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Drug resistance pattern of *Mycobacterium leprae* from mouse foot pad cultivation during 1997 to 2013 in Malaysia

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Background: After three decades of implementing multidrug therapy (MDT) consisting of rifampicin, dapsone and clofazimine in Malaysia, drug resistance pattern of *Mycobacterium leprae* is a growing concern as it may lead to failure of treatment and relapse of disease.

Objective: To determine the drug resistance pattern of *Mycobacterium leprae* in Malaysia.

Methodology: Mouse footpad (MFP) culture of all skin biopsy samples from patients with borderline lepromatous and lepromatous leprosy sent to the Leprosy Unit, National Public Health Laboratory, Sungai Buloh during 1997-2013 were retrospectively studied.

Results: There were 638 MFP cultures performed. The mean age of patients was 41 years old (range: 6-88). The Male:Female ratio was 3.76:1. 436 patients (68.3%) were Malaysian. The rate of positive *Mycobacterium leprae* culture was 67% (427 of 638). The median Bacteriological Index (BI) and Morphological Index (MI) for those with positive culture were 4.0 and 2.8. The median BI and MI of those failed to grow in MFP were 3.6 and 1.7 respectively and they were significantly lower than those with positive culture ($p \leq 0.001$). Dapsone has the highest resistance rate of 55% (236 of 429). There were 425 MFP tested for clofazimine and 98 (23%) were resistant to it. Rifampicin has the lowest resistance rate of 2.7% (11 of 403). There were no significant differences between the drug resistance pattern and the gender or the nationality of the patients.

Conclusion: More than half of our positive MFP cultures were resistant to dapsone; about a quarter were resistant to clofazimine and less than 3% were resistant to rifampicin. Monitoring of leprosy resistant pattern is important as there are not much advances in treatment and important to detect early any changing pattern of resistant.

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Long lasting fillers

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The field of facial aesthetic surgery is experiencing explosive growth in non-invasive and minimally invasive procedures. Biosynthetic fillers such as cahydroxyapatite, polycaprolactone and poly-L-lactic acid are biodegradable fillers and considered to be long lasting fillers. Poly-L-lactic acid was the first one to be used in aesthetic surgery; it is a polymer that provides soft tissues augmentation through stimulation of an inflammatory tissue response with subsequent collagen deposition. Cahydroxy apatite and polycaprolactone each consists of a gel carrier and the cahydroxy apatite spheres and polycaprolactone spheres respectively , that once injected in the subcutaneous space, the gel is slowly absorbed, what remains is a matrix of material which will take the characteristics of the cell that repopulate. When injected into the tissues space, fibroblast produces collagen. The author clinical experience with these three long lasting fillers will be presented.

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