

## 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.*

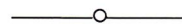
**Albania.** *Albanian Dermatological Association founded.* "Through this letter we would like to let you know of the founding of our Albanian Dermatological Association. According to the development of democratic processes in our country today it is finally possible to create our Association of Albania. This will have its own independent, professional, scientific, and educational features. Our Association in its first meeting on 5 December 1991 has approved its program and statute, confirmed 27 January 1992 by our Ministry of Health.

Our Association consists of 55 members and has the following address: Albanian Dermatological Association, Clinic of Dermatology, Faculty of Medicine, University of Tirana, Tirane, Albania."—Letter from M. Nakuci to Prof. M. F. Lechat

**China.** *Meeting of Editorial Board of "China Leprosy Journal" held in Dalian.* Since the initial publication of "China Leprosy Journal," official organ of the China Leprosy Association, in 1985, 27 issues have been published. At present, the quarterly Journal has published about 2000 copies of each issue with distribution throughout the country, with more than 100 subscribers around the world. The Journal has been playing an important role in leprosy control and research work in China. It is also beneficial for exchanging experiences internationally. A regular meeting of the Journal's Editorial Board was held on 28 June 1992 in Dalian. After discussion, the meeting adopted several measures for further improving the quality of editing, proofreading, printing, and distribution of the Journal. The English abstracts of original articles also will be improved.—Prof. Ye Gan-Yun

**India.** *Central Leprosy Teaching and Research Institute (CLTRI) staff changes.* Dr. A. Dutta retired as Director of CLTRI on

31 December 1991 and Dr. P. S. Rao has become Director-in-Charge. Dr. Jayasheela joined the Institute as Deputy Director Microbiology on 16 December 1991. Dr. Inder Parkash joined CLTRI as Assistant Director Epidemiology on 11 December 1991.—CLTRI Bull. 2 (1992) 3



*XVII Biennial Conference of the Indian Association of Leprologists (IAL).* The XVII Biennial Conference of IAL was held during 2-4 January 1992 at Durg-Bhilai (M.P.). The conference was jointly organized by leprologists and other health functionaries belonging to the Government of Madhya Pradesh, Bhilai Steel Plant, DANIDA, RLTRI Raipur and others, under the Chairmanship of Dr. L. G. Chinchkedkar, CMO, Durg. Dr. P. R. Manglani, Medical Officer, Leprosy Control Unit, Bhilai, was the organizing secretary. The conference was inaugurated by His Excellency, Governor of M. P. Sh. Mahmud Ali Khan. The inaugural session included the presidential address by Dr. H. Srinivasan, President, IAL, and a keynote address by the senior leprologist Dr. V. Ekambaram (Madras).

The scientific program was a tightly packed one in which 111 papers were presented. These included 3 papers in the Best Paper session for Acworth RRE Society Award for the young scientists, 80 oral communications, and 28 poster presentations. There were sessions on clinical leprosy, pathology, diagnosis/prognosis, microbiology/biochemistry (2 sessions), and a session for discussion on posters, social and psychological aspects, epidemiological aspects (2 sessions), immunology and surgery as well as JALMA Trust Fund Oration Lecture and a Best Paper presentation session. An important highlight of the conference was an

open session (session XII) on "Trends and Perspectives for Research" which was moderated by Dr. H. Srinivasan (Madras), with Prof. C. J. G. Chacko (Vellore) and Dr. V. Ekambaram (Madras) as co-moderators. Dr. Srinivasan, in his opening remarks, pointed out that the tempo of research in leprosy has slowed down in our country and that virtually no clinical research was being pursued whereas there was a great need for integrated clinical and laboratory research in leprosy in order to meet the problems thrown up by MDT and for devising better tools for managing the disease and its complications. As examples, he cited the areas of chemotherapy trials and reactions. Lastly, he expressed the view that the PB-MB categorization of patients was alright for the NLEP but it had no place in research studies in which the type of the disease should be precisely classified. Dr. C. J. G. Chacko highlighted the lesson to be learned from the resurgence of malaria after an apparently successful eradication program and urged that such a catastrophe should not be repeated in leprosy. He also pointed out that leprologists were getting fewer whereas the need for in-depth studies in leprosy control was greater now in view of the MDT program. Dr. V. Ekambaram held that there was an urgent need to collect data in detail regarding relapses after MDT/monotherapy. Transmission of leprosy also needed to be studied.

