

## What to tell the patient

- Take the medication regularly as advised.
- Complete a full course of treatment: 6 blister packs for PB and 12 blister packs for MB.
- The drugs stop the disease from spreading.
- He/She can lead a normal life: live at home, go to school, work, play, get married, have children, participate in school events, etc.
- The medicine will turn the urine red and the skin darker. These will return to normal once the treatment is completed.
- Go immediately to a health center if problems are encountered (pain, fever, malaise, new lesions, muscle weakness, etc.).
- Return for check-up monthly until treatment is completed.
- Protect himself/herself from injuries if his/her eyes, hands, or feet are numb or weak.

# FAQs

**What causes leprosy?** Leprosy is caused by a germ called *Mycobacterium leprae* (*M. leprae*). It was first seen under the microscope by a Norwegian doctor, Gerhard Armauer Hansen. That's why it is sometimes called Hansen's Disease.

**How is it transmitted?** *M. leprae* is spread via droplets when an untreated person with leprosy coughs or sneezes. However, the transmission stops within a month after the start of treatment.

**Do fingers and toes of persons with leprosy fall off?** No. *M. leprae* attacks nerves and destroys the ability to feel pain. Without pain to warn them, persons with leprosy may injure themselves. Repeated injuries lead to the dreadful deformities and disabilities.

**I met a man with leprosy on the street. Will I get infected?** No. It is not easy to get leprosy. About 95% of the world's population has a natural immunity against the disease. For those who do not have this immunity, they must be exposed to the germ for long periods of time before they can be infected.

**Is leprosy hereditary?** Leprosy is not hereditary. It is the susceptibility to the disease (the inability to fight the leprosy germs) that is passed on to children. In families where a parent has or had leprosy, it is likely that one or more of the children are susceptible. If the parent does not seek treatment, the susceptible children may get infected.

**Is leprosy curable?** Yes, with Multidrug Therapy (MDT). MDT is available **FREE** in health centers all over the country.

**Leprosy can be easily cured and disabilities can be prevented.**



**Philippine Leprosy Mission, Inc.**  
Transforming Lives, Changing Communities

Unit 202, Newgrange Bldg., 32 Timog Avenue,  
Quezon City, Philippines 1103  
Telefax: (+632) 376-6142 • Phone: (+632) 332-1735  
Email: [gemma.cabanos@leprosy.org.ph](mailto:gemma.cabanos@leprosy.org.ph)  
[www.leprosy.org.ph](http://www.leprosy.org.ph)

Department of Health  
[www.doh.gov.ph](http://www.doh.gov.ph)



November 2010

# Basic Facts for Health Workers LEPROSY

Sakit sa balat 'wag balewalain,  
sa health center magpatingin.

# Leprosy

Leprosy patches can be pale or reddish or copper-coloured;

Do not itch; Usually do not hurt;

Skin is dry and without hair.

Can be flat or raised;

Can appear anywhere.

Lack sensation to heat, touch or pain;

Other signs of leprosy include: Reddish or skin-coloured nodules or smooth, shiny diffuse thickening of the skin without a loss of sensation.

- Leprosy is an infectious disease caused by *Mycobacterium leprae*.
- It mainly affects skin and peripheral nerves.
- Leprosy bacteria multiply very slowly; full-blown leprosy may develop 3 - 5 years after being infected.
- The average incubation period is 3 - 5 years or even longer.
- Leprosy commonly affects young adults.
- The germ is transmitted by prolonged close contact through respiratory tract from an infected person who is not on treatment.
- Leprosy is classified as:
  - Paucibacillary (PB) - up to 5 patches
  - Multibacillary (MB) - more than 5 patches

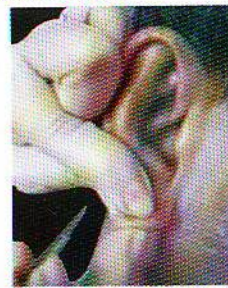
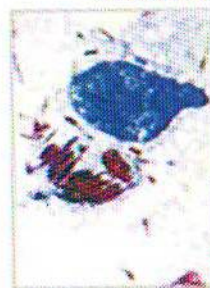
**Diagnosis of leprosy** is commonly based on clinical signs and symptoms. Only in rare instances is there a need to use laboratory and other investigations to confirm a diagnosis of leprosy.

A person should be regarded as having leprosy if he/she exhibits one or more of the following cardinal signs:

- Whitish (hypopigmented) or reddish patches of skin called skin lesions with loss of feeling;
- Damage to the peripheral nerves as demonstrated by loss of sensation and weakness of the muscles of the hands, feet and eyes;
- Skin smears that are positive for *M. leprae*.

Clinical Classification	Paucibacillary leprosy (PB)	Multibacillary leprosy (MB)
<b>Skin lesions</b> include macules (flat lesions), papules (raised lesions) and nodules	2-5 lesions asymmetrically distributed definite loss of sensation	more than 5 lesions distributed more symmetrically loss of sensation
<b>Nerve damage</b> resulting in loss of sensation or weakness of muscles supplied by the affected nerve	only one nerve trunk	many nerve trunks

If any of the lesions has a BI (Bacteriologic Index) of +1, the patient is classified as MB.



Slit Skin Smear is done to check the presence of *M. leprae* bacilli (as shown above) in the skin.

## Treatment:

### PB adult

#### Once a month: Day 1

- 2 capsules of rifampicin (300 mg x 2)
- 1 tablet of dapsone (100 mg)

#### Once a day: Day 2-28

- 1 tablet of dapsone (100 mg)

**Full course:** 6 blister packs

### MB adult

#### Once a month: Day 1

- 2 capsules of rifampicin (300 mg x 2)
- 3 capsules of clofazimine (100 mg x 3)
- 1 tablet of dapsone (100 mg)

#### Once a day: Day 2-28

- 1 capsule of clofazimine (50 mg)
- 1 tablet of dapsone (100 mg)

**Full course:** 12 blister packs

### PB child (10-14 years):

#### Once a month: Day 1

- 2 capsules of rifampicin (300 mg + 150 mg)
- 1 tablet of dapsone (50 mg)

#### Once a day: Day 2-28

- 1 tablet of dapsone (50 mg)

**Full course:** 6 blister packs

### MB child (10-14 years):

#### Once a month: Day 1

- 2 capsules of rifampicin (300 mg + 150 mg)
- 3 capsules of clofazimine (50 mg x 3)
- 1 tablet of dapsone (50 mg)

#### Once a day: Day 2-28

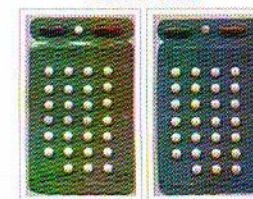
- 1 capsule of clofazimine every other day (50 mg)
- 1 tablet of dapsone (50 mg)

**Full course:** 12 blister packs

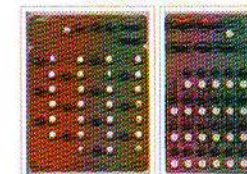
For children younger than 10, the dose must be adjusted according to body weight.

(Taken from the WHO document *Guide to Eliminate Leprosy as a Public Health Problem*)

PB Adult / Child Blister Pack



MB Adult / Child Blister Pack



**THE BEST WAY TO PREVENT THE SPREAD OF LEPROSY IS TO TREAT ALL PATIENTS WITH MDT.** Persons with leprosy can lead completely normal lives.