

NEWS and NOTES

This department furnishes information concerning institutions, organizations, and individuals engaged in work on leprosy and other mycobacterial diseases, and makes note of scientific meetings and other matters of interest.

Belgium. *Prof. F. Portaels honored.* Le Prof. Portaels a bénéficié en 1990 d'une bourse Fulbright qui lui a permis de séjourner 4 mois aux Etats-Unis (Université d'Hawaii et Armed Forces Institute of Pathology, Washington, D.C.). Cette bourse lui a été octroyée dans le cadre de l'échange instauré entre l'Université d'Hawaii et la Belgique, à l'occasion du centième anniversaire du décès du Père Damien.

Au cours de ce séjour elle a donné de nombreuses conférences sur la lèpre, la tuberculose, les mycobactéries atypiques et sur les relations entre le SIDA et les mycobactéries. Elle s'est également familiarisée avec les techniques modernes de diagnostic précoce des maladies infectieuses. Plusieurs projets de recherches ont été mis en route; ils permettront une collaboration étroite entre l'Université d'Hawaii, l'Armed Forces Institute of Pathology et le laboratoire de mycobactériologie de l'Institut de Médecine Tropicale.—Ann. Soc. Belg. Med. Trop. 71 (1991) 74

India. *Bombay Leprosy Project starts integrated rehabilitation clinic for leprosy patients.* As a joint venture Bombay Leprosy Project (BLP) opened its clinic for screening leprosy patients for integrated rehabilitation in collaboration with the Vocational Rehabilitation Centre for Handicapped (VRC), Government of India, ATI Campus, Sion-Chunabhatti, Bombay, on 1 May 1991. The fortnightly clinic will function on the premises of VRC.

The inaugural function was performed by the Chief Guest Rotarian Manohar Advani, Past President, Rotary South and Director General (retd.), Senior Volunteer Programme (International; India Chapter). Dr. R. Ganapati, Director, BLP, presided. Mr. S. T. Wankhade, Superintendent, VRC, welcomed the gathering and Mr. G. T. Matta, Rehabilitation Officer, BLP, introduced

the chief guest. Dr. Ganapati mentioned that this clinic, unique of its kind, will help to screen leprosy patients referred for integrated training and rehabilitation at the VRC and thereby eliminate stigma. Mr. Advani announced that his organization will arrange for a trip of handicapped patients, including leprosy sufferers, to Shiridi and also organize a talent competition for such patients. Mrs. Shashi Advani distributed gifts received from Hungary to about 50 leprosy patients. Mr. P. V. Purandare proposed a vote of thanks.—Materials received from R. Ganapati

Dr. Kiran Katoch receives Dr. C. G. S. Iyer Oration Award 1989. Kiran Katoch, M.D., Head, Medical Unit I, Central JALMA Institute for Leprosy (ICMR), Agra, delivered the 1989 Dr. C. G. S. Iyer Oration Award lecture at Calcutta on the subject of "Studies in the therapy of leprosy and cardiovascular involvement in leprosy." The award citation reads as follows:

"The Dr. C. G. S. Iyer Oration Award was instituted by Dr. M. S. Nilakanta Rao in memory of Dr. Iyer, a distinguished leprologist, to be awarded to a scientist below 40 years of age in recognition of research work on leprosy.

"The Award for 1989 is being presented to Dr. Kiran Katoch, Assistant Director, Central JALMA Institute for Leprosy, Agra, for her studies on treatment of leprosy and cardiac involvement in leprosy.

"Dr. Katoch's studies on the treatment of leprosy have provided definite information relevant to duration of treatment and the regimens for paucibacillary leprosy. Her observations are that treatment for 6 months with multidrug therapy (MDT), as recommended by WHO, is inadequate. The regimen proposed by her includes supervised administration of rifampin 600 mg once a month for 6 months, and unsupervised daily administration of dapsone 100 mg for 1 year. Initial intensive therapy with daily rifampin 600 mg for seven days in the first month, followed by monthly rifampin for the next five months, did not offer any significant advantage.

"In the case of multibacillary leprosy, Dr. Katoch has proposed a modified cost effective regimen. Dr. Katoch has also demonstrated the usefulness of pyrazinamide against persisters in leprosy, but the optimum duration of treatment is under investigation.

"Leprosy has been usually considered as a disease of skin and nerves. Dr. Katoch and her group has been consistently pursuing investigations on the systemic involvement in leprosy. Their study on electrocardiographic investigations of leprosy patients has conclusively shown that abnormalities of cardiac rhythm and conduction are common in extensive forms of leprosy. This work has since been validated by several investigators."

December 1991 Workshop to be held at Dhoolpet. Dhoolpet Leprosy Research Centre is organizing a two-day workshop cum training program on reversal reactions and relapse after multiple drug therapy (MDT) in leprosy on 9 and 10 December 1991 at Hyderabad. Over 200 doctors involved in leprosy are expected to attend. In addition, participants from the U.K. and Holland have also confirmed their participation. The subjects to be covered include: clinical aspects of relapse and reaction after MDT and their management, immunology and immunopathology of reversal reactions, other aspects of leprosy neuritis, other neuropathies, and application of polymerase chain reaction (PCR) techniques. For further information contact: Dr. J. N. A. Stanley, Dhoolpet Leprosy Research Centre, Karwan, Hyderabad 500006, India. Telephone 0842-42326.—Materials received from Dr. Stanley.

