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

LOK SABHA
STARRED QUESTION NO. 107
TO BE ANSWERED ON THE 9TH FEBRUARY, 2024

CASES OF LEPROSY

*107. SHRI T.R. BAALU:

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

(a) whether India has the maximum number of persons with disabilities related to leprosy and if so, the details thereof;

(b) the measures taken/proposed to be taken by the Government keeping in view the fact that 57 percent of the new cases worldwide are diagnosed in the country;

(c) whether the Government is planning to expand the telemedicine initiative ‘e-sanjeevani’ for continued follow-up and to ensure the supply of medicines to the identified leprosy patients in the country; and

(d) if so, the details thereof and if not, the reasons therefor?

ANSWER
THE MINISTER OF HEALTH AND FAMILY WELFARE
(DR MANSUKH MANDAVIYA)

(a) to (d) A Statement is laid on the Table of the House.
(a)&(b) India has achieved elimination of leprosy as a public health problem as per WHO criteria of less than 1 case per 10,000 population at the National level in 2005. India reported total 103819 new leprosy cases for the year 2022-23 out of which, Grade 2 Disability (G2D) cases were 2363 (2.28%), which equals to 25% of the new G2D cases of the world. With various interventions introduced under National Leprosy Eradication Programme (NLEP) in the last few years, number of persons with disabilities caused due to leprosy has come down to 2363 (2.28%) for the year 2022-23 from 5794 (4.61%) for the year 2014-15.

Government of India (GoI) has intensified early case detection of leprosy in the country with a view to prevent occurrence of disabilities, whether Grade 1 or Grade 2, caused by Leprosy. Various measures undertaken in the revised National Strategic Plan 2023-27 are as under:-

(i) Leprosy Case Detection Campaign (LCDC) twice a year in the States/UTs.
(ii) Integration of Leprosy screening of children (0-18 years) with Rashtriya Bal Swasthya Karyakram (RBSK) and Rashtriya Kishore Swasthya Karyakram (RKSK).
(iii) Integration of Leprosy screening of people above 30 years of age with the screening activities of Comprehensive Primary Health Care under Ayushman Bharat.
(iv) Intensified contact tracing and administration of Post Exposure Prophylaxis (PEP) to the eligible contacts of index case in order to interrupt the chain of transmission.

(c)&(d) In the year 2019, e-sanjeevani application was launched by Government of India to facilitate Doctor-to-Doctor consultation i.e. specialized medical care to the rural/remote populace at all operational Ayushman Aarogya Mandirs (AAMs) (earlier known as Health and Wellness Centers). This application works on a hub and spoke model. At hub level, a specialist doctor provides services to Ayushman Aarogya Mandirs. e-sanjeevani application is also available in OPD module and provides service to anyone who installed it. The platform of telemedicine “e-sanjeevani” is presently not proposed to be extended to NLEP in follow-up of the confirmed leprosy cases, as NLEP has its own in-built system of follow up and well established supply of medicines for complete treatment of Leprosy patients free of cost.

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