

**Central Leprosy Division  
Directorate General of Health Services  
Nirman Bhawan, New Delhi – 110011**

**NLEP – Progress Report for the year 2008-09 ending on 31<sup>st</sup> March 2009**

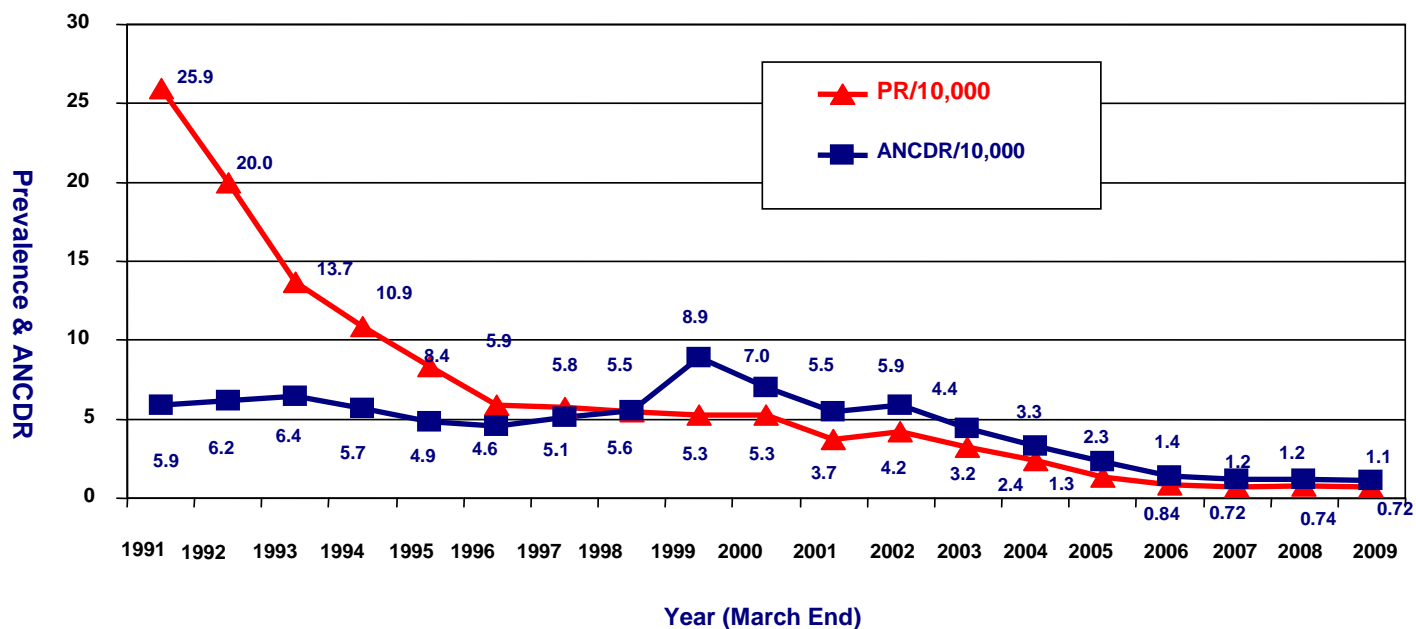
**I. Epidemiological Aspect**

The year 2008-09 started with 0.87 lakh leprosy cases on hand as on 1<sup>st</sup> April 2008, with PR 0.74/10,000. Till then 29 States/ UTs had attained the level of leprosy elimination .482 districts (78.5%) out of total 614 districts also achieved elimination by March 2008.

After detailed scrutiny, 90 districts with >500 new cases during the year were selected as high priority areas and the States/UTs were advised to take specific measures after proper situational analysis. The State Leprosy officer of Chhattisgarh, Gujarat, Jharkhand, Maharashtra, Uttar Pradesh and West Bengal were also advised to look into the high case prevalence (PR>5//10,000) observed in 18 blocks located in these states. All these efforts further helped in progressive improvement of leprosy situation in the country.

