



EDİTÖRE MEKTUP / LETTER TO THE EDITOR

Strategies to combat on the resurgence of leprosy: Points to be emphasized

Cüzzamın yeniden alevlenmesine yönelik mücadele stratejileri: Vurgulanması gereken noktalar

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To the Editor,

An interested topic was discussed in a world report, Experts fear a resurgence of leprosy in India by Sophie cousins.¹ In view of this report on the leprosy and an attempt to eliminate the same stigmatized disease from high endemic areas and to eradicate from the society, the Central Leprosy Division under Union Health Ministry has followed good strategies. It was also commented on Leprosy case detection campaign (LCDC), which resulted in the detection of 34 000 new cases in 2016 from highly endemic pockets, which accounted for 25% of annual new cases² of the total new cases detected, almost 50% were multibacillary leprosy with the child rate accounting to 8.7% and was put under treatment³. Sparsh leprosy awareness campaign (SLAC) was launched where nationwide Gram Sabhas will be organized in cooperation and coordination with allied sector of health department/ministries, namely, Panchayati Raj Institutions, Rural Development, Urban Development, Women and Child Development, and Social Justice and Empowerment and message on leprosy awareness is spread out throughout India². Single dose rifampicin among contacts of patients with newly diagnosed disease and from a trial done at Dadra and Nagar Haveli in 2015 have shown effective and it was decided to add SDR among consented contacts screened from LCDC nationwide. Mycobacterium Indicus Parnii (MIP) vaccine trial on field basis, one of the state in India,

Gujarat is planned for trial with three arms with vaccines, single dose rifampicin and combination of both, respectively. Regarding the discriminations, “The Personal Laws (Amendment) Bill (2018)” seeks to make a start in amending the outdated and irrationale statutes. It mainly attempted to end the discrimination against leprosy affected persons in various central laws that includes the Divorce Act (1869), the Dissolution of Muslim Marriages Act (1939), the Special Marriage Act (1954), the Hindu Marriage Act (1955), the Hindu Adoptions and Maintenance Act (1956).The amendments omit the provisions which stigmatise and discriminate against leprosy-affected persons and their family members.The Bill is meant to provide for the integration of leprosy patients into the mainstream. It listed for abolition of personal laws and Acts on beggary. While governments may have to handle the legislative part, “we society” has an even larger role to play⁴.

So from the above strategies, the hidden cases from the society were brought under treatment and for the prevention of transmission ‘chemoprophylaxis by single dose rifampicin and vaccination were implemented. Apart from this, NIKUST online were functional for proper incorporation of information and data on patients that is highly needed in developing countries like India.

So it is concluded that like India other countries bearing the burden of leprosy can follow the

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programs nationally and the legal aspects of the leprosy diseases has to be taken care as we all know that leprosy is a disease caused by bacteria and not by the curse of anything else.

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