

BOOK REVIEWS

Epidemiology of Leprosy in Relation to Control. Report of a WHO Study Group. WHO Technical Report Series 716. Geneva: World Health Organization, 1985. Softbound, 60 pp., Swfr.6.

A WHO Study Group on Epidemiology of Leprosy in Relation to Control met in Geneva from 7 to 11 November 1983. The objectives of the meeting were: 1) To review information on the epidemiology of leprosy. 2) To recommend methods of epidemiological evaluation and to identify predictors of trends in leprosy control programs. 3) To define and recommend simple and standard operational indicators in leprosy control programs as part of general health activities based on the primary health care approach. 4) To identify further areas for research into the epidemiology of leprosy, particularly the risk factors for infection and disease occurrence. 5) To identify areas for health services research in relation to leprosy control within the framework of the primary health care system.

The meeting was opened by Dr. H. Sarricq, Chief, Leprosy, on behalf of the Director-General of WHO. He noted that the struggle against leprosy had reached an important crossroad. Although the emphasis on the primary health care approach calls for procedures to be simplified as much as possible, an important challenge has to be faced: it is necessary to change from a relatively simple strategy for leprosy control based on chemotherapy with dapsone to a more complex one involving multidrug therapy.

It has never been clear whether the strategy for leprosy control based on secondary prevention had an epidemiological impact. While there is continuing progress in the expansion of leprosy control programs, the implementation of multidrug therapy makes it even more necessary to monitor the epidemiological impact of control procedures. It is also necessary to define some new indicators for continuous operational evaluation in the new context of multidrug therapy. There is, therefore, an urgent need for recommendations to be made on practicable methods for epidemiological and oper-

ational monitoring and evaluation for leprosy control programs.

The objectives of leprosy control are threefold: 1) to interrupt transmission of the infection, thereby reducing the incidence of disease so that it no longer constitutes a public health problem; 2) to treat patients in order to achieve their cure and where possible, complete rehabilitation; and 3) to prevent the development of associated deformities.

In recent years, leprosy control programs have been faced with the major problem of increasing secondary and primary resistance of *Mycobacterium leprae* to the drug dapsone. In order to cope with this problem a WHO Study Group on Chemotherapy of Leprosy for Control Programmes that met in 1981 recommended multidrug regimens for both multibacillary and paucibacillary patients. This essential change in the strategy of leprosy control has now been generally endorsed by the governments of countries where leprosy is endemic, by international voluntary organizations, and by bilateral agencies that support leprosy control.

While the progress that has been made by the Scientific Working Group on the Immunology of Leprosy (IMMLEP) toward its objective of developing a leprosy vaccine of high effectiveness is encouraging, it is evident that the classical strategy of leprosy control based on early detection and effective chemotherapy will remain important for many years.

Over the past 20 years, good data sets have been collected in several areas where leprosy is endemic around the world. Careful analysis of these data should improve existing knowledge of the natural history of the disease.

In addition, and again as a result of the research efforts of IMMSEP, improved methods for assessing immune responses to *M. leprae* based on serological and/or skin tests will probably be available soon. These tests have considerable potential for use as indicators of subclinical infection and as objective criteria for the diagnosis and classification of the disease. They should help to provide an improved understanding of

the dynamics of leprosy infection and disease, and should also help in the identification of risk factors, for example, in relation to social and economic aspects.

The Study Group reviewed information accumulated during recent years on both descriptive and analytical aspects of leprosy epidemiology in various contexts, including the results from various interventions such as chemotherapy and BCG immunization. It also reviewed the immunological methods that might be used for epidemiological studies. The Study Group made a detailed assessment of indicators that might be used to measure the epidemiological impact of control methods and trends in disease dynamics, as well as operational indicators to monitor control activities.

After reviewing various epidemiological and operational indicators, the Group proposed a few simple essential measures as a minimum requirement for all leprosy control programs based on multidrug therapy. The Group also defined an additional set of indicators that should be used whenever possible. The need for the standardization of both terminology and indicators was also discussed.

The Group acknowledged that large gaps still exist in our knowledge of leprosy epidemiology and made recommendations for further research, particularly health services research, aimed at resolving some of the important remaining questions.—(From the Report)

[The report (1985, 60 pp., softbound, price Sw.fr. 6) is available from WHO, Geneva, Switzerland.]

Juscenko, A. A., ed. *Aktualnye Voprosi Leprologii*. [*The Problems of Today in Leprology*.] Astrakahn, U.S.S.R., 1984, 171 pp., in Russian. Includes English summaries for each article and an author and subject index in both Russian and English.

This slim volume contains a great deal of interesting work being done by our Russian colleagues in the field of leprosy. We are all indebted to the editor, Dr. Juscenko, for translating the summary of each article into English, a time-consuming but invaluable effort. These summaries can be found in the Current Literature section of this issue of the JOURNAL.—RCH