A lively discussion ensued in which Drs. V. M. Katoch (Agra), P. R. Mahadevan (Bombay), M. D. Gupte (Avadi), R. Ganapati (Bombay), J. Almeida (Karigiri), B. R. Chatterjee (Jhalda), G. Ramu (Coimbatore), U. Sengupta (Agra), D. Lobo (Madras), K. Katoch (Agra), A. Mukherjee (New Delhi), A. Salafia (Bombay), P. S. Rao (Chingleput) and R. D. Kharkar (Bombay) participated. The following points emerged from the discussion: (i) there was a need for increased research efforts, especially in understanding host factors and mechanisms through intensive and detailed studies of patients; (ii) laboratory research should be closely related to clinical problems and field projects; (iii) terms like relapse and reaction should have generally accepted definitions for purposes of research studies; (iv) there was an urgent need to develop through research studies using all available (clinical,

histopathological, immunological and molecular biological) techniques, informed and clear definitions regarding type of disease, disease activity, cure and relapse, particularly regarding paucibacillary forms of leprosy, in order to have better guidance on the use of chemotherapy and steroids; (v) there was an urgent need for documenting trends of leprosy with reference to the current interventions based on available data and generating reliable data in a planned fashion; and (vi) the available field facilities should be increasingly utilized for validating newer tools and for training purposes.

It also emerged from the discussion that much of the future research in leprosy will have to be multicentric collaborative efforts and that a co-ordinating agency with a task force approach in identifying projects, formulating protocols, the teams that would carry them out and supporting them with essential additional funding was the method most likely to succeed in the present context. Lastly, it was also decided that a two-man committee consisting of Dr. M. D. Gupte and Dr. H. Srinivasan (co-opting additional members as needed) should look into the data made available to it, compile and analyze acceptable data with reference to trends in leprosy and report the outcome at the next biennial conference.

The conference came to an end with a pleasant Valedictory session.—Indian J. Lepr. 64 (1992) 226–227

**Senegal.** *L'Institut de Leprologie Appliquee de Dakar troisieme cours annuel.* Le troisieme cours annuel organise par l'Institut de Leprologie Appliquee de Dakar, Fondation de l'Ordre de Malte, en collaboration avec la DAHW-Senegal: Formation Pratique pour la Prevention des Invalidites et la Readaptation dans la Lèpre.

Date: Module 1 = du 4 au 30 janvier 1993; Module 2 = du 1<sup>er</sup> au 13 février 1993. Duree: Module 1 = 4 semaines; Module 2 = 2 semaines. Nombre de participants: 6.

Objectif: *Module 1.* Former des responsables pour la mise en oeuvre, l'organisation et le développement des techniques de Réadaptation Fonctionnelle, d'Education sanitaire et de Prévention des invalidités dans le cadre d'un Programme National de Lutte contre la lèpre.

*Module 2.* Formation à la rééducation pré et post-opératoire des handicapés de la lèpre opérés.

Type d'enseignement: Participatif et pratique.

Contenu: *Model 1.* Généralités sur la lèpre; évaluation et prise en charge des atteintes nerveuses; chirurgie de la lèpre: indications; prescription et fabrication de chaussures adaptées; éducation sanitaire, conception, organisation, application et évaluation d'un Programme de Réadaptation; techniques de communication et formation des auxiliaires.

*Module 2.* Rééducation fonctionnelle d'une paralysie récente et des paralysies opérées. Amputation et appareillage.

Langue: Français parlé couramment et écrit.

Mode d'admission: Sur dossier, après analyse des objectifs professionnels.

Date limite de depot des candidatures: 31 octobre 1992.

Condition d'admission: Ne seront retenus que les dossiers des candidats bénéficiaires d'une bourse couvrant les frais de voyage et de séjour.

