

Editor's Choice

This issue has a healthy mixture of items. There are three papers that we were unable to squeeze into the leprosy elimination campaign (LEC) issue. The paper from West Bengal (p. 71) in which 8000 new cases were detected in an 8-day LEC is a striking example of how many undetected cases there are in some parts of India. It will require considerable effort for many years to continue detecting and treating new cases. By contrast, a LEC in Amazonas, Brazil (p. 77) did not reveal large numbers of undetected cases. Amazonas still has a high leprosy prevalence rate and I wonder what the differences are between Amazonas and West Bengal that produce such different results in their LEC campaigns. We conclude the LEC material with a colourful account of the media activities in the Nepal LEC (p. 62). A wide range of activities were used to raise awareness about leprosy including using celebrities as well as people affected by leprosy and talking about leprosy with humour. I hope readers enjoy the campaign theme song. It will be interesting to go re-survey people in Nepal to see whether the campaign has had a lasting effect.

Do we need a label for patients who have had leprosy? Wim van Brakel and P. K. Gopal (p. xx) argue against the notion and especially that we should not be using the term Pal as shorthand for person affected by leprosy. For many people with disabilities the origin is irrelevant.

Detecting exposure to leprosy remains a challenge. Joe LeMaster and Paul Roche (p. xx) discuss the possibilities and difficulties of producing and assessing the new skin test antigens. In Ethiopia, the detection of patients by health care workers is a priority and Paul Saunderson and Guido Gronen (p. 34) show that the presence of any two of five cardinal signs of leprosy can be used. These suggestions are however probably very location specific and other countries should be encouraged to produce their own diagnostic criteria.

We also publish another report from the Bangladesh Acute Nerve Damage Study. These results show much nerve damage continues to occur, 36% of patients had an episode of acute nerve function impairment. Of these, 86% were silent. This is a very salutary reminder of the need for regular nerve function testing if nerve damage is to be detected at a stage when it is still treatable.

Last year the topic for the Lepra medical student essay competition was 'A woman with leprosy is in double jeopardy'. We had such good entries that we awarded a joint first prize. We plan to publish both essays to keep women's issues at the forefront and you can find the essay by Mathew Shale on p. 5.

DIANA N. J. LOCKWOOD