

FACTORS CONTRIBUTING TO DELAY IN DIAGNOSES AND START OF TREATMENT OF LEPROSY

An analysis of help-seeking
narratives in Northern Bangladesh
and West Bengal, India

PG Nicholls et al, UK 2000

Lepra 2004

- DEF: Delay in Ds & start of Rx is Time taken from first becoming aware of the symptoms of disease through to start of effective treatment
- Nb: In leprosy delay is a recognized risk factor for ns function impairment.
- 356 pts surveyed(175 in B/esh & 181 in India)
- All attending clinics and on Leprosy treatment more than 1 month.
- Persons trained & questionnaires used.
- Details of method was outlined

- **BANGLADESH**

- 175 111MB 64 PB
- Delays: Mean 20 mths
Med 12 mths
- 1st action delay 80%

- **INDIA**

- 181 105 MB 76 PB
- Delays: Mean 18 mths
Med 9 mths
- 1st action delay 67%

- Longer delays in the older persons >35
- Longer delays in women
- Longer delays in MB cases 24 mths
- Pharmacist & village Drs recognized Lep & referred. A good trigger to present was family, past pts, community members or self.
- Rural folks better attend clinics

• **RISK FACTORS FOR DELAY**

- Long periods of inaction or seeking for another Ds
- Much delay while some Health service providers make the Ds or refer
- Repeated use of traditional and alternative medicine (Non diagnosed leprosy, non ref)
- Failure to comply with referral from CF or survey team
- Above 35 yrs delayed longer

• **CAUSES FOR REDUCED DELAY**

- Attending the clinic nearest to home
- Informing friends & neighbours of Leprosy Ds
- Belief that leprosy is caused by a spirit, curse or ghost.
- First symptom being multiple skin patches or reaction
- Reading educational leaflet. Educated about Leprosy

• **Recommendations**

- Increased awareness of the early signs of Lep
- Increase level of awareness of practitioners & need to give clear referral guidelines
- Increase community sensitivity to the impact of leprosy & importance of treatment

MAY THE BEST TEAM WIN

GOOD LUCK