

LEPROSY CONTROL IN TUNISIA

PROGRAMME MANAGER MEETING ON
LEPROSY ELIMINATION
TUNIS 7-9 JULY 2008



INTRODUCTION:

Tunisia is a country of low prevalence of leprosy.

The ministry of the Public Health set up to eliminate leprosy on 2015 as an objective.



STRATEGY

The strategy is based on:

- The early detection of the cases.
- The free treatment by the MT drug of all detected cases.



STRATEGY

- The follow-up of the cases under treatment
- The prevention of the handicap
- The control of the handicap and the rehabilitation



Organisation at the national level:

at the national level:

- The leprosy control is integrated within the NTP central unit in the Primary Health Care Directorate of the ministry of the Public Health who

is responsible of:

- The assessment and the follow-up of the activities (epidemiological situation, cases monitoring, drug management ...)



Organisation In the national level:

- The coordination of the activities in collaboration with the Tunisian NGO against the leprosy.



In the regional level

- In each governorate (province), the Regional service of the Primary Health Care is responsible of the follow-up of the activities and the epidemiological situation.
- In this level, the laboratory services for the diagnosis and the services of reference dermatology are available.



In the local level

This level is responsible in collaboration with the Tunisian NGO against the leprosy of:

- the detection of the cases
- the distribution of the medicines to the patients
- the follow-up of the cases



In the local level

- the prevention and the treatment of the handicap.
- the Health education of the patients and their entourage and family circle in order to ensure early detection of the cases, a good observance of the treatment and to reduce the stigmas attached to leprosy.
- the free transportation of the patients in the center of reference.



The circuit of cases detection and management - 1-

- At first line active detection are ensured by physician in endemic area and suspected cases are addressed to the dermatologist for diagnosis confirmation and therapeutic prescription.
- The suspected cases are the cases that present some cutaneous lesion accompanied of a marked sensory deficit or an attack of the peripheral nerves and a weakness of the muscles of the hands, the feet or the face outside of the people who present some invalidities due to the leprosy.



The circuit of cases detection and management - 2-

- The research of lesions of leprosy is part of the systematic exam of school medicine in the endemic areas.
- The confirmation of the diagnosis, the prescription of the treatment, the hospitalization and the periodic control of the patients (for the 3 regions that present endemic pockets : Sfax, Mahdia and Medenine) are done in the service of Professor Zahaf.



The circuit of cases detection and management - 3-

- Data is recorded in the notebook of the ambulatory treatment used currently by the team of the Tunisian NGO against the leprosy.
- The Primary Health Care provides drugs to the Tunisian NGO against the leprosy and to the regional services of PHC according to the number of patients under treatment.



The situation during the last ten years

- During the years 50 and 60 the number of new annually cases was around 20 in Mahdia and Mednine.
- Since the years 70, the migration contributed to the spread to the big cities (Tunis, Ariana)
- The use of the multi-drug reduced the new cases to 0 case per year in 1999-2001-2002-2003-2007
- However, relapse cases are recorded again (probably a resistance cases).



Trend of leprosy incidence, Tunisia, 1997-2008

Year	Number of New cases	Governorate
1997	4	Monastir-Gabes-Sfax-Mednine
1998	2	Mehdia-Sfax
1999	0	
2000	4	Ariana-Seliana-Mehdia-Mednine
2001	0	
2002	0	
2003	0	
2004	0	
2005	1	Jendouba
2006	0	
2007	0	
2008	1	Jendouba

Trend of relapse cases 2003-2007

year	Number of cases	Governorate
2003	2	Mednine
2004	1	Mahdia
2005	2	Tunis
2006	0	
2007	1	Monastir



THANK YOU