Niveau requis: Kinésithérapeutes, ergothérapeutes et infirmiers-rééducateurs pour les modules 1 et 2. Infirmiers spécialistes-lèpre pour le Module 1.

Pour tout renseignement s'adresser a:

Dr. J. L. Cartel, Directeur  
Institut de Leprologie Appliquée de Dakar  
B.P. 11023, Dakar-CD, Sénégal  
(Fax: 221 24.18.18)

**Switzerland.** *TDR and IDRC prize for a paper on "Women and Tropical Diseases."* "Leprosy in women: characteristics and repercussions" was the title of the paper that won for its team the first US\$5000 prize offered by TDR and Canada's International Development Research Center (IDRC) for the best paper on women and tropical diseases. The members of the winning team, all women and all from the Instituto de Biomedicina in Caracas, Venezuela, were Marian Ulrich, Ana Maria Zulueta, Gisela Caceres-Dittmar, Celsa Sampson, Maria Eugenia Pinardi, Elsa M. Rada and Nacarid Aranzazu. A total of 35 papers were submitted from 20 countries; over half of the first authors were female and over two thirds were from developing countries.

The selection committee chose the Venezuelan team's paper because it covered several aspects—physiological, social and biomedical. It outlined risk factors not only in pregnancy but at all stages of a woman's life; described the impact of the disease on the overall quality of her life; and was extremely well written.

The center also highly commended four other papers: "Adam's rib awry: women and schistosomiasis" by Edward H. Michelson of Bethesda Maryland, USA; "Women and malaria" by R. Reubin of Madurai, India; "Women, tropical diseases: leprosy" by Elizabeth Duncan of Edinburgh, Scotland, and "A synoptic inventory of needs for research on women and tropical parasitic diseases with an application to schistosomiasis" by Hermann Feldmeier and Ingela Krantz of Göteborg, Sweden. Of the "TDR diseases" the most popular were malaria, leprosy and schistosomiasis. Only one paper stressed the social and economic factors that oppress women and contribute to their poor health.—*Lepr. Rev.* 63 (1992) 190

**Turkey.** *International Leprosy Seminar.* The first International Leprosy Seminar was held in Istanbul on 2–3 September 1991 and was jointly organized by the Leprosy Center of the Istanbul Medical Faculty, University of Istanbul (Professor Turkan Saylan) and the Regional Office of the World Health Organization for Europe. The main objective of the meeting was to bring together people working in leprosy from the neighboring countries of Eastern Europe, the Middle East, North Africa and Malta to exchange information, with particular emphasis on the following: 1) a review of the present state of knowledge, including new approaches to leprosy control, epidemiology and social aspects; and 2) the teaching of leprosy in medical schools and the wider involvement of teaching staff.—*Lepr. Rev.* 63 (1992) 95–96

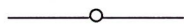
**U.S.A.** *American Association for the Advancement of Science (AAAS).* The AAAS Sub-Saharan Africa Journal Distribution Program provides subscriptions to more than 200 scientific, engineering, and other scholarly journals to some 175 university and research institute libraries in 35 countries. As a result of the AAAS effort, over

3500 subscriptions reach African institutions that do not have easy access to current literature. The program is funded by the Carnegie Corporation of New York, the Ford Foundation, and the U.S. Agency for International Development (USAID). Recipient institutions are identified through in-country needs inventories, supplemented by advice from donor societies and from experts on research conditions in Africa.

Journal titles in the biomedical field included in the distribution program are *JAMA*, *Annals of Internal Medicine*, *Pediatrics*, the journals of the American Society of Microbiology, American Physiological Society, etc.

The focus of the AAAS Journal Distribution Program is beginning to expand. Because an important factor in the high price of overseas subscriptions is postage, new technologies are being explored, such as CD-ROM (Compact Disc Read-Only-Memory), that can supplement hard copy. The *New England Journal of Medicine* may be made available on CD-ROM to a number of African libraries.

For further details on AAAS programs, please contact Ms L. Levey, AAAS, 1333 H Street NW, Washington, D.C. 20005, U.S.A.



