Final Announcement

29th Biennial Conference of Indian Association of Leprologists

28th - 30th March, 2014

'Sustaining Leprosy Elimination'

Venue: Auditorium, PGIMER, Sector 12, Chandigarh

Organized by
Department of Dermatology, Venereology & Leprology
Postgraduate Institute of Medical Education & Research (PGIMER), Chandigarh 160012, India
pgimer.edu.in
The 29th Biennial Conference of Indian Association of Leprologists LEPCON 2014 was held in Postgraduate Institute of Medical Education & Research, Chandigarh from 28th to 30th March 2014. This meet which promised to be an academic feast lived up to its pre-conference expectations and was attended not only by leprologists and dermatologists of national and international repute but also by eminent personalities in the field of medical research and public health. In this conference, we had more than 350 delegates from India and abroad (UK, USA, Switzerland, Germany, Nepal, Ethiopia, Netherlands, Bangladesh), a record number in IAL Conference. For the first time, we conducted National PG Leprosy Quiz in IAL Conference, in which 15 teams participated from various Medical Colleges of India. AIIMS, PGI, RPMC Tanda qualified for the final rounds. RPMC Tanda team won the quiz. Live transmission of CME proceedings on conference website and Workshop on Leprosy were other Firsts in this IAL Conference. The CME topics were well appreciated and discussion brought out many current issues and challenges in leprosy control.
The theme of the first day CME was “Sustaining Leprosy services for leprosy free world.” The day began with Dr VM Katoch (Director General ICMR & Secretary DHR, Govt of India) setting the tone of the conference by delivering a lecture on applications of newer technologies in the elimination of leprosy. Dr. Noordeen spoke on the hurdles in leprosy elimination due to the presence of high endemic areas where active transmission of leprosy is occurring. For further reducing the disease burden he advocated (a) reducing delay in detection through repeated case detection campaigns. (b) identifying, and reaching out to underserved populations including tribals and urban poor, and (c) ensuring treatment completion. Thereafter Dr Diana Lockwood (Professor at the London School of Health & Tropical Medicine), and Dr Krishnamurthy (President DFIT) spoke at length to make the audience aware of the current world-wide epidemiologic situation of leprosy and the challenges that lie ahead of us even after the elimination of leprosy has been achieved at global and national level. They stressed the need for better operational factors (political, programmatic, social, economic, technical) and introduction of strategic measures titred to the needs, including an effective information management and surveillance system, collaborative consumption, community involvement, and partnership for better quality care. Dr. P S Rao spoke on prospects and challenges of eradication of leprosy in India. He talked on the need for community participation and intensified IEC activities to achieve elimination in high endemic areas and for future eradication.
The afternoon session saw interesting lecture by Dr Sengupta (Leprosy Mission Trust, New Delhi) on early diagnosis of leprosy by serological analysis. Several antigen, antibody and molecular technology based assays including the recent Leprosy IDRI Diagnostic-1 (LID-1) assay were discussed. He highlighted the need for further refinement of these assays to better detect tuberculosis spectrum of the disease and talked on future areas for their possible development using alternative technology. Dr. D M Thappa (JIPMER, Pondicherry) spoke on relapse in leprosy. His talk focussed on relevance of relapse on current scenario of post leprosy elimination, times of declining expertise, shorter MDT (6/12 months) regimens, increasing proportion of multibacillary cases, trend of increasing childhood deformities, lack of official surveillance after release from treatment, non practice of slit skin smear in routine, missed relapse cases in community, and expertise of health workers to diagnose relapse in integrated system. Dr Steve Walker (London School of Health & Tropical Medicine) talk highlighted the lack of quality studies in management of erythema nodosum leprosum and stressed the need for randomised controlled studies to access effective treatments to guide treatment decisions. Dr. Indira Nath spoke on recent advances in immunology of leprosy. She spoke on the role of T regulatory cells as identified by FOXP3 transcription factor and IL17 cytokine in the pathogenesis of leprosy. Dr. V P Shetty spoke on the mechanism of nerve damage and silent neuropathy in leprosy, including the role of M leprae induced deregulation of Mitogen Activated Kinases (MAPK), leading to axonal atrophy and secondary demyelination. In addition, there were focussed talks
on special scenarios like ocular leprosy and childhood leprosy by Drs. Swapan Samanta and Archana Singal.

Later in the evening, Ms. Neela Shah (Novartis, CLC) elaborated on the management of grade 2 deformity with non-surgical methods. Novartis foundation has also put up a stall wherein free splints, grip aids and free kits for the care of hands and feet are dispensed to the leprosy patients attending the conference. Dr Subramaniam (NIE, Chennai) highlighted the social problems that the leprosy patients have been facing since time immemorial and what more can be done to improve their quality of life. Moreover, pertinent topics like the unusual presentations of leprosy and the need for stronger surveillance in the post elimination era were also discussed by Drs Neena Khanna and D Porichha respectively. The day drew to a close with a colourful inaugural function of LEPCON 2014 which was presided over by Professor Amod Gupta, Dean PGIMER with Dr VM Katoch as the Chief Guest and Dr SK Noordeen (Former Director -Global Programme for Elimination of Leprosy) WHO, Geneva as the Guest of Honour.

