Letter to the Editor

LONG-TERM FOLLOW-UP OF ROM TREATED CASES

Single dose treatment with Rifampicin, Ofloxacin, Minocycline combination, (referred to as ‘ROM’) for ‘single lesion paucibacillary leprosy’ (or ‘SLBP’ leprosy) was introduced in 1997 on recommendation of the World Health Organisation (WHO), in response to the publication of a multi-centre trial carried out in India. Thousands of patients have been treated with this multidrug therapy (MDT) since then, although at the time some reservations were expressed about the advisability of premature widespread introduction of this new treatment regimen.

At the Danish Bangladesh Leprosy Mission (DBLM) leprosy control project about 1100 patients were treated with ROM since 1998. In response to anxiety on the part of several Leprosy Control Supervisors who had seen some patients return later with unresolved lesions, in December 2006 we carried out a retrospective follow-up of a predetermined sample of the cases treated over a 3 year period (1998–2000), selected according to clinic of registration.

Amongst 310 cases identified from the computerised database, 87% were found and re-examined. Average follow up was 63 years. Amongst those traced, 76% had complete clearance of lesions. Ten cases (3.6%) were found to have evidence of relapse, confirmed by an experienced doctor. This represents a relapse rate of 5.09/1000 person years at risk (pyar). All relapses were classified as paucibacillary (PB) and have now received or are currently taking PB MDT for 6 months. None had nerve function impairment.

Three of the relapses were discovered only as a result of the active follow-up, since the lesions were in hidden parts of the body. Others had presented voluntarily at 1–4 years after treatment.

Our results compare unfavourably with the results reported by WHO on a follow-up of 1262 cases: 88% with complete clearance and only 3/1000 pyar relapsed, after 4.5 years follow up.

Consideration should be given to the possibility of relapse in patients who received ROM for single lesion leprosy.

Rural Health Programmes (Leprosy Control Project) c/o DBLM hospital, Notkhana, P.O. & Dt. Nilphamari, 5300, Bangladesh

KHORSHEAL ALAM
C RUTH BUTLIN
DAVID PAHAN
SUMANTO KUMAR
CHOWDHURY

References