*Heiser Program for Research in Leprosy and Tuberculosis 1993.* The Heiser Program for Research in Leprosy, initiated at The New York Community Trust in 1974, has awarded over 125 postdoctoral fellowships and research grants over the past 17 years. The Program's scope has now been extended to include research in tuberculosis. A number of factors influenced this decision.

Tuberculosis, long a major infectious disease in the developing world, causing three million deaths each year, is now sharply on the rise in the industrial nations. Furthermore, much of this disease is being caused by bacteria that are resistant to the commonly used antibiotics. It is now clear that the bacterial agents, *Mycobacterium leprae* and *Mycobacterium tuberculosis*, are closely related and have similar antigenic components. Thus, the search for effective means of immunization may well follow a com-

mon path for the two diseases. In light of these developments, a number of laboratories concerned with leprosy research are concurrently engaged in work on tuberculosis, and it seems logical to foster this combined attack.

The Heiser Program will thus continue its support of leprosy research, and at the same time will accept applications for the support of research on tuberculosis.

In accordance with Dr. Heiser's stipulation at the time that he set up his fund in The New York Community Trust, the income is used not for treatment of patients but for basic laboratory research directed at a better understanding of the diseases and their bacterial agents. The ultimate aim is to find measures for the prevention and cure of these diseases that will serve to bring them under control. Two types of awards have been established to foster these objectives: 1) postdoctoral fellowships, designed to attract qualified and highly motivated young biomedical scientists to train in the relevant fields of research; and 2) small research grants that will support the training efforts of laboratories involved in research on leprosy and/or tuberculosis, or that will provide funds for the initiation of new research projects in the field.

1) Postdoctoral Research Fellowships. To support young biomedical scientists in beginning postdoctoral training for leprosy and/or tuberculosis research. Applicants should have M.D., Ph.D., or equivalent. While there is no age limit, candidates should be at an early stage of postdoctoral research training. There are no citizenship requirements. Generally, postdoctoral training should be planned in an institution other than that in which the applicant obtained the doctorate. Candidates should be interested in obtaining research training directly related to leprosy/tuberculosis study. Initial awards are for 1 year, renewable for a second year, at stipend levels between \$20,000 and \$25,000 per annum.

The applicant should submit, in English, one original and four copies of the following: 1. Face sheet—form provided. 2. Supplement No. 1—form provided. 3. Supplement No. 2—form provided. 4. Research proposal. The presentation should be a detailed description of the proposed research, not to exceed five single-spaced typewritten

pages. Literature may be cited separately, and figures and tables may also be added. 5. Specific plans for the application of knowledge and experience gained through fellowship training and expected future in the field of research in leprosy and/or tuberculosis. 6. *Curriculum vitae*.

Additional items required: 7. Letter from proposed supervisor, indicating acceptance in the laboratory if fellowship is awarded. 8. Letters from three former teachers or supervisors as listed on the face sheet, to be forwarded directly to The Heiser Program, 450 East 63rd Street, New York, New York 10021 U.S.A.

Deadline for application: February 1.

2) Research Grants. To provide limited support to laboratories involved in research training on leprosy and/or tuberculosis; or to fund the initiation of new research projects. Applicants should be senior investigators who are experienced in tuberculosis/leprosy research. Grants may be sought for proposals which are both of high scientific caliber and clearly related to these mycobacterial diseases. Start-up funds may be

requested for new projects which show promise of receiving support from other sources after preliminary results are obtained. Grants will not exceed \$20,000 and are limited in duration to 1 year. These grants will not be awarded for clinical trials and they may not be used for salaries.

Instructions for making application: A face sheet is provided for the basic data and a summary of the proposed research project. Additional items to be submitted: 1. A detailed description of the proposed project, not to exceed five single-spaced typewritten pages, exclusive of bibliography, tables, and figures. 2. Proposed budget. 3. *Curriculum vitae* and relevant bibliographies of scientists participating in the project. The application must be in English, and one original and four copies should be submitted.

Deadline for application: February 1.

For complete details on each award, contact: Mrs. Barbara M. Hugonnet, Director, Heiser Program for Research in Leprosy, 450 East 63rd Street, New York, New York 10021, U.S.A.—(Adapted from Heiser Program brochure)