Each year the Field Officer for the Foundation in Samoa, delivers Christmas hampers to the many families we assist. The hampers generally contain tins of fish, chicken, rice, soap, bed linen and some special treats. This year delivery of the Christmas hampers coincided with the continuing implementation of the MDT Plus programme in Samoa.

On arrival, all close contacts of our leprosy patients were examined carefully for signs of active leprosy – once we were sure that they were currently healthy, they could be given their annual dose of Rifampicin. Then it was time to hand over the hampers. The Solomona family, for example, received clothes, toiletries and food – but no rice as they have plenty of starches from the products of their plantation. Instead they got tins of fish in tomato sauce – a great treat!

The next visit was to Peiu Malaga’s house. Peiu, had leprosy a few years ago. Because of the leprosy, the father gave him the worst piece of land when he divided up the family’s customary land among his children. It’s a bit distant from the other tracts of land. Peiu built a small fale there but the fale would flood when there was a lot of rain. The Foundation helped to build a new fale for him higher off the ground. They now have a little family business making fans to sell at the market. Peiu goes out into the forest and collects pandanus leaves; his wife then scrapes them into strips and dries them in the sun, the grandmother then makes fans from the strips and Peiu’s brother goes into town to sell the fans for 5 tala each.

All the children were given new shorts, except for the smallest boy, Imo. The shorts brought for him were too small – he was very sad, but his disappointment was overcome when he discovered the other items in the hamper. Their Christmas hamper contained food, soap, toothpaste, biscuits and lollies. Another box contained sheets, towels and a sack of rice. Imo now has a new pair of shorts – they were delivered just after Christmas.
**San Rareve – Vanuatu**

Our latest leprosy case in Santo is a man aged 70 called, San Rareve. Very often, as people get older, their immune system weakens and they may develop diseases such as leprosy that they had been successfully fighting off for years – having no idea that they were incubating the disease. Recently, one of our volunteers, Tolong, visited San at his home to check on his condition and see if he had any needs. These are excerpts from his report:

**Family**
San lives with his wife Vekarae in a village called Supamalao which is 2-3 hour walk from Namuru village, towards the bush. They don’t have any children, but they adopted one (Marian) from Vekarae’s sister. Like other couples in the village, they have a lot of extended family that support and help one another. Currently Marian is working at a bank as a customer service officer.

**Health**
Physically, San is a very healthy man, and, after taking his first course of leprosy treatment, his condition has improved a lot. With proper care his sores are healing and are already much better. As with the other elderly people in the village, he does a lot of gardening, which is their main source of food. He is very active and physically strong. Finding and treating his leprosy before he develops any disability will allow San to continue his active lifestyle.

**Food**
They survive thanks to their garden. They practice polyculture with the others members of the village. They cultivate common crops such as banana, taro, kava, kumala, yam and other fruits and vegetables. There is plenty for them to eat. Water is more of a problem as it has to be collected from the river. Tolong has suggested that a rainwater collection tank would be a big help. We will arrange this. Not only will it help San and his family, it will also be a community resource.

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**Katikoraa – Kiribati**

Katikoraa is lucky to be living on a reasonably large piece of land on South Tarawa (which is very overcrowded in most areas). The only nearby inhabitants are eight relatives who live about 100 metres away. She lives with her husband and son in a tiny thatched shelter about 2.5 metres square.

She has a nasty sore on her leg as a result of leprosy and spends most of her time in her shelter trying to prevent her wound from getting worse and dressing it with iodine and bandages. Unfortunately her efforts aren’t getting the results she needs and she will have to go to the health clinic at Nawerewere to see if they can help her.

She desperately needs a better house to be built using her coconut palms as a resource for some timber. Thatch, nails and other materials will be provided by the Foundation – as well as labour for the actual build.

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San and his wife Vakarae are on the left and right of the photo respectively – between them is a family member, Kathleen.
Leprosy and Robert the Bruce

This article, written by Patrick Whittle, was recently published in The Press. He has kindly agreed to us replicating it here for those of you who may not have seen it:

After 700 years of uncertainty, state-of-the-art digital technology has finally put to rest a right royal debate - Scottish king Robert the Bruce, as had long been suspected, did indeed suffer from leprosy.

The reconstructed face of the king, who famously defeated the English at the Battle of Bannockburn in 1314, has two tell-tale signs of leprosy, a disfigured jaw and nose. The digital image of the face was created using a cast Bruce's skull, first unearthed at Dunfermline Abbey in 1818.

This story was reported in December around the English- and Scots-speaking world, including in New Zealand. But what might be real news to most New Zealanders is that leprosy still exists, and that the disease still occurs in New Zealand.

“Most people think it is a disease of ‘olden times’ and that it has been eradicated,” Pacific Leprosy Foundation General Manager Jill Tomlinson said. “If they think it might still exist, it would only be in places a long way from here.”

According to Tomlinson, however, two to three new cases of leprosy are diagnosed in New Zealand each year. “These are usually new New Zealanders, who either had the disease when they arrived or were incubating it.”

The chronic infectious disease, caused by Mycobacterium leprae, has a long incubation period lasting several years, so many carriers may not initially know they have the disease. The bacteria attacks the skin and the peripheral nerves, and if left untreated leads to “clawing” of the hands and feet, blindness and disfigurement. Injuries caused by loss of feeling in the limbs also often result in amputation.

