

Editor's Choice

In the last issue of *Leprosy Review* we were pleased to carry a first report on the 15th International Leprosy Congress in Beijing. In this issue we not only have the reports from all the workshops, but also pick up themes from the conference in both the review article and the Letters to the Editor. 'New partnerships' was a congress buzz word, emphasizing the need for the leprosy world to look outwards for new ideas and alliances. We have started to look outwards in *Leprosy Review* by reprinting a review article on disabilities (p. 3). Professor Oliver puts disabilities in a theoretical framework and illuminates wider areas of disability research that are relevant to leprosy. Oliver also echoes another conference theme when he notes that the experience of disabled people should influence research and the need to listen to their voices.

The Letters section picks up the discussion about the recent World Health Organisation recommendations on the length of treatment for multibacillary patients, with thoughtful contributions from workers in Nepal. In another letter, Keith Waddel raises the issue of intraocular lens implantation for leprosy patients. I hope that his letter will generate a response both in the columns of *Leprosy Review* and in stimulating field-based research.

Two articles illustrate the continuing need to educate people about leprosy even in endemic areas. Sadly in Southern India, 23% of teachers considered that immoral conduct caused leprosy and 63% thought that leprosy patients should be segregated. However, in Bangladesh, although there are also high levels of ignorance and prejudice, health education improved attitudes towards leprosy and in an area that had received health education 78% of respondents would buy from a shopkeeper who had leprosy.

The paper by Samant *et al.* (p. 10) shows that 13–20% of patients deteriorate after they have completed their MDT. The high levels of abnormalities in nerves in the leg and foot would not surprise Kazen, who contributes a clear article on the management of plantar ulcers (p. 63). He points out that surgery is only one part of ulcer management, far more important are the social factors, patients doing self care and joining self care groups.

I hope you will all enjoy the mix of neurology, surgery, immunology and social science in this issue.

The September issue will be themed around leprosy elimination campaigns and we are calling for papers and research on LECs for that issue. I look forward to your responses.

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