CALL FOR PAPERS

For a special issue of Leprosy Review on Chemotherapy

In recognition of the paucity of new studies on the chemotherapy of leprosy and the important role it plays in the treatment of patients, the Editorial Board of *Leprosy Review* decided to devote the September 2012 issue to chemotherapy. With the advent of the WHO MDT and the elimination campaign, the landscape of investigation and treatment by antimicrobials has changed dramatically. WHO MDT has certainly decreased leprosy prevalence, but not incidence, and convincingly proved that finite therapy of all leprosy cases is generally successful. As a byproduct, worldwide mouse foot pad laboratories and clinical sites capable and experienced in evaluating antimicrobials in mice and monitoring clinical trials have all but disappeared. Also during the MDT era, skin smears and biopsies for classification for treatment purposes and integration of leprosy into general health care has surely impacted both the way patients are treated and health care workers educated. Newer antimicrobials, particularly minocycline, clarithromycin, ofloxacin and moxifloxacin have proved superior both in mice and clinical trial to two components of WHO MDT, dapsone and clofazamine, while rifapentene in mice, perhaps owing to its longer half life, has proved more bactericidal than rifampicin. Yet the aforementioned agents have been incorporated sparingly in treatment regimens. At issue is whether newer generation MDT regimens might prove superior or have we in fact reached the limits of our treatment potential already. A dialog on chemotherapy surely seems in order.

Against this background, we are soliciting for this special issue of *Leprosy Review* comprehensive review articles and original work on all aspects pertaining to the chemotherapy of leprosy. Of particular interest would be individual agents and regimens, drug resistance, relapse rates, operational aspects of MDT delivery and compliance, including optimising directly observed therapy, side effects/toxicities and chemoprophylaxis.

Because of time limitations, early submission of relevant manuscripts is encouraged. In order for manuscripts to be considered the last date for submission will be 1 May 2012.

*Robert Gelber*
*Guest editor*