And for the majority of Pacific island nations, leprosy is still a major social and medical issue.

“Like many communicable diseases, leprosy continues to be a problem in places where the conditions are right for transmission - in overcrowded conditions, where there is poor nutrition and poor hygiene,” Tomlinson said. “In short, it can be considered a disease of poverty. While we usually see the Pacific Islands as idyllic places and holiday destinations, in reality many people in the Pacific live in poverty.”

While medical treatments for leprosy have existed since the 1940s, a major problem in tackling the disease is the social stigma attached to being a “leper” - a factor that also impacted on Robert the Bruce.

Until the recent face reconstruction, the rumours that Bruce was infected with the disease had remained just that, with many historians believing he was the victim of a medieval smear campaign.

And even in New Zealand, well into the 20th century, those suspected of carrying the disease were banished to isolated “leper colonies”, such as those on Quail Island in Lyttelton Harbour, and Wellington's Mokopuna Island, which is still known as “Leper Island”.

Indeed, such are the negative connotations of “leper” that the term “person with leprosy” is now preferred.

Addressing the socio-cultural aspects of leprosy therefore goes hand-in-hand with the medical treatment for Tomlinson’s organisation. “A big focus is on reducing stigma which is a major reason people are reluctant to come forward and be checked and diagnosed.”

Coinciding with World Leprosy Day on January 30, the Christchurch-based Foundation is now introducing a new preventative measure to help stop transmission of the disease.

“Currently the only way of preventing [leprosy] is to diagnose cases early and treat them, so that it is not being transmitted to others in their community,” Tomlinson said.

The antibiotic Dapsone was introduced in the 1940s to treat leprosy, with combinations of drugs, known as Multiple Drug Therapy (MDT), being used since the 1980s. Those diagnosed with leprosy may need to receive treatment with MDT for up to 12 months, depending on the severity of the infection, with this long treatment regime also causing problems amongst poor communities.

“Patients need to be committed to the duration of treatment and there needs to be good follow up to ensure the full course is completed,” Tomlinson said.

Contrary to long-standing popular belief, leprosy is not highly contagious, and people are most likely to contract the disease from a close family member.

The new preventative measure consists of giving a single dose of MDT drugs to those who have close contact with patients. According to Tomlinson, this can “reduce the likelihood of a household contact developing the disease by 50-60 percent”.

Although Robert the Bruce may be the new face of leprosy, the disease is one of the oldest known to humankind. The term itself comes from the Latin ‘lepra’, meaning scaly, a reference to scale-like skin deformities resulting from the disease.

Three thousand year old skeletal remains from India provide the oldest direct evidence of the disease, although it is thought to have existed for much longer. In the case of Bruce, whose skeleton was sealed in pitch and reburied in the early 19th century, researchers relied on the indirect evidence from the cast of his skull taken at the time for signs of the disease.

The effects of long-standing leprosy on the skull and face. The skull and facial reconstruction of Robert the Bruce by Richard Neave. Photo courtesy of historum.com

The Press. He has kindly agreed to us replicating it here for those of you who may not have seen it:
Happy New Year to you all – although I realise that by the time you are reading this, we will already be nearly two months in to 2017! I love the start of the year and the anticipation of the places I will visit, the people I will meet, and the progress the Foundation will make in our battle against leprosy.

For those of you with a Facebook account, keep an eye on our page as we give you regular updates from around the Pacific, otherwise you can also keep up to date with our news on our website, as well as through our newsletters and donor meetings. I look forward to seeing as many of you as possible during my travels throughout the year.

Lala’s Desk

Tongaa’s Shop – Kiribati

Tongaa has suffered from leprosy and has nerve damage leading to clawing of his hands. He was living with his family when his father told him he had to find somewhere else to live as the house wasn’t big enough for everyone. Tongaa had no job and nowhere else to stay, so he asked Wayne, our Field Officer in Kiribati for help. Between them Tongaa and Wayne came up with a clever plan.

There was no local shop in the area where Tongaa was living, so it was decided to build him and home and a shop – all in one. The building is about 6 metres by 3 metres. Tongaa sleeps in one half, and the shop is in the other half. The shop serves a regular community of about 50 people as well as passers by – it has been a real asset to the village. The building was constructed to be easily movable, so if Tongaa wants to relocate his shop, it can be done (with a bit of help!).

When the shop needs new stock, Wayne delivers it to Tongaa who pays him out of his profits.

When Wayne visited to take a photograph of Tongaa, he was dressed in a lava lava – but he asked for time to get dressed up for the important business of having the photograph taken!

Information

WHERE IN THE WORLD?

We currently manage projects to assist those affected by leprosy in the following countries:

- Fiji
- Tonga
- Samoa
- Vanuatu
- Solomon Islands
- Kiribati
- New Zealand
- Tuvalu

Thank you so much to all of you who make this work possible through your interest and generosity.

DIRECT CREDIT

We are happy to receive donations by direct credit.

If you wish to use this option, please use your surname and donor number (six figures to the right of your name and address on our appeal coupon) as a reference, so that we know where to send the receipt.

The bank account number is: **02-0800-0037987-000**