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المملكة العربية السعودية
وزارة الصحة
الوكالة المساعدة للطب الوقائي
البرنامج الوطني لمكافحة الدرن

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Vision

The Eastern Mediterranean Region free of leprosy

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AN EXPANDED FRAMEWORK FOR EFFECTIVE LEPROSY CONTROL

➤ Successful leprosy control depends on health care workers treating leprosy patients within this framework in a national leprosy programme (NLP). Full implementation of the National strategy remains the priority. This means ensuring the accurate diagnosis and effective treatment of all leprosy patient.

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MISSION

Our mission is to significantly reduce the burden of leprosy in the KSA by ensuring the following

- ❖ Every leprosy patient has access to effective diagnosis, treatment and cure.
- ❖ Transmission of leprosy is stopped.
- ❖ Inequitable social and economic toll of leprosy is reduced . All relevant partners in health, social and economic development are involved in leprosy control activities

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AN EXPANDED FRAMEWORK FOR EFFECTIVE LEPROSY CONTROL

COMPONENTS OF EXPANDED LEPROSY CONTROL FRAMEWORK

The expanded framework consists of the following:

- Goals of Leprosy control targets for leprosy control
- Key operations for leprosy national program
- Indicators to measure NLP progress in leprosy control.

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AN EXPANDED FRAMEWORK FOR EFFECTIVE LEPROSY CONTROL

- In addition to effective leprosy case-finding and cure, these interventions include: measures to decrease leprosy transmission (MDT)
- leprosy treatment; and infection control measure

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AN EXPANDED FRAMEWORK FOR EFFECTIVE LEPROSY CONTROL

Targets for Leprosy control (cure and case detection)

A. To cure leprosy cases detected.

A national leprosy programme that achieves high cure rate in patients with leprosy has the following impact on :

- i. leprosy prevalence, leprosy mortality and rate of leprosy transmission decrease.
- ii. leprosy incidence decreases gradually.(0.28/100000-2000 TO 0.09/100000-2008)
- iii. The number of drug resistance is not available now (which makes future treatment of leprosy easier and more affordable).

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AN EXPANDED FRAMEWORK FOR EFFECTIVE LEPROSY CONTROL

Goals of leprosy control

The goals of leprosy control are to reduce mortality, morbidity and disease transmission (while preventing drug resistance) until leprosy no longer poses a threat to public health. The aim is also to reduce human suffering and the social and economic burden on families and communities as a consequence of leprosy. In order to achieve this, it is necessary to ensure access to diagnosis, treatment and cure for each patient.

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AN EXPANDED FRAMEWORK FOR EFFECTIVE LEPROSY CONTROL

Targets for Leprosy control (cure and case detection)

An effective NLP has a high cure rate and a low level of drug resistance.

Provided that a high cure rate is achieved, increased case detection of leprosy cases will decrease leprosy transmission.

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AN EXPANDED FRAMEWORK FOR EFFECTIVE LEPROSY CONTROL

Targets for leprosy control (cure and case detection)

Achieving high cure rates is the highest priority. leprosy programmes with high cure rates rapidly reduce disease transmission. They are likely to attract the majority of existing cases in the community.

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AN EXPANDED FRAMEWORK FOR EFFECTIVE LEPROSY CONTROL

Leprosy control policy package (the National strategy)

- A. **Sustained political commitment** to increase human and financial resources and make leprosy control a nationwide activity integral to the national health system.
- B. **Access to quality-assured leprosy Diagnoses** for case detection among persons presenting with, or found through screening to have, symptoms of leprosy (most importantly prolonged symptoms). Special attention to case detection is necessary among contact and other high-risk groups, e.g. people in institutions.
- C. **Standardized chemotherapy for all cases of leprosy under proper case-management conditions including regular follow up of treatment.**
Proper case management conditions imply technically sound and socially supportive treatment services.

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AN EXPANDED FRAMEWORK FOR EFFECTIVE LEPROSY CONTROL

Leprosy control policy package (the National strategy)

NLP face new challenges. They need significant strengthening order to achieve the targets for Leprosy control .

- General public health service need to increase their capacity to sustain and expand National strategy implementation. At the same time they must maintain the quality of case detection and treatment.
- Promoting a patient-centered approach and community involvement in Leprosy care can improve both access to and utilization of health services.
- Collaboration is essential between the public, private, and voluntary sectors to ensure accessible and quality-assured leprosy diagnosis and treatment.

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AN EXPANDED FRAMEWORK FOR EFFECTIVE LEPROSY CONTROL

Key operation operations for National Strategy implementation

- Establish a **national leprosy programme (NLP)** with a central unit. Since 1995
- Prepare a **programme development plan**.
- **WHO Guide line** is available at district level.
- Establish a **recording and reporting system** using standardized material allowing categorization of cases registered and cohort analysis for treatment outcomes.
- Plan and initiate a **training programme** covering all aspects of the policy package.
- Establish a **health services network** in close contact with **primary**

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AN EXPANDED FRAMEWORK FOR EFFECTIVE LEPROSY CONTROL

leprosy control policy package (the National strategy)

- D. **Uninterrupted supply of quality-assured drugs** with reliable drug procurement and distribution system.
- E. **Recording and reporting system enabling outcome assessment of every patient and assessment** of the overall programme performance.

