

Reading the reports of certain of the Technical Committees (originally set up as Round Tables and Panels) of the VIIIth International Congress of Leprology, held in Rio de Janeiro in September 1963, engenders a feeling of dismay. In the first place—and this is a relatively minor matter—of the four versions seen (discussed in the News section of this issue) no two are identical. The one issued as a special pamphlet by the Congress headquarters, which must be regarded as the “official” version, shows evidence of lack of editing in the variety of arrangements (formats) and in the texts.

Of the reports in general, one correspondent (who, for lack of permission, cannot be quoted by name) has said that they were “written with much pretense and little knowledge.” The most disturbing of them are, specifically, those on Borderline and Intermediate Leprosy, on Leprosy Reaction, on Epidemiology and Control, and especially what purports to be the report of the panel on Bacteriology and Immunology.

The other reports, on Pathology and Experimental Transmission, on Therapy, on Education and Social Aspects, and on Physical Rehabilitation have—except perhaps for the last—much of the virtue of the brevity and succinctness expected of such documents.

The report on Borderline Leprosy is commendably short, but that is about all that can be said in its favor. It is completely written anew, the descriptions of the WHO Committee of Experts (1952) and of the Madrid Congress (1953) having been completely and recklessly ignored. Particular objection, in our opinion, certainly applies to the statements that the development of this condition is “rarely from the tuberculoid type,” and that it “may start as borderline.” The occurrence of a normal-appearing area of skin surrounded by an elevated lesion is regarded as one of the characteristic features, but there is no recognition of the fact that that central area represents the site of a previous major tuberculoid plaque which, in healing, left the site immune to involvement in a later reactional episode.

In the introduction to Leprosy Reaction report it is stated that “there is confusion in terminology.” In this report, which is another complete departure from previous ones, it is held that the only condition that should be so named (apart from the Lucio phenomenon) is the erythema nodosum leprosum type, including the erythema multiforme variety. The old-fashioned “lepra reaction,” or “lepra fever,” is dismissed as “lepromatous exacerbation,” without any explanation of why that should not be considered a form of reaction. Tuberculoid reaction is not considered. One can do no better than quote from an edi-

torial in *Leprosy in India*: ". . . those recommendations, instead of clarifying the situation, tend to make confusion worse confounded."

The Epidemiology and Control report is simply staggering in length, occupying no less than 24 pages in the COCIL pamphlet. A list of topics covered would show how wide-ranging it is, but space lacks for that. Apparently an attempt was made to cover everything that is established and all that should be known, including, for random examples, the following: "For twins' study a world central registrar (*sic*: possibly a misprint for "registry.") of twins with leprosy should be set up . . ." and "Epidemiological methods should be more extensively applied to the study of lepra reaction." One wonders who will ever read the entire report, and how it will be employed.

As for the report of the panel on Bacteriology and Immunology, what substitutes for the expected document can by no means be regarded as a consensus, or "official." The panel, it seems, was divided into three subcommittees, for Bacteriology, Immunology, and Serology—the last holding a "work conference" in cooperation with the Pan-American Health Organization. No written report on any of these topics was presented for consideration of the final plenary session of the Congress; the chairman of the panel is said to have made a verbal report, and was to prepare a written one later. What was produced appeared in full—complete with 5 tabulations—in the COCIL pamphlet, but was severely reduced in *THE JOURNAL*, with elimination of 4 of the tables used; it was not available for use by *Leprosy Review* and *Leprosy in India*. The result is nothing more than a long, diffuse, personal essay, in no way of the nature of a formal report and not quotable as one should be.

The situation as a whole should serve as a warning for any future congress. In the first place, the groups to serve as the technical committees should not be unlimited in numbers and selected on a political basis, attempting to include, for kudos, everyone known to be coming to the meeting. The groups should be—as advised by the CIOMS—as small as possible, and each should be confined to people known to have some "expertise" on the subject dealt with. Second, every committee should be required to submit, by a given date, a formal written report of reasonable length, lacking which its efforts would be entirely disregarded. Finally, the congress should always set up an Editorial Committee, whose duty would be to make the reports uniform in format and acceptable with regard to wording. Only after that should they be mimeographed and presented to the final session, and made available for publication.

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