

21st International Leprosy Congress - ILC 2022: A Report on the Conference

The 21st International Leprosy Congress-2022 (ILC-2022) was held at Hyderabad, India from 8-11 November, 2022. The venue of the congress was the HITEX Exhibition Centre and Novotel-Hyderabad International Convention Centre (HICC). In view of the prevailing Covid-19 pandemic the congress was planned and held in a Hybrid mode with both physical and virtual sessions. It was heartening to see over a thousand registered for the congress as physical delegates and close to 500 as virtual delegates. There was representation from 56 countries with an age-range of 25-75 years and the flags of the different countries were displayed in the foyer and in the plenary halls of the congress. The theme of the congress was *Better Knowledge, Early Diagnosis and Improved Care* and special thematic sessions were conducted during the scientific sessions based on the theme. All the major global leprosy stakeholders including global leprosy programme -world health organisation (GLP-WHO), international federation of anti-leprosy associations (ILEP) and other NGOs working for leprosy (both in programme management and research), National leprosy societies and associations and a number of government leprosy agencies took part in the Congress.

Various global leprosy stakeholders utilised the opportunity of the ILC to hold pre-congress meetings and workshops. These included the '2nd Global Forum of People affected by leprosy' conducted by Sasakawa Health Foundation where there was participation from many countries all over the world and Samadrishti -Kshamata Vikas Evam Anusandhan Mandal (SAKSHAM), an Indian organization caring for 21 disabilities, including leprosy had a pre-congress consultation and workshop for their members. ILEP held its technical commission and member assembly meetings as pre-congress

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events. In addition, meetings were held by American leprosy mission (ALM) and LEPRO society as pre-congress meetings or on the side-lines of the congress.

The ILC was jointly organized by the Indian Association of Leprologists (IAL), the Indian Association of Dermatologists, Venereologists and Leprologists (IADVL) and the Central Leprosy Division (CLD) Government of India under the auspices of the International Leprosy Association (ILA). Over 1050 abstracts were received through the ILC web portal (www.ilc-india2022.com) for presentation and were screened by over 125 reviewers drawn from all over the world. The abstract submission as well as the review process was handled through the web portal seamlessly. Team *Mediknit Pvt Ltd* provided web and backend support during the planning and execution of the congress. The 6 main subject topics under which papers were called for included Clinical Aspects; Epidemiology and Control; Social Aspects; Lab Aspects; Disability and Rehabilitation; and Therapeutics. An Abstract Mentor Programme was announced where a group of volunteers mentored prospective presenters on the content and presentation of their abstract. Many availed this opportunity including people affected by leprosy who wished to present papers at the congress. The abstract book was indexed and the abstracts were given an ISSN (International Standard Serial Number) so that the abstract could be cited in publications.

The virtual congress was inaugurated on the evening of 8th November 2022 by the President of the ILA, Dr Roch C Johnson in the presence of the Secretary General of the IADVL. The physical congress was inaugurated on the morning of 9th of November with a plenary address by Mr Yohei Sasakawa, the WHO Goodwill Ambassador for leprosy and chairman of

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the Nippon Foundation. The abstract book of the ILC 2022 and a special Congress commemorative book 'A Chronicle of Indian Leprosy' were released at the inaugural ceremony.

Plenary sessions were held on all three days drawing attention to important aspects of leprosy. Seventy seven scientific sessions were held physically in 8 break-out halls at the HITEX and the HICC. Simultaneous translation into French and Portuguese was provided for all the plenary sessions and many of the delegates availed the facility. There were 39 scientific sessions in the virtual congress in 5 virtual halls and covered the subject themes. Computer aided simultaneous translation was available to the delegates in 13 languages as an added convenience. There were two sessions in Portuguese for Portuguese-speaking countries, in the virtual congress. A leprosy session in French was hosted in the physical congress. A special session was dedicated to innovations in leprosy and designated 'Innovation Session and Laboratory' where four stakeholders which included Lepra Society, the leprosy mission-India (TLMi), ALM and Molbio Diagnostics presented innovations mainly in the area of leprosy diagnostics and demonstrated the tests in the innovation labs at the exhibition hall. This session was well attended and generated considerable interest regarding many potential early diagnostic tests for leprosy and their possible application and availability as point-of-care tools in leprosy.

This congress had many special features and sessions. A versatile Mobile App was designed both on the Android and iOS platforms that could be downloaded by the delegates which carried dynamic information on the congress programs and sessions. All registered users received reminders of sessions that they flagged up as important. An exclusive session for Persons Affected by Leprosy was conducted in the main plenary hall on day-1 which was well represented and attended.

A special plenary session on Research Priorities and Funding for research was conducted by leprosy research initiative (LRI) and global partnership for zero leprosy (GPZL). The session was very well received as it was conducted as a unique interactive session where the audience could respond on their smart phones and the outcomes presented on the screen in real time. A special session was conducted on Priorities in High-Load leprosy countries where there were presentations from India, Brazil and Africa bringing out the challenges and approaches to these challenges. This was followed by a panel discussion where delegates from Indonesia, Nepal and democratic republic of Congo (DRC) also expressed their viewpoint on the challenges in these high-load leprosy countries.

A unique program was the Quiz for postgraduate students and research trainees which attracted students and scholars from many medical institutions and prizes were awarded on the final day of the congress. Award Papers sessions were conducted both in physical and virtual congress for

student-trainee delegates and the best papers awarded prizes and certificates during the concluding plenary.

More than 960 papers were presented either as e-posters or as oral papers in the physical and virtual modes. A new addition to the scientific content of the Congress was the 'Short Video presentation' and there were 15 of them displayed. We believe that the scheme of presentations is a reflection of the present scenario of leprosy and below we describe a brief summary of the key take aways and presentations from the congress.