Based on the reports received from all the states and UTs for the year of 2008-09 (**Annexure –I**), current leprosy situation in the country has been observed as below.

1. A total of 1.34 lakh new cases were detected during the year 2008-09, which gives Annual New Case Detection Rate (ANCDR) of 11.19 per 100,000 population. This shows ANCDR reduction of 4.36% from 11.70 during 2007-08.
2. A total of 0.86 lakh cases are on record as on 1st April 2009 giving a Prevalence rate (PR) of 0.72 leprosy cases per 10,000 population.
3. Detailed information on new leprosy cases detected during 2008-09 indicates the proportion of MB (48.4), Female (35.2), Child (10.1), Visible Deformity (2.8), ST cases (13.3) and SC cases (19.4).
4. Trend of leprosy Prevalence (PR) and Annual New Case Detection (ANCDR) are indicated in the graph below:



## Status of States

Further analysis of information received from the States / UTs (**Annexure – II**) has shown the following situation.

- 3 States / UTs viz. Bihar, Chhattisgarh and Dadra & Nagar Haveli remained with PR between 1 and 2.5 per 10,000 population. These 3 states/UTs with 10.4% of country's population, contribute 18.9% of country's recorded caseload and 21% of the country's new cases detected during the year 2008-09.
- 32 States/ UTs have achieved the level of elimination i.e. PR less than 1 case per 10,000 population and they include:

**Nagaland, Haryana, Meghalaya, Himachal Pradesh, Mizoram, Tripura, Punjab, Sikkim, Jammu & Kashmir, Assam, Manipur, Rajasthan, Kerala, Arunachal Pradesh, Daman & Diu, A & N Islands, Pondicherry, Gujarat, Karnataka, Lakshadweep, Tamil Nadu, Andhra Pradesh, Uttaranchal, Madhya Pradesh, Maharashtra, Goa, Orissa, Uttar Pradesh, Delhi, Jharkhand, West Bengal and Chandigarh.**

The last three are the new entrants this year.

- Increased number of new cases detected during the year 2008-09 over 2007-08 were in the following 13 states (i) Orissa, (ii) Gujarat, (iii) Maharashtra, (iv) Madhya Pradesh, (v) Delhi, (vi) Puducherry (vii) Kerala, (viii) Nagaland, (ix) A&N Islands, (x) Haryana, (xi) Sikkim, (xii) Daman & Diu, (xiii) Meghalaya.

Proportion of Child cases were more than 10% of new cases detected in 10 States/UTs of (i) Andhra Pradesh 12.28%, (ii) Maharashtra 11.87%, (iii) Bihar 16.64%, (iv) Tamilnadu 16.87%, (v) Goa 15.38%, (vi) D&N Haveli 14.88%, (vii) Gujarat 11.75%, (viii) Daman & Diu 30.00%, (ix)Karnataka 11.81%, (x) Kerala 10.16%.

8. PB Child proportion were high in 4 States/UTs of (i) Tamil Nadu 15.49%, (ii) Bihar 11.73% (iii) D&N Haveli 10.74%, (iv) Andhra Pradesh 9.24%.

### **Status of Districts**

9. District wise situation on the basis of ANCDR as on 31<sup>st</sup> March 2009 is given at **Annexure III**. 394(62.54%) districts out of total 630, have ANCDR < 10 per 100,000 population and 77 districts have ANCDR > 20/100,000. Only 4 districts with ANCDR > 50/100,000 population are in Chhattisgarh (3) and Gujarat (1).

