Editor’s choice – December 2014

This issue of Leprosy Review begins with an overview of telemedicine, often referred to as m-health, and how it applies to the field of leprosy. As leprosy becomes a rare disease in many settings, the use of mobile communications is crucial if we wish to provide good quality services to new patients in a timely manner – in fact, innovative use of this technology could allow us to improve the services to patients, even in less accessible areas, and even as experience and expertise in leprosy is less widely available.

Next year (2015) will likely see an extensive debate about Uniform MDT (U-MDT), in which a 6-month, 3-drug regimen is given to all cases of leprosy, removing the need for any classification of cases; a number of field trials will be reporting final results during the year. Will this be the first major change in the case-management of leprosy in almost 20 years? Two cautiously optimistic papers from Brazil give some interim results from the ongoing U-MDT trial there.

Another large study which may change routine practice is the TENLEP trial, which is seeking the best treatment regimen for Type 1 reactions and neuritis. An interim paper from that study, by Wagenaar et al. shows that testing two additional nerves for sensory loss could help in the diagnosis of neuritis.

Rawson et al. shed some interesting new light on the age-old debate about the interaction between leprosy and tuberculosis. One point of particular interest these days is the discussion about steroid use in leprosy and the risk of reactivation of latent TB – very relevant, if the TENLEP trial mentioned above turns out to favour a longer course of steroids for acute neuritis. As with most controversial issues, more research is needed!

The paper on childhood leprosy in north India should really have been in June’s special issue on leprosy in children, but occasionally the review process takes longer than intended! The paper serves as a reminder, however, that whenever we see children with leprosy, recent transmission of *M. leprae* has occurred in that community.

The final original paper presents the need for better dental care for people who had previously had leprosy in China. This paper highlights the fact that many former patients still lack access to routine health education and general health care services – a situation we should struggle to reverse wherever we find it. These are often the most remote communities needing services, so perhaps a good place to look at innovative use of mobile communications?

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