

HANSENOLOGY AND QUALITY OF LIFE

Prof. Dr. Antonio Ruffino Netto¹

Let us focus on leprosy initially.

Morel (2006) makes an excellent presentation on the context within which leprosy is located. Reports that the WHO Macroeconomics and Health Commission in 2000 (in the report from the Commission on Health Research and Development published in 1990) marks the “90/10 imbalance” - only 10% of investments in research and development (R&D) are directed to the health problems of 90% of the world population. Based on this observation, in 1996 the Global Forum for Health Research was created. Many initiatives were implemented or financed to offset this imbalance, but they remain deeply lacking in resources.

Three disease categories were specified:

Category 1- emerging or out-of-control diseases: the focus should be on generating new knowledge and developing new interventions. Some examples: sleeping sickness, Dengue, Leishmaniasis.

Category 2- Although there is already a control strategy, the disease burden persists. R&D activities cover a wide spectrum, but are focused on the development and testing of new interventions and strategies. Some examples: Malaria, Schistosomiasis, Tuberculosis.

Category 3- The control strategies are effective, the disease burden decreases and its elimination is planned as a public health problem. The research seeks to improve current control activities and eliminate risks. Some examples: Chagas disease, Filariasis, Hansen’s disease, Onchocerciasis.

Many other points were raised, such as what factors are involved in prioritizing research and development, namely: 1- What is the size and nature of the disease burden, and what is its epidemiological trend; 2-What is the disease control strategy; 3- Why the disease burden persists; 4- What are the needs

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and priorities of R&D; 5-What is already being done in R&D; 6- Definition of strategic priorities for the disease in question.

Thus, we see leprosy focused on category 3, where better control activities are expected. Evidently, it continues to involve knowledge of the epidemiological infrastructure of the disease. When facing the problems involved: how to transform knowledge into doing, how to transform knowledge into innovation, problems of different orders appear as economic, political, ideological, anthropological, educational aspects, etc. The socio-economic inequalities of the countries, as well as scientific, technological and sanitary inequalities (which surely translate qualities of different lives) interfere in the natural history of the focused disease.

From the above, the importance of the work involved in understanding the epidemiology of Hansen’s disease is understood, as well as the economic and social factors associated with it. This issue of the *Hansenologia Internationalis* proposes to present themes whose ultimate goal is to contribute to the program aimed at controlling the disease in question.

BIBLIOGRAPHY

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¹ Doctor from the University of São Paulo, Master in Epidemiology at Harvard University, HARVARD, United States of America and PhD in Community Health from the Ribeirão Preto Medical School, SP, Brazil.