### **Year wise endemicity of districts on ANCDR basis**

| <b>ANCDR/100,000</b> | <b>2004-05</b> | <b>2005-06</b> | <b>2006-07</b> | <b>2007-08</b> | <b>2008-09</b> |
|----------------------|----------------|----------------|----------------|----------------|----------------|
| <10                  | 253            | 317            | 376            | 377            | 394            |
| 10-20                | 110            | 141            | 132            | 141            | 159            |
| >20-50               | 163            | 124            | 97             | 90             | 73             |
| >50-100              | 59             | 13             | 5              | 6              | 4              |
| >100                 | 10             | 1              | 1              | 0              | 0              |
| <b>Total</b>         | <b>595</b>     | <b>596</b>     | <b>611</b>     | <b>614</b>     | <b>630</b>     |

10. District wise situation on PR basis as on 31<sup>st</sup> March 2009 is given as **Annexure-IV**. Progress in district situation during last 5 years are as below –

### **Year wise Status Of Districts on PR basis**

| <b><u>PR/10,000</u></b> | <b><u>2005</u></b> | <b><u>2006</u></b> | <b><u>2007</u></b> | <b><u>2008</u></b> | <b><u>2009</u></b> |
|-------------------------|--------------------|--------------------|--------------------|--------------------|--------------------|
| <1                      | 337                | 439                | 487                | 482                | 510                |
| 1-2                     | 131                | 128                | 105                | 111                | 94                 |
| 2-5                     | 118                | 28                 | 18                 | 20                 | 25                 |
| 5-10                    | 8                  | 0                  | 0                  | 1                  | 1                  |
| >10                     | 1                  | 1                  | 1                  | 0                  | 0                  |
| <b>Total</b>            | <b>595</b>         | <b>596</b>         | <b>611</b>         | <b>614</b>         | <b>630</b>         |

A total of 510 districts (80.95%) out of total 630 districts have reached PR<1/10,000.

As on March 2009 only 26 districts in 9 states are having PR > 2/10,000. These states are Bihar (2), Chhattisgarh (8), Jharkhand (1), Gujarat (5), Orissa (3), Maharashtra(3), West Bengal (2), D&N Haveli (1) and Delhi (1). No district is above PR >10/10,000.

11. Position of districts as per grade II disability status has been given as **Annexure – V**. Altogether 301 districts (47.78%) were with >2% gr. II disability amongst new cases detected.

## **Treatment Completion Records**

12. Out of the total 1.30 lakh new cases deleted from records, a total of 1.21 lakh (92.7%) completed their treatment within the specified period and were released from treatment (RFT) as cured during **2008-09 (Annexure – VI)**. Poor performing states are Delhi (54%), Sikkim (78%), Rajasthan (80%), Goa (82%), Uttarakhand (82%), West Bengal (83%), Haryana (84%), Himachal Pradesh (84%) and Assam (84%).
13. Out of the total 12182, “others cases” recorded for treatment during 2008-09, a total of 8771 (72%) completed their treatment in time and were released from treatment (RFT) as cured during 2008-09 (**Annexure – VII**).
14. Total number of cases released as cured during 2008-09, thus comes to 129798 (90.9%) as against total deletion of 142772. This brings the total number of persons affected by Leprosy cured of the diseases in the country with MDT from the beginning till date to 12.27 million.
15. Treatment Completion Rate (TCR) for the reporting year 2007-08, based on New case cohorts of PB (2006-07) and MB (2005-06) were reported as PB – 94.60%, MB - 88.00%, Male - 90.98%, Female – 92.00%, Urban – 84.53%, Rural – 93.08% and Total – 91.35%.

## **II. Programme Components**

### **A. Disability Prevention and Medical Rehabilitation (DPMR)**

Statewise details of informations received is provided as **Annexure VIII**.

1. Number of grade – II disability cases detected increased from 3477 (2.53%) in 2007-08 to 3763 (2.80%) in 2008-09. Recording of grade – I cases also started from this year. A total of 5985 (61.4%) out of total 9748 cases with disability were recorded in the year.
2. In addition to 20 Govt. Hospitals recognized for re-constructive surgery in the 11<sup>th</sup> Plan (PIP) another 7 Govt. Hospitals / Medical Colleges have been recognized in the year 2008-09. Similarly, 4 more NGO Hospitals have been recognized during the year 2008-09 bringing the total number NGO hospitals to 36, that provides RCS.
3. 2960 persons with disability had undergone major re-constructive surgery (Govt. 998, NGO, 1962). However, quarterly report of performance against individual RCS centres have not yet received from State Leprosy Officers as per RCS guidelines for quality monitoring. RCS operation were not reported from 20 States namely, Arunachal Pradesh, Manipur, Goa, Haryana, Himachal Pradesh, J&K, Kerala, Meghalaya, Mizoram, Nagaland, Punjab, Rajasthan, Sikkim, Tripura, Uttarakhand, A&N Islands, Chandigarh, D&N Haveli, Daman & Diu and Lakshadweep.