Drs. Saha and Rao receive International Mitsuda Award. As winners of the International Mitsuda Award, Dr. Kunal Saha and Professor K. N. Rao, both of Delhi University, Delhi, received the following letter from Professor Meny Bergel, M.D.:

"It is with great pleasure that I am informing you that the Instituto de Investigaciones Leprológicas of the city of Rosario in the Argentine Republic, an institution of which I have the honor of being Director, has awarded you the International Mitsuda Award, a bi-annual award that is given to outstanding world personalities. Among others, this award has been given to Albert Schweitzer (in memoriam), Mother Theresa of Calcutta and Dr. Cesar Milstein, all three Nobel prize winners.

"Among the leprologists receiving this award are Professor Lazlo Mester de Parajd, discoverer of DFS for the treatment of leprosy; K. Ramanujam, outstanding leprologist from India, and Ray Foster, president of The Leprosy Research Foundation of The United States of America (U.S.A.).

"Through the courtesy of the India Embassy in Buenos Aires, we are sending you the emblem and the diploma of the award."

—Materials received from K. Saha

Switzerland. *44th World Health Assembly calls for elimination of leprosy by year 2000.* "The Forty-fourth World Health Assembly has called on World Health Organization (WHO) Member States in which leprosy is endemic to take action to eliminate the disease as a public health problem by the year 2000. A resolution adopted by the Health Assembly at its annual meeting in Geneva, Switzerland, defined eliminating the disease as a public health problem as 'reduction of the prevalence of leprosy to a level below one case per 10,000 population.'

"This marks the first time the Organization has committed itself to the elimination of leprosy, according to Dr. S. K. Noordeen, Chief of the leprosy program of the WHO, reflecting the significant progress achieved during the past 5 years in treating people with leprosy through the application of multidrug therapy (MDT).

"The resolution adopted by WHO Member States attending the Health Assembly in Geneva calls on the 93 countries where leprosy is endemic 'to further increase or maintain their political commitment' to leprosy control. Eighty percent of all registered leprosy patients live in just five countries: (in decreasing order of case numbers) India, Brazil, Nigeria, Myanmar and Indonesia, although cases have been registered in countries around the world.

"There will still be cases at the end of the century, but if countries take the right measures we could reduce numbers to under one per 10,000 of the world's population,' said Dr. Noordeen. Although the current global level of registered cases based on the entire world population is seven registered cases per 10,000 people, in the 28 most severely affected countries in Latin America, Africa and Asia, rates of registered cases can reach as high as 10 to 30 cases per 10,000.

"The first step toward achieving the glob-

al target of eliminating leprosy as a public health problem will be to provide all patients with 'multidrug therapy' (MDT), a proven treatment which can cure early infections—easily detected as a pale, numb patch on the skin—within 6 months, and later infections in 2 to 4 years. Multidrug therapy, in which two or three drugs are combined to attack the leprosy bacillus, each in a different way, has already reduced the number of globally registered patients from 5.4 million in 1986 to 3.7 million in 1990, WHO reports.

"The second, equally important, step will be to extend the search for people suffering from leprosy. The disease carries such stigma that people with leprosy are often reluctant to admit they are suffering from it, so the number of registrations is usually below the actual number of persons afflicted with the disease.

"Successful control with MDT depends upon early detection, as deformities caused by long-standing infection are often irreversible. Therefore 'the principal challenge is to get MDT soon enough to all the people who need it,' says Dr. Noordeen. In Africa, only 18% of registered patients are receiving MDT treatment. In India, nearly 70% of registered patients are receiving MDT. But since the nation accounts for two-thirds of all registered cases in the world, that still leaves 700,000 patients to be reached."—WHO press release WHA/10, 14 May 1991

Thailand. *Workshop on PCR Technology for the Detection of Mycobacterium leprae.* The Leprosy Division, Department of Communicable Disease Control, and the Ministry of Public Health of Thailand, with sponsorship from the Sasakawa Memorial Health Foundation, held a workshop on the detection of *M. leprae* by PCR on 8–19 April 1991 in Bangkok, Thailand. Members of the scientific teaching group were Drs. P. Klatser and G. Vliet from Amsterdam, Dr. S. Woods from Paris, and Dr. T. Gillis from Carville. Topics covered at the workshop included didactic lectures on basic elements of DNA replication and nucleic acid chemistry, PCR techniques for detecting viable and nonviable *M. leprae*, and overviews on the application of PCR for detecting *M. leprae* in infected tissues. Laboratory practicals included set-up, amplification, and detection of PCR products by gel electrophoresis with participants getting hands-on experience at all levels of the practical. The proceedings of the meeting will be published and made available by the organizing committee. Requests should be forwarded to Professor Tonetaro Ito, M.D., Ph.D., Senior Consultant to D.C.D.C. Thailand, Sasakawa Research Building, Soi Bamrasnaradoon Hospital, Tiwanond Road, Moo 4 Tambon Talaad Kwuan, Muang District, Nonthaburi Province 11000, Thailand.