Book Review

IAL Textbook of Leprosy
Editors HK Kar and B Kumar
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The Indian leprosy community has produced a magnificent new text book on leprosy. The current major reference book used in the leprosy and dermatology community is ‘Leprosy’ edited by Hastings and published in 1994 and it remains widely used but is now somewhat dated. At the Indian Association of Leprologists (IAL) meeting in 2007 it was decided to produce a new leprosy textbook under the aegis of IAL. All the 60 contributors are Indian, many of them working in government leprosy programmes, non-governmental organisations and academic departments. The book is edited by two academic dermatologists, from Delhi and Chandigarh respectively.

The book is organised into nine sections, covering epidemiology, basic science, clinical and laboratory features, disease complications, systemic involvement, therapeutics, miscellaneous rehabilitation. The book is extremely well produced with high quality paper, photographs on every page and well organised clear text.

The history section is interesting and illuminating, the origins of chaulmoogra oil and the way it fell out of use are clearly described. The early leprosy workers in India are shown together with a picture of the first IAL meeting in Kolkata in 1933.

The epidemiology section has three sections, the first setting out the definitions of key indicators, the second a review of the global leprosy picture by Vijay Pannikar. In the third section PL Joshi (then Head of the Indian leprosy programme) reviews the reported Indian leprosy patient numbers but highlights the long term nature of the burden of leprosy and also describes how the government of India will need to provide leprosy services for many years and that this should be provided through quality services for the patient.

In the Immunology section Indira Nath and Mehevani Chaduvala describe the complexities of the immune response in leprosy. They also provide a timely critique of the proposed model that the Ridley Jopling spectrum is driven by the type of Th cell seen in skin lesions with the tuberculoid response being driven by Th1 type cells and the lepromatous by Th2 cells. Although a widely cited model the initial work supporting this model was done on a small number of patients and Nath points out that subsequent work shows that many Th0 type cells are present in leprosy lesions.

The clinical section is supported by excellent detail and photographs on how to do examinations or tests, especially in respect of testing nerve function. The different classifications that are used for leprosy are also clearly described and the utility of the Ridley–Jopling classification in referral centres and research is emphasised.

In the section on reactions it is surprising that the important INFIR Cohort study done on new MB patients in northern India is not mentioned. In this study 49% of patients were in reaction or had new nerve damage at the time of entry into the study. This study has also generated important findings on clinical pointers for nerve damage, such as looking for nerve damage close to skin lesions. It has also highlighted the widespread nature of subclinical nerve damage that is only detected when more sophisticated tests are used. It is also disappointing that the 12 week regimen of steroids for the treatment of T1R is still being recommended in highlighted boxes in both the reactions and the neuritis treatment sections. This recommendation came from WHO (World Health Organization) without any
supporting evidence, and was later amended to 12–24 weeks and now clinical trial data from India and elsewhere which show that patients with nerve function impairment need treatment with steroids for at least 20 weeks. The systemic nature of ENL is well covered. The authors do not note the limited evidence for the treatment of ENL. It is surprising to see the use of antimonials being recommended as a second line agent for ENL since there is no published evidence to support this recommendation. The authors include a section on the use of Thalidomide in the treatment of severe ENL and also make a valid argument for all women to have access to Thalidomide with appropriate precautions.

The miscellaneous section contains some important chapters on health education, human rights and the role of NGOs in leprosy in India.

One of the side effects of the apparent elimination of leprosy is the perception that leprosy is not going to be a problem. By producing this magnificent book the IAL has indicated that it recognises that there will be new leprosy patients presenting in India for decades to come. This book is a vital contribution to the massive education programme that is needed to ensure that health workers recognise patients with leprosy. It also highlights the complexities of treating leprosy. A copy of this book need to be in all dermatology departments in endemic countries and in all referral centres involved in training.

There are some caveats about this book, firstly the quality has come at the expense of portability and it is a heavy tome, weighing over 2 kilograms. Secondly finding useful advice on common clinical challenges is not easy and in the next edition a series of clinical case studies could usefully be included. This approach has been used in the rehabilitation section where it is very illuminating.

By producing this book the IAL have put down a challenge to rest of the leprosy world. Firstly there should be discussions about how a globally relevant text book might be produced. Could this IAL team be persuaded to go global and produce a text book that could be used in Africa, Latin America and South East Asia? This could be done by including additional chapters on the skin manifestations in different geographical areas. Or should the International Leprosy Association produce a globally relevant text book, but building on the IAL book?

This large text book also highlights the need for a new small book to update Leprosy by Bryceson and Pfaltzgraff which is still an excellent primer on leprosy. Only a few copies are left. However this text remains one of the most accessible small textbooks to recommend for people starting in leprosy and this is another educational gap that needs filling.

Finally it is not clear how to obtain this book.

Diana N. J. Lockwood