4. The States/UTs has started recording cases of Leprosy reactions / Neuritis from the current year. Total number of Leprosy Reaction cases treated were 11805.
5. The States/UTs reported 215 cases as developing new disability during treatment. These are mostly from Orissa (43), Maharashtra (32), Uttar Pradesh (31), West Bengal (25), Bihar (23), Andhra Pradesh (16) and Madhya Pradesh (10).
6. A total of 325 relapse cases were reported as confirmed out of 958 suspected and referred by the peripheral institutions. Most of the relapse cases are from Maharashtra (61), Rajasthan (41), Andhra Pradesh (35), Orissa (33), Chhattisgarh (24), Uttar Pradesh (24), West Bengal (20) and Karnataka (19).
7. A total of 28058 persons affected by Leprosy were provided with self care kit during the year.
8. As against budget provision available for 73320 pairs of MCR protective foot wear, a total of 39325 foot wears were provided by States/UTs to persons affected by Leprosy with insensitive feet.

**9. New Cases with Grade – II disabilities ( A new Indicator)**

In the XIth Five year plan (PIP) document a new indicator was added as “No. of Gr. II disabled cases – 25% reduction by March 2012, taking 2006-07 as the base year”. Recently WHO has also proposed to introduce “The new cases with Grade – II disability” as the key indicator to monitor progress in addition to current list of indicators. It is also suggested that Rate of grade – II disability in new cases per 100,000 population should be taken as the new indicator. Yearwise status of this new indicator w.e.f. the year 1999-2000 till the current year is given as **Annexure – IX**.

**B. ASHA Involvement**

1. During the year 2008-09, Accredited Social Health Activist (ASHA) working under the NRHM at village level were involved for suspecting leprosy cases and after diagnosis follow up the treatment till completion. ASHA are being paid incentive for confirmed leprosy cases out of suspect brought by them (Rs. 100/-) and for completion of treatment in time (PB- Rs. 200/-, MB – Rs. 400/-).
2. The scheme was initially put on pilot basis in 5 major states of Uttar Pradesh, Bihar, Chhattisgarh, West Bengal and Jharkhand. However, so far 41565 ASHAs have received training and are involved for leprosy work, details of which are indicated in **Annexure – X**.

**C. Training**

In addition to the regular reorientation training conducted by all the States/UTs, a few specialized activities for capacity building were completed as below –

1. A training manual for Medical Officers was prepared in consultation with the partners and specialist in the field, printed 3000 copies with WHO support and circulated to all concerned. States/UTs requested to print more copies for distribution upto PHC level.
2. A training material for capacity building of ASHA prepared, translated in Hindi and circulated for use by ASHA.

3. A decentralized planning workshop was organized at Jaipur, Rajasthan for all the State Leprosy Officers, in which management planning details were discussed. The States were advised to conduct similar workshop for District Leprosy Officers in their State during early part of 2009-10.
4. A Programme management training for State Leprosy Officers of N.E. States was held at Guwahati with Technical support from WHO.
5. "Training of Trainers" in DPMR was conducted by ILEP organization in the States of Gujarat, Orissa, West Bengal and Chhattisgarh.
6. 1679 Pharmacist received training in NLEP in the States of Andhra Pradesh, Chhattisgarh, Manipur, Mizoram and Orissa.
7. 197 Lab Technicians working in District Hospitals in the States/UTs of Andhra Pradesh, Chhattisgarh, Maharashtra, Mizoram, Nagaland, Orissa and Chandigarh received training in Slit Skin Smear examination.