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AN EXPANDED FRAMEWORK FOR EFFECTIVE LEPROSY CONTROL

Key operation operations for National Strategy implementation

- Involve **all health care providers**, e.g. private and voluntary health care providers, nongovernmental organizations (NGOs), religious organizations and employers.
- Undertake **economic analysis and financial planning** to ensure that the NLP is on a sound financial footing.
- Undertake **operational research** as an integral component of National Strategy to improve NLP performance.

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AN EXPANDED FRAMEWORK FOR EFFECTIVE LEPROSY CONTROL

Key operation operations for National Strategy implementation

- Establish **treatment services** within the PHC system and hospital where chemotherapy is given priority and patient educating is provided. Treatment services should achieve total geographical and patient coverage.
- Secure a **regular supply of drugs and diagnostic material** based on previous case notification date.
- Design a **plan of supervision** of the key operations at the intermediate and district level to be implemented from the start of the programme.
- Undertake **social mobilization** through **information, education and communication** activities, in order to mobilize and sustain

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AN EXPANDED FRAMEWORK FOR EFFECTIVE LEPROSY CONTROL

FOLLOW UP OF PATIENT ON TREATMENT

Patient adherence to treatment

Patient adherence to treatment is necessary to ensure that the treatment cures the patient. Patient adherence to RX means the patient takes every dose of the recommended treatment regimen. It may be difficult for a patient to adhere to the treatment patients will adhere to self-administered treatment. One certain way to ensure patient adherence to treatment is direct observation of treatment. This means that someone supports the patient during the course of treatment and watches the patient swallow the tablets. The NLP coordinates the training of patient supporters and monitors their effectiveness in ensuring treatment adherence.

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AN EXPANDED FRAMEWORK FOR EFFECTIVE LEPROSY CONTROL

Indicators to measure NLP progress in leprosy control

- National leprosy control policies, as set out in the WHO guide line consistent with the National strategy and WHO guide line
- The height cure rate in new cases.

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AN EXPANDED FRAMEWORK FOR EFFECTIVE LEPROSY CONTROL

Integration of leprosy treatment services with general health services

- In the past, some leprosy programmes have relied on special leprosy hospitals and clinics, separate from the general health service. The problem with that system is that many leprosy patients live far from a leprosy hospital or clinic.
- One reason why leprosy is out of control in many countries is that leprosy patients do not have access to leprosy diagnosis and treatment services. A successful NLP brings leprosy diagnosis and treatment services to the leprosy patients. This is why leprosy treatment services are integrated with existing general health services.

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AN EXPANDED FRAMEWORK FOR EFFECTIVE LEPROSY CONTROL

Easy access to the treatment as close to the patient's home as possible

- Leprosy patients are unlikely to adhere to treatment if they have far to go for treatment. One of the aims of a leprosy programme is to organize leprosy services so that patients have treatment as close to home as possible. A leprosy programme brings treatment to patients wherever they live. Many leprosy patients live close to a health facility (e.g. health center, district hospital).
- For these patients, the treatment supporter who follows up treatment could be one of the health staff facility. Some leprosy patients live far away from a health facility. For these patients, the supervisor may be a trained local community member or a health outreach worker.

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AN EXPANDED FRAMEWORK FOR EFFECTIVE LEPROSY CONTROL

leprosy

- Measure to decrease leprosy transmission (e.g. treatment of cases, and application of WHO precautions by health care workers).
- Care for people living with leprosy (e.g. treatment of complication of leprosy diseases, disabilities, and nutritional support)

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AN EXPANDED FRAMEWORK FOR EFFECTIVE LEPROSY CONTROL

DERMATOLOGY/NLP

- Collaboration between dermatology and NLP programmes is crucial in supporting general health service providers. These providers need support in delivering the full range of Leprosy prevention and care interventions. Other interventions are required apart from effective leprosy case-finding and cure. These interventions include:

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DIAGNOSIS OF LEPROSY

DIAGNOSTIC APPROACH

- Clinical screening by assessment of symptoms identifies leprosy suspects among patients attending health facilities.
- The district leprosy officer (DLO) registers the leprosy patient, and treatment is started.

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DIAGNOSIS OF LEPROSY

DIAGNOSTIC APPROACH

- The highest priority for leprosy control is the identification and cure of infectious cases, i.e. patients with suspect symptoms or contact with leprosy patient. Therefore all patients with clinical features suggestive of leprosy must submit for diagnostic measure in clinic or hospital.
- Most leprosy suspects (people with symptoms or signs suggestive of leprosy) are ambulatory. The diagnosis of leprosy is therefore usually done on an outpatient basis.

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