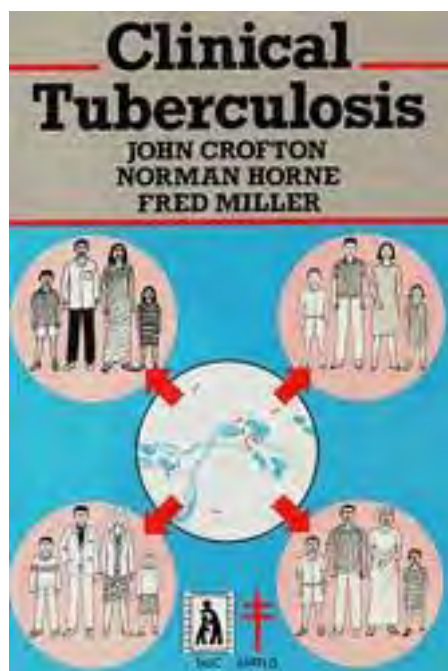


June, 2006

Dear Colin,

Thank you very much for sending me the June edition of BODHI Times. I was interested in the account of the refugees from Chittagong in Assam. When I was advising on medical education in Bangladesh I visited many medical schools, including Chittagong. As a relaxation one evening the local doctors drove me up into the hill tracts of Chittagong. It was a beautiful evening and a lovely calm lake up there but I did learn that there was just the beginning of the problems for the ancient local tribes as the everflowing population of Bangladesh was beginning to move into the hills. This was in 1978.

I was also interested in your editorial and thoroughly agreed how mistaken it was to prescribe developing countries to switch over to having to pay for medicines, with the abolition of vertical programmes. In Zambia, for instance, the tuberculosis programme was quite suddenly abolished and the tuberculosis advisors in the Ministry of Health moved to other jobs. The result was that there were quite suddenly no drugs at all for tuberculosis. I raised this at the time at a meeting of the College of Physicians in London, though the representative of WHO there defended the new policy. However I was backed by somebody else who reported that in Uganda the child vaccination services had also been quite suddenly abolished. I wrote a strong letter to the British Medical Journal at the time. Although that international policy seems to have decreased, there are still important residua. For instance I have just learnt that in Vietnam, with the new international support there are free drugs for treating tuberculosis but in many of the provinces patients have to pay for diagnosis and many are too poor to do so. When they are diagnosed and have treatment Vietnam is getting extremely good results with 90% cure.



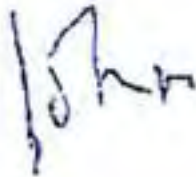
I was also interested to read about your help for the deaf in Nepal. I have had three long sessions advising about TB in Nepal and was for a number of years chairman of the tuberculosis committee of

the Britain Nepal Medical Trust. I still keep in touch. Astonishingly Nepal had continued to have excellent and well-coordinated TB services in spite of the present political anarchy there. Incidentally you probably know that congenital deafness is relatively common in South India. This is attributed to the local habit of uncles marrying their nieces. When I was convalescing after an illness there, a very smart young man did approach me for monetary help. He turned out to be one of those born deaf and having great difficulty in making his way.

do congratulate your organisation which is obviously doing a good deal to help in various places in the Third World. Some years ago when British concern for international TB problems had faded after our own decrease in the disease. some of us started a new British charity to help overseas. TB Alert. They made me their Honorary President. They also help in various areas and have given assistance to a missionary group serving the aboriginal tribes in the hill country of South India. It also gives help to other places in India and Africa. I also personally support a number of British charities helping in various ways in the Third World. I have good reason to admire what you do.

All best wishes for the future.

Yours sincerely

A handwritten signature in blue ink, appearing to be 'John', written in a cursive style.