Editor’s choice – March 2014

This issue sees an important Editorial by Prof Cairns Smith and Dr Ann Aerts on new strategies for leprosy control, with an emphasis on contact tracing and interventions to prevent leprosy. Novartis has initiated discussions which are reported here, and pilot programmes in several countries, which will be watched with interest.

Two papers look at ways of improving disability assessment and monitoring, which is important if we are to do a better job of preventing and managing disability in leprosy. Cross et al. used the Delphi method to reach a consensus amongst experts on the use of the WHO Disability Grading system, which can be immediately applied in the field – this paper does not change the system, but defines the terms more precisely, with guidelines for use in the clinic. Brandsma et al. show that testing nerve function in the field can be done accurately and reliably.

Stigma is a frequent consequence of leprosy and its associated disability, and there is increasing interest in finding ways to reduce it. A literature review of the concept, causes and determinants of stigma in leprosy is therefore very timely.

Leprosy is a complex disease, with a wide range of less well recognised clinical features and possible co-morbidities. A paper from Turkey looks at prostatic and testicular parameters in lepromatous cases, while a case report from India reminds us that liver involvement can be a serious complication of leprosy. Complications of steroid treatment must always be borne in mind and a case report of Strongyloides infection is an important reminder of the care needed when using these powerful drugs.

The final paper describes two individuals with both leprosy and lymphatic filariasis, illustrating the need for an integrated, holistic approach, not only to the assessment of disability, but also its management. There is increasing interest in helping health staff deal with any disabling consequences of disease, whatever the cause – in the later stages, as long as the necessary specific treatment has been given, the original cause may no longer be so relevant.

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Editor