

## OUR CONGRESSES

### EDITORIAL

The IV Congress of the College of Hansenology of Endemic Countries and the IX Congress of the Brazilian Association of Hansenology were held from 4 to 8 June at Bourbon Hotel, in Foz do Iguaçu with its beautiful falls, in Parana State, Brazil.

Several experts in Hansen's disease from the entire world came to participate in the Congresses along with Brazilian technicians. Many people shared their views in State of the Art lectures, symposia, free paper presentation and short training courses.

Due to its social and economical situation, Brazil has many public health problems. Although bearing the second largest load of cases in the world, it was not an easy task to congregate such a number of outstanding experts in Brazil. However, it was worthwhile.

Overcoming misunderstandings and other constraints, it was rewarding to see people exchanging ideas, making plans and discussing strategies to improve the health of condition of Hansen's diseased patients.

From the technical point of view, several conclusions could be drawn out of the discussion:

a) *M. leprae* is not cultivable yet; b) there is still many doubts regarding the nature of type I reactions, c) there is no consensus regarding some clinical manifestations occurring after completion of treatment- are they reversal reactions or relapses? Could reversal reaction be considered as a relapse?; d) neural involvement is still poorly understood, the role of nerve surgery is still questionable and there is no available knowledge to arrest the progression of silent neuritis; e) steroids and thalidomide remains

the only treatment for type II reactions; f) MDT/WHO is recognized as being able to effectively avoid drug resistance, to reduce the number of registered cases, to improve compliance of patients to treatment and to strengthen the relationship among health workers and patients; g) MDT/WHO in Brazil is not preventing an increase in the number of defaulters and there is still no consensus regarding when to stop treatment for MB cases with initial BI of 3+ or 4+; h) MDT/WHO has driven Hansen's disease from an infectious disease into an immunological disease. It was found that, at least in Brazil, there is not an organized structure to adequately assist cases of reaction occurring after release from treatment; i) the study of new drugs and the use of new therapeutic regimens is mostly based on results from only one center (located in Paris); j) although results from the double-blind study using one month doses of ofloxacin and rifampicin both for PB and MB cases are not yet available, it is recognized as acceptable the use of ofloxacin as an alternative drug in cases where rifampicin could not be used by any reason, as well as the use of ROM rifampicin, ofloxacin, minocyclin ) for single lesion cases; k) in spite of the available surgical rehabilitation techniques, there is still no approaches to assure the referral of cases in need to centers where these resources exists; l) data shows that MDT/WHO has contributed to a significant decrease of cases with severe disability grade. However, there is no data available regarding the disability grade of patients released from treatment that suffered reactions; m) average number of new cases in the world is 600.000, being 36.000 in Brazil; n) stigma to Hansen's

disease still remains worldwide.

The Congresses allowed an attractive exchange of ideas among participants and made possible the settlement of new partnership to improve investigations in many fields.

Finally, it was fully recognized the enormous effort endeavored by WHO, national and international NGO,s and the

Ministry of Health of most endemic countries to attain the goal of eliminating Hansen"s disease from earth.

Hansenologia Internationalis starts in this issue the publication of all papers presented in Foz do Iguaçu and will be delivering in 1998 a special edition fully devoted to the Congresses.

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