responsible for diagnosis, treatment and care of patients with leprosy in either a hospital or a control programme setting.

March 22–April 16

Management of combined leprosy and tuberculosis control programmes for physicians

Target group: experienced physicians responsible for managing a leprosy and TB control programme at the regional level or above. Emphasis on programme management: needs analysis, action plan, implementation of activities, supervision, evaluation, management of POD. A brief review of the essentials of TB is included, but leprosy expertise is a prerequisite. Participants lacking the latter should also take the preceding ‘Introduction to leprosy’ course.

May 10–May 27

Essentials of leprosy and tuberculosis for administrative and programme support staff

Target group: administrative and managerial staff without a medical background, working in leprosy and TB programmes and donor agencies. Objectives: to gain a better understanding of the two diseases, to communicate more effectively with the medical staff, and to contribute more efficiently in decision making and priority setting.

June 7–June 16

Leprosy for researchers and scientists

Course aimed at scientists who are familiar with leprosy mainly in a laboratory or other research setting or as figures on a computer screen, to show them what leprosy means for the patient, clinically as well as psychologically and socially.

September 13–October 22

Essentials of leprosy and tuberculosis for physicians

Target group: physicians with limited experience in either leprosy or TB. Emphasis on clinical aspects of leprosy and TB, individual patient care and its application in the context of a combined programme, with an introduction to health promotion and managerial issues, paying special attention to POD and supervision.

November 8–November 19

Introduction to leprosy for senior field staff

Highly recommended for the participants in the following ‘Management of Combined Programmes’ course who need to refresh their knowledge of clinical leprosy. The course can also be taken on its own.

November 22–December 17

Management of combined leprosy and tuberculosis control programmes for senior field staff

Target group: experienced nurses, paramedical workers or supervisors responsible for leprosy and TB control at the district (or equivalent) level. Emphasis on planning, implementation, supervision and evaluation of control activities, with special attention for POD, health promotion and support functions. A brief review of the essentials of TB is included, but leprosy expertise is a prerequisite. Participants lacking the latter should also take the preceding ‘Introduction to leprosy’ course.

For further information, please contact: ALERT Training Division, P.O. Box 165, Addis Ababa, Ethiopia. Tel: 251-1-711524 or 251-1-712792, Fax: 251-1-711199 or 251-1-711390, Email: ahri@telecom.net.et