

**GOVERNMENT OF INDIA  
MINISTRY OF HEALTH AND FAMILY WELFARE  
DEPARTMENT OF HEALTH AND FAMILY WELFARE**

**RAJYA SABHA  
STARRED QUESTION NO.220  
TO BE ANSWERED ON THE 6<sup>TH</sup> DECEMBER, 2016  
ERADICATION OF LEPROSY**

**\*220. SHRI TIRUCHI SIVA:**

Will the Minister of **HEALTH AND FAMILY WELFARE** be pleased to state:

(a) the number of persons affected from leprosy in the Country, State-wise, particularly in Tamil Nadu; and

(b) the measures being taken under the National Leprosy Eradication Programme to eradicate leprosy and the achievements made so far?

**ANSWER  
THE MINISTER OF HEALTH AND FAMILY WELFARE  
(SHRI JAGAT PRAKASH NADDA)**

(a) & (b): A statement is laid on the Table of the House

**STATEMENT REFERRED TO IN REPLY TO RAJYA SABHA  
STARRED QUESTION NO. 220\* FOR 6<sup>TH</sup> DECEMBER, 2016**

(a) Total number of Leprosy cases on record are 102178 including 3550 cases in Tamil Nadu as on 30<sup>th</sup> September, 2016. A statement showing State/UT-wise details of total number of cases on record as on 30<sup>th</sup> September, 2016 is at Annexure.

(b) At present, the National Leprosy Eradication Programme (NLEP) is focused on early case detection and complete treatment of all cases in order to reduce the transmission of the disease thereby reducing the case load in the community to such an extent that transmission is very negligible-

**A three pronged strategy for early detection of leprosy cases in the community has been initiated which are as below:**

- I. **Leprosy Case Detection Campaign for high endemic districts:** In order to supplement the efforts of the state and eliminate leprosy from high endemic areas, Leprosy Case Detection Campaigns (LCDC), in line with pulse polio campaign, a unique initiative of its kind under NLEP, is initiated in high endemic districts i.e., districts with Prevalence Rate of more than 1/10000 population during any of last three years. Under LCDC, house to house visits by trained search team comprising one female Accredited Social Health Activist (ASHA) and male volunteer i.e. Field Level Worker (FLW), conducted as per micro-plans prepared for local areas after intensive IEC activities. The house marking will be followed during the campaign & supervision of house to house search activities done through identified field supervisors. Central Monitors nominated by Central Leprosy Division, directly monitor the activities. Continuous, systematic collection and compilation of reports is done. The first LCDC was conducted in 50 high endemic districts of 7 States covering population of 75 million during March/ April 2016. Second LCDC was conducted in 163 districts of 20 States and UTs, covering a population of 360 million during September, 2016. Till date about 31000 cases have been confirmed.

**II. Focused Leprosy Campaign for hot spots:** The village/urban area where even a single grade II disabled case is detected is considered as hot spot, as reporting of even a single grade II disabled case indicates that cases are being detected very late and there can be several hidden cases in the community. In these hot spots of low endemic districts, which are not selected for LCDC, house to house visit is conducted by ASHAs/ Multi-Purpose Workers, to examine each and every resident of the households of area.

**III. Case Detection in hard to reach areas:** Area specific plans as per local need have been formed as per local requirements and for the same, local people have been empowered by making them aware and providing material resources.

**Other initiatives undertaken are as under:**

- Launch of NLEP Newsletter a quarterly publication, to share guidelines, feedback/best practices etc.
- Development of IEC strategy document.
- Development of Directory for Leprosy Experts.
- Constitution of taskforce for mainstreaming of Leprosy Colonies Inhabitants.
- Administration of chemoprophylaxis to the contacts of leprosy cases, identified in LCDC districts, in order to cut down transmission of leprosy.
- Launch of Immunoprophylaxis using vaccine Mycobacterium Indicus Pranii (MIP).
- Use of Geographic information system mapping, to segregate the districts endemicity wise.

**Annexure****State /UT – wise No. of cases on record and No. of New Leprosy Cases**

<b>S.No.</b>	<b>States</b>	<b>Cases on record as on 30th Sep. 2016</b>
1	Andhra Pradesh	2835
2	Arunachal Pradesh	30
3	Assam	1008
4	Bihar	11643
5	Chhattisgarh	10003
6	Goa	167
7	Gujarat	3827
8	Haryana	540
9	Himachal Pradesh	160
10	Jharkhand	4484
11	Jammu & Kashmir	196
12	Karnataka	2463
13	Kerala	623
14	Madhya Pradesh	6860
15	Maharashtra	9687
16	Manipur	21
17	Meghalaya	28
18	Mizoram	24
19	Nagaland	66
20	Odisha	8504
21	Punjab	573
22	Rajasthan	1263
23	Sikkim	11
24	Tamil Nadu	3550
25	Telangana	2033
26	Tripura	75
27	Uttar Pradesh	17491
28	Uttarakhand	315
29	West Bengal	10973
30	A & N Islands	31
31	Chandigarh	143
32	D & N Haveli	339
33	Daman & Diu	7
34	Delhi	2178
35	Lakshadweep	5
36	Puducherry	22
	<b>Total</b>	<b>102178</b>

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