**Editor’s Choice**

About 25 years ago, the Editorial Board of this journal fell to discussing the matter of content and ‘direction’, including the range and quality of original articles, the need to give more (or less) emphasis to research, the importance of field work and control programmes and the possibility of closer cooperation with the World Health Organisation, the International Federation of Anti-Leprosy Associations and our colleagues in the *International Journal of Leprosy* in the USA. In retrospect, we were probably over-optimistic about the complex series of changes that would have been needed, as opposed to the established policy of simply waiting for contributions of suitable quality to turn up in the post. The discussion, in any case, was brought to a close by the arrival of coffee and biscuits, and the comment of a wise and experienced member of the Board, who said he could not see much wrong with the journal and thought that nearly every issue had at least something of interest for most people working in leprosy. The situation is now radically different. We have vastly more contributions, our standards for acceptance have risen, and we have greatly expanded contacts with people working in most branches of leprosy in various parts of the world. If, in the past, there were times when material for publication was at a disconcertingly low level, our problem now is to ensure the accurate processing of all papers received, including peer review, revision if needed and allocation to the next available space for publication. We are not always successful, but the mounting number of contributions crossing the Editor’s desk suggests that at least some of our mistakes have been forgiven.

This first issue for 2004 has articles by 35 authors from the UK, Finland, The Netherlands, India, Ethiopia, Norway, the USA, Republic of Yemen and Nigeria, reflecting yet again the broad interests and activities of many people in diverse settings. How can one make a choice from such an impressive list of contributions? Although at first sight remarkably heterogeneous, a possible conclusion is that, directly or indirectly, they all support the message on the first page of John Porter’s opening article, that people working in leprosy realize that this disease, with its complex medical, physical and psychological problems, has not been controlled and will continue to occur after it has been ‘eliminated’ at national and sub-national levels. Meima and colleagues reinforce this message, concluding that there is no general decline in case detection rates to date, and that trends in prevalence are irrelevant for monitoring epidemiological changes in leprosy. In the middle of the list of original papers, we welcome some scientific and highly technical contributions on pages 40 and 50, but if you feel overwhelmed by calorimetric microtitre plate hybridization or cytoplasmic autoantibodies, turn quickly to page 108, where you will learn that *Leprosy Notes* started in 1928, changing to *Leprosy Review* in 1930, with the objective of providing ‘… vital help and advice to those working in the field, who are often unable to access on-line information’. Our scope has broadened with the passage of years to embrace a better understanding of leprosy and its control. Your contributions are the basis on which we shall continue to pursue these objectives.

**A. Colin McDougall**

*(Acting Editor)*