

Activities in NLEP (2021-2022)

Even though Kerala is a low endemic state for Leprosy, the epidemiologic situation is gradually changing with detection of high proportion of child cases and Grade II deformities among newly detected cases. The scenario is compounded by the presence of migrants from high endemic states. Vulnerable population such as tribal, coastal, urban slums, migrants needs to be addressed specifically. Surveillance needs to be strengthened for early detection of Leprosy cases in the community and treatment of positive cases to interrupt transmission of the disease.

Targets Under Sustainable Development Goals are

- Reduce the prevalence rate from 0.2 to <0.1 per 10,000 at all levels (District, Block and Panchayath)
- Reduce the incidence of child cases of leprosy from 1.17/million to < 0.6/million
- Rate of child case with zero disability to be sustained
- Reduce the rate of Grade 2 deformity (visible deformity) from 1.2/million to < 1/million

Under Sustainable Development Goal, Government of India is committed to eradicate Leprosy by 2030. State Government is targeted to eradicate Leprosy by 2025-26.

LEPROSY STATUS AT A GLANCE 2021-22				
		PB	MB	Total
1	No: of Cases under Treatment till December 2021	54	393	447
2	No. of new cases Detected During 2021-22	61	203	264
3	No.of Grade 2 Deformity Cases	0	15	15
4	No.of Child Cases	6	7	13
5	Prevalence Rate	0.125		

Achievement

Achievement /Highlights of NLEP during 13thFive-yearPlan (2017-22)

YEAR	2016-17	2017-18	2018-19	2019-20	2020-21	2021-2022
New Cases Detected	496	520	705	675	311	264

No: of Cases Under Treatment	706	720	851	899	419	447
Prevalence Rate (PR)	0.18	0.19	0.25	0.25	0.12	0.121
Annual New Case Detection Rate) ANCDR	1.2	1.3	2.1	1.87	0.88	-

SDG-ACHIEVEMENT UNDER NLEP 2021-2022

SDG Target and District wise Achievement under NLEP				
DISTRICTS	Reduce the PR from 0.2/10000 to <0.1	Reduce Child cases of leprosy from 1.17/million to < 0.6/million.	Reduce Grade 2 deformity from 1.2/million to < 1/million	Rate of child case with zero disability to be sustained
TVM	0.23	0.58	1.44	0
PLKD	0.23	0	1.02	0
KSGD	0.11	1.28	0.64	0
KNR	0.11	0	0.75	0
KKD	0.19	0.31	0.31	0
TSR	0.11	0.61	0	0
ALP	0.07	0	0	0
MLP	0.14	0.46	0.23	0
EKM	0.1	0.29	0.58	0
IDK	0.07	0	0	0
KLM	0.05	0	0.36	0
PTA	0.06	0	0	0
KTM	0.05	0.48	0	0
WYND	0.11	1.17	0	0
TOTAL	0.13	0.34	0.43	0

Major Initiatives

The following projects are being implemented by the department.

1. ASWAMEDHAM 3.0 & 4.0, ACTIVE CASE DETECTION & REGULAR SURVEILLANCE FOR LEPROSY (ACD&RS)

Active Case Detection & Regular Surveillance for leprosy (ACD&RS) is implemented to detect leprosy cases at an early stage by active surveillance of population above 2 years of the given village/urban pocket by survey and providing treatment and prevention of disability. This survey aims to end transmission of disease in community. Survey is carried out by male and female Front-Line Workers selected from community. It also includes health staff of the concerned area. State has already conducted one round of ACD & RS & has detected 81 new cases in the year 2020-2021 and second round is in progress.

2. FOCUSED LEPROSY CAMPAIGNS (FLC):

Reporting of a single G2D case indicates that cases are being detected very late and there may be several hidden cases in the community. In these hot spots, house-to-house visits are conducted by Multi-Purpose Workers (MPW), within 15 days of the G2D case being identified, to examine each resident of the households of the area. In rural areas, screening is conducted in each house of the whole village and in Urban areas 300 households around the location of the G2D case is screened

3. SPARSH LEPROSY AWARENESS CAMPAIGNS (SLAC):

To reduce stigma and discrimination, the SPARSH Leprosy Awareness Campaign (SLAC) was introduced on 30th January 2017 – World Leprosy Day, which is also observed as Martyrs' Day of Mahatma Gandhiji. IEC activities targeted to enhance early case detection is conducted through special village level meetings organized by Health department and Gram Panchayat with intersectoral coordination. Every year the event is organized with a different theme. Major activities conducted in village meetings are pledges, message by District Magistrate, appeal from Grama Panchayath president, role play and Questions and Answers (Q&A) session based on Frequently Asked Questions on leprosy and awareness programmes through social and print media.

4. ASHA BASED SURVEILLANCE FOR LEPROSY SUSPECTS (ABSULS):

ABSULS is an activity introduced in 2017 with the objectives of conducting active surveillance of leprosy suspects & early case detection by ASHA and to improve monitoring and supervision of leprosy case detection activities at village level. ASHA who monitors health status of population of average two hundred households, is asked to submit the number of suspects identified during the previous month with their signature in the monthly meetings. The surveillance reports submitted by the ASHAs are compiled by the Medical Officer (MO). The final surveillance report is submitted by each District Leprosy Officer to State Leprosy Officer and to Central Leprosy Division.

5. GRADE 2 DEFORMITY CASE INVESTIGATIONS (G2D):

All new G2D cases being reported to the healthcare system will be investigated within 15 days of reporting. A format for interview of G2D cases has been designed to find out the factors responsible for the delay in reporting. Understanding the most frequent reasons for delay will help in planning better interventions under the programme. It will help in mapping problem areas and defining priorities for appropriate interventions.

6. ERADICATION OF LEPROSY THROUGH SELF REPORTING & AWARENESS (ELSA)

ELSA (Eradication of Leprosy through Self Reporting and Awareness) is an unparalleled and novel program in the path of Eradication of Leprosy formulated and implemented by Dept of Health & Family Welfare, Kerala. Core strategy of the program is effective utilization of Information Technology for knowledge dissemination on Leprosy in the society and there by motivating public to attend themselves to health care institutions for diagnosis and treatment. Another feature of this program is enabling the service of Dermatologists through e- Sanjeevani a Teleconsultation platform by GOI. It has got much relevance in the COVID-19 scenario as active case detection of Leprosy has been affected because COVID 19 restrictions.

During the previous years, the department has taken various steps to educate community regarding Leprosy by rigorous and continuous campaign to increase case detection and reduce stigma. Through Anti Leprosy fortnight observance, which begins from January 30 of every year we were able to achieve greater momentum to this effort. Even then the view of public has not changed much prompting them to neglect early signs of leprosy and stigma prevents them from seeking health care. Due to this negligence towards initial signs and symptoms, the chance of spread of disease as well as developing deformity increases. This attitude prevails in all sections of society. ELSA (Eradication of Leprosy through Self Reporting and Awareness) becomes significant in this context.

7. NIKUSTH:

NIKUSTH is an online reporting system with a patient tracking mechanism. In this system, data entry at the peripheral level is done, using a comprehensive digitalized reporting format to enable entry into the NIKUSTH software, for recording and reporting of cases detected through ABSULS, LCDC /ACD&RS, ELSA etc. The implementation of NIKUSTH will lead to effective monitoring and patient tracking, creation of a database of cases, early data analysis and prompt feedback.

Trivandrum

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