#### **D. IEC/BCC**

1. The year 2008-09 was observed as a campaign on the theme "Leprosy Free India", all over the country.
2. Suitable guidelines were provided to the States/UTs on Behavioural Change Communication strategy adopted under NLEP, based on a workshop held on 5<sup>th</sup> – 6<sup>th</sup> June 2008 on the subject.
3. Guidelines for reduction of stigma and discrimination against leprosy affected persons were issued to all States/UTs.
4. From the Central level video spots were prepared on the following topics and the same were telecast on T.V. channels.
  - Signs and symptoms of the leprosy.
  - Duration of treatment of leprosy.
  - Importance of completion of treatment.
  - Availability of treatment free of cost in all PHCs
  - Improvement of deformity (due to leprosy) by reconstructive surgery.
5. National level press was used for advertising messages on Anti Leprosy Day i.e. 30<sup>th</sup> January 2009. Country –wide press advertisement was given in 212 no. of regional , Hindi and English newspapers.
6. Following activities at the state and peripheral level were organized.
  - Mass Media – To a limited extent through local centres of TV, Radio and press in local languages.
  - Outdoor Media – Hoardings, Bus panels, wall paintings, posters, rallies including banners.
  - Rural Media – IPC group meetings, school IEC, Folk Media, Exhibitions and Health melas.
  - Advocacy – Meetings with Zila Parishad, Mahila Mandals, NGOs etc.

### **E. MDT Supply**

1. As in the previous years MDT drugs were supplied by WHO for free supply to the Leprosy patients. Further Clofazimine capsules were supplied by WHO this year for treatment of reaction cases.
2. Quantity of MDT received from WHO and issued to the States/UTs during 2008-09, were as below-

| <b>S. No.</b> | <b>Type of drugs</b>         | <b>Quantity received (BCP)</b> | <b>Quantity issued (BCP)</b> |
|---------------|------------------------------|--------------------------------|------------------------------|
| (i)           | MB(A)                        | 882732                         | 831219                       |
| (ii)          | MB(C)                        | 41472                          | 37592                        |
| (iii)         | PB(A)                        | 511488                         | 446928                       |
| (iv)          | PB(C)                        | 63936                          | 63564                        |
| (v)           | Clofazimine capsule (100 mg) | 102000                         | 33260                        |
| (vi)          | Clofazimine capsule (50 mg)  | 42000                          | 8450                         |

3. In addition following quantities of Clofazimine capsules was issued to ILEP.

- (i) Clofazimine capsule (100 mg) – 5000 capsules
- (ii) Clofazimine capsule (50 mg) – 1000 capsules

### **F. Rehabilitation and care**

1. Guidelines on Community Based Rehabilitation (CBR) was issued to the States in which the States were requested to take measures, so that Rehabilitation of people affected by Leprosy can be integrated into General CBR programmes in the state. In Leprosy endemic areas where only Leprosy related programme is available, these programmes are encouraged to introduce CBR strategies and to open up their services to people with other disabilities.
2. There are about 617 Leprosy colonies in the country. As advised by the programme, States have started providing medical services to the inmates of these colonies. At some places NGOs also provide regular medical services in the colonies run by them. Statewise details are given in **Annexure – XI**.
3. The States were advised to facilitate the persons affected by Leprosy to receive Disability certificate to enable them to get the facilities available under schemes of the Social welfare department. Statewise details of current status is at **Annexure XI**.
4. Ministry of Health & F.W. as the nodal agency has taken up the issues of Acts and Laws discriminatory to the persons affected by Leprosy with other Ministries viz., Finance, Law, Social Welfare, Railways, Surface transport, Child and Women Welfare etc. These Acts and Laws are being modified or repealed, which will help the persons affected by Leprosy live a dignified life.

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Please click here for [ANNEXURES](#)