The second day started with “Jal Mehta oration” which was awarded to Dr Atul Shah (Mumbai). Dr. Atul Shah has worked for more than 15 years in the field of surgical correction of deformities arising secondary to leprosy. On this occasion he presented his work in this field and emphasized on the necessity of combining medical therapies and surgical modalities to provide optimal benefit to the leprosy patients (“The Knife is not enough”). This was followed by lectures by eminent leprologists Dr. Diana Lockwood, Dr. Dongre
and Dr. Manglani. Dr. Diana Lockwood presented her data on use of azathioprine as an adjuvant to corticosteroids in Type 1 reaction. In a randomised controlled trial in patients with type 1 reaction, the authors found that adding azathioprine to steroid treatment did not improve the outcomes. The authors did not recommend azathioprine for the treatment of leprosy reactions. Dr. Dongre spoke on the social injustice incurred by leprosy patients and social and legal measures introduced to integrate them into the community. Dr. Manglani spoke on barriers in leprosy eradication including lack of culture media, vaccines, reducing leprosy expertise, drug resistance and stigma associated with leprosy. In addition there was a National Leprosy Eradication Program (NLEP) session sponsored by Govt. of India which focused on the current leprosy scenario in India, progress of NLEP and its future strategies in post elimination era, the prevention of disability and their care, support from ILEP and the role of local NGO.

However, the highlight of the day was the workshop on leprosy conducted at the Zakir Hall which was coordinated by Dr PN Rao and Dr Sujai Suneetha. The workshop was attended by more than 100 delegates and had separate stations focusing on skin smear examination, body charting and voluntary motor testing and sensory testing for nerve function impairment, role of physiotherapy and use of splints in prevention of disability, ultrasonography of peripheral nerves in leprosy and finally on assessing stigma of leprosy by calculating Dermatology quality of life index and use of camouflage for skin patches. The workshop proved to be major success especially among the young residents, medical officers and health workers who got the
opportunity to polish their skills in examining the leprosy patients and interacting with them.

The afternoon session had interesting talks by Dr. Deepika Pandhi, Dr. Saba Lambert, Dr. Bela Shah and Dr. P N Rao. Dr. Deepika Pandhi spoke on Genetic and serum markers to predict susceptibility and diagnose reactions. Dr. Saba Lambert presented the data on use of cyclosporine to treat erythema nodosum leprosum. In a double blind randomised control study the authors assessed the use of cyclosporine in combination to prednisolone in treatment of erythema nodosum leprosum and found it to be a promising second line steroid sparing agent. Dr. Bela Shah and Dr. P N Rao spoke on early diagnosis, monitoring and management approach of reactions and management of facial lesions of leprosy respectively. Later in the evening, Dr. Devesh Mishra spoke on pure neuritic leprosy in India, which was followed by a talk by Dr. Laxmisha Chandrashekar in which he presented the data from a longitudinal cohort study on the role of high frequency ultrasound for the management of type 1 lepra reaction.

The final day had plenary lectures on leprosy research, chemoprophylaxis and histopathology of leprosy. Dr. Paul Anderson spoke on current priorities in leprosy research, stressing the need for research on epidemiology, antibiotic therapy, management of reactions and chemoprophylaxis. This was followed by an interesting lecture by Dr. Sujay Khandpur on histopathology of skin lesions of leprosy. Two symposiums were held on MDT and genetics and drug resistance. In the first symposium on MDT, Dr
Vibhu Mendiratta on systemic toxicities of WHO MDT, including dapsone induced agranulocytosis and dapsone hypersensitivity syndrome and rifampicin induced immunoallergic reactions. This was followed by a talk by Dr. V V Pai on moxifloxacin based drug regimens in leprosy. In the second symposium Dr. K K Mohanty spoke on immuno genetics of leprosy, discussing the role of various genes including TLR1, TLR2, TLR4, NOD2, MRC1 and VDR in leprosy pathogenesis. The last talk of the conference was by Dr. Pushpendra singh on relapse, reinfection and mixed infection in leprosy. Dr. Singh spoke on the role of whole genome sequencing in differentiating between relapse and re-infection. The awards distribution ceremony took place in Valedictory Function in the end of conference. The Quiz wining team was given ipads. Other awards were in Poster presentation and Oral Award paper session. The IAL Executive took over the charge and Dr Sunil Dogra organizing Secretary LEPCON 2014 was elected as Vice President of IAL. All the participants appreciated the scientific program and the way the conference was organized. As per Dr S K Noordeen “ This was best IAL conference he has attended in his last 54 years." All the delegates left Chandigarh with enthusiasm to further strengthen leprosy control in Country. The conference was held in support with ICMR, DGHS, MoH& FW, WHO, ILEP, Novartis Foundation, ILA & London School of Tropical Medicine & Hygiene.