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Elimination of leprosy in India: Response by authors

Sir,

We thank the authors for responding to our article. Such responses help in consolidating the objections to the way leprosy program is being carried out in India. The health authorities of the Government of India, on 30th January of this year, have declared that India has reached the elimination target by the end of year 2005; which was in many ways predictable by the way the program was run over the last few years. The methods adopted to reach the target in a hurry need a serious appraisal. Leprosy has become, for reasons unknown, more than just a health problem and the 'final push' to reach the elimination target in time by clever methods and manipulation of numbers has been encouraged by all program managers concerned.^[1]

The declaration of elimination of leprosy in parts of the world has undoubtedly discouraged many scientists and funding sources from pursuing it further. The unfortunate experience of premature deemphasis on research in such infectious diseases as tuberculosis and malaria, however, suggest that with a disease as slow but persistent as leprosy, continued effort to understand the underlying mechanisms of disease is essential to the quest for genuine success in conquering it.^[2]

There are other indicators that are of very serious concern. The International Federation of Anti-Leprosy Associations (ILEP), which was funding the very popular 'International Journal of Leprosy and other

Mycobacterial Diseases' all these years, has informed the editorial board of the journal that it will not be able to fund the journal after the year 2005 (personal communication). At the same time, in the 'Indian Journal of Leprosy,' which is one of the few indexed journals of India, the number of original articles has reduced alarmingly in the last 3 years. These changes do not augur well for the future of leprosy program in general and research in leprosy in particular. If this process of neglect of leprosy is not halted, leprosy, which is still a significant public health problem in India and some parts of Asia, will fade away from the radar of the health authorities, only to re-emerge as a serious health problem later. Sustained efforts should be continued and resources made available to achieve a 'world without leprosy,' a concept promulgated during the 'World Leprosy Congress' at Beijing in 1998.^[3]

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Modified combined methotrexate PUVA therapy in the treatment of recalcitrant psoriasis: A preliminary report

Sir,

Methotrexate probably reduces the thickness and scaliness of psoriatic plaques, altering the photooptical properties of the diseased skin so as to increase the penetration of UVA radiation, resulting in the marked reduction in the total cumulative exposure