Clinical Aspects: Among the 270 clinical papers/posters category 92 highlighted the clinical variants of leprosy with a significant number mentioning Histoid leprosy. Whether these are related to drug resistance or not is a matter of concern. There were 66 presentations highlighting issues related to reactions, neuropathy and nerve function impairment (NFI) showing this as another area of concern. The 21 presentations on leprosy in children were something to caution us. Interestingly there were only 11 presentations on adverse drug reactions (ADRs) and could imply the continued safety of the present regimen. With multi-drug therapy (MDT) there seems to be far fewer cases of eye problems in leprosy. Also, there were few papers on relapse, post release from treatment (RFT) issues, neuropathic pain and expectedly leprosy care in COVID.

Epidemiology and Control: Among the 227 presentations on epidemiology and control, over half were on aspects of the distribution and spread of the disease, on disease mapping, geographic information system (GIS) and programmatic management of the disease. Integration with neglected tropical diseases (NTD), – the values and challenges was also a point of deliberation in the congress. Other topics touched upon in the presentation were Monitoring and evaluation, transmission, and the impact of migration and covid on leprosy control. The rise in antimicrobial resistance was the focus of one of the sessions and this needs to be monitored closely in the future.

Laboratory Aspects: There were 163 presentations on laboratory aspects of leprosy, with one third of them focusing on the early diagnosis of leprosy emphasizing this felt-need area. It was heartening to note that many laboratories are focusing on this aspect and hopefully we should have a good diagnostic tool in the near future. There is still a significant interest in the immunology and molecular biology of the disease with a third of the presentation on it. The value of slit skin smears, skin biopsy and nerve biopsy in certain situations was highlighted by both lead speakers and in the presentations. Other emerging lab aspects discussed were genetics, genomics and bioinformatics.

Social Aspects: Among the 158 presentations, the psychosocial health of persons affected was a major emphasis of the talks. Stigma and discrimination continue to be areas of concern as brought out by the presentations. Social rehabilitations and capacity building were two areas of focus among social aspects of Leprosy.

Disability and Rehabilitation: Plantar ulcers and deformity continue to be an area of concern. Physical and surgical rehabilitations and Reconstructive Surgery (RCS) were highlighted in the presentations as well as lead talks. The use of 3D technology in designing and creating appropriate footwear was a novel area which attracted attention during the presentations and lead talks.

Therapeutics: There were relatively few abstracts (64) submitted on therapeutics. This is probably reflective of either the high level of confidence and satisfaction with the WHO MDT regimens or paucity of research in this area. Nonetheless, high on the list of papers presented was the topic of new Drugs and Regimens for treatment of Leprosy suggesting that there is a need to look beyond conventional MDT. MDT and Treatment outcomes and management in special situations like Covid-19 and pregnancy were presented. The special issues and challenges in managing high BI MB Leprosy was identified as a very important area of concern both for the patient as well as for epidemiological implications. The studies on use of Single dose Rifampicin (SDR) for Leprosy Post exposure Prophylaxis (L-PEP) was the focus of symposia and free paper sessions both in the physical and virtual modes. Other vaccines like LEPVAX and MIP figured as free papers and topics for symposia. It was an honour to have Padma Vibhushan Awardee Prof. GP Talwar at the ripe age of 96 to deliver the lead talk on MIP vaccine which is named after him and the institute where the work on MIP was carried out.

During the General assembly of ILA at the Congress, Dr P Narasimha Rao, the Organizing Secretary of ILC 2022 was elected as the President of the International Leprosy Association (ILA). The Minister for Tourism and culture, Govt of India, Sri G Kishan Reddy graced the closing session of the congress and presided over the valedictory function. The Central Minister for Health, Govt. of India, Dr Mansukh Mandaviya gave a recorded video message to the delegates of the congress. During this function the 3rd Edition of the IAL Textbook of Leprosy was released in the presence of Editors of the book, Dr Bhushan Kumar, Dr HK Kar and Dr Sunil Dogra. The key to the next

International Leprosy Congress (22nd ILC) was handed over to Dr Yulianto Listiawan of Indonesia during the closing plenary of the Congress. The next Congress, the 22nd ILC, will be held in the year 2025 in Bali, Indonesia.

Conclusion

The ILC 2022 was held at an important time when the global leprosy programme has just about recovered from the impact of Covid-19 Pandemic over the last two years. With the goal for reaching the global target of Zero leprosy just about seven years away, the deliberations of this Congress over 4 days helped to bring focus back on leprosy. It witnessed true global participation with representatives from fifty-six countries and all major global leprosy stakeholders taking active part in the Congress. During the ILC 2022 there were a number of presentations on the impact of Covid-19 pandemic restrictions on leprosy, including possible increase in the backlog of hidden cases with a higher incidence of new cases presenting in the community. It is noteworthy to mention that, as the early diagnosis of leprosy is of highest priority in our fight against the disease, there were number of presentations and special sessions on the use of lab markers for early diagnosis of leprosy, both in patients and contacts, to expedite the possibility of making them point-of-care tests at field level. Also, there were special sessions on the use of PEP (SDR) in contacts of in leprosy, in addition to presentations on use of PEP++, as tools for interruption of transmission in the community.

While the 21st ILC 2022 has not come out with any formal conclusions or recommendations based on its deliberations at the end of the conference, it provided an important and unique opportunity for stakeholders of leprosy from all over the world to meet both physically, as well as virtually, to share new learnings since the last ILC at Manila. It allowed stakeholders to leave Covid and its aftermath behind and move forward with renewed determination to make up for any losses and reset new goals and priorities for the years ahead. Much was achieved during the congress and we can look forward with hope to reaching many more milestones in the rest of the decade.