What is leprosy?
Leprosy is also known as Hansen's disease. It is a chronic infectious disease caused by an organism called *Mycobacterium leprae*. The bacteria infect skin and peripheral nerves, sometimes other tissues including the eye, the upper respiratory tract, in particular the lining of the nose and the testes.

Does leprosy still exist? Is there case of leprosy in Malaysia?
Every two minutes someone is diagnosed with leprosy. It causes nerve damage and muscle weakness that can lead to deformities, crippling, blindness and isolation. Many peoples think leprosy no longer exists, but it still occurs in more than 100 countries worldwide including Malaysia. We have average of 300-350 new cases diagnosed per year. For the year of 2012 and 2013, there were 336 and 306 new cases diagnosed in Malaysia respectively.

What causes leprosy? How does it spread? Is it an inherited disease?
*Mycobacterium leprae* is the bacteria that cause leprosy. It is an infectious disease, not inherited disease. They multiply very slowly and it may take up to 2-5 years or more for symptoms to appear.

Leprosy is an airborne disease spread through droplets in the air. When a person with the disease sneezes or coughs, droplets with the bacteria are released into the air. The disease can be spread when these air droplets are inhaled. However it is not easy to develop leprosy — over 95% of people are naturally immune to the bacteria, particularly those who live in endemic areas of disease. Leprosy is not spread through contact with ulcerations on the limbs of leprosy patients.

What are the signs and symptoms of leprosy?
Leprosy can affect skin and peripheral nerves. It presents as non-itchy skin rash with or without loss of sensation over the lesion. It may also damage the nerves causing muscle weakness and loss of sensation in the hands and feet. The lost of sensation causes the lost of automatic reflexes that help them to draw away from hot or sharp objects. This can result in burns and other wounds, which may then become infected. People with leprosy may lose their fingers and toes as a result of such infections. If delayed or left untreated, paralysis of the facial nerves can lead to a loss of the blinking reflex, dryness and ulceration of the eye, and blindness.

There 5 clinical types of leprosy determined by the immunity of the patients; tuberculoid, borderline tuberculoid, borderline borderline, borderline lepromatous and lepromatous leprosy. For treatment purposes the disease can be divided into paucibacillary (no bacilli detected) or multibacillary (bacilli detected) depend on the results of the slit skin smear (SSS) done on the earlobes and skin lesions of the patients.
Can leprosy be cured? If left untreated, what will happen to a leprosy patient?

Leprosy affects thousands of people throughout the world, mostly in less developed countries. The number of people with leprosy has decreased dramatically following introduction of the effective World Health Organization (WHO) multidrug therapy in 1985.

Historically, patients infected with the disease were isolated in leper colonies, such as Sungai Buloh Leprosy Settlement and Pulau Jerejak Leprosarium. The highly visible nature of the disfiguring and disabilities caused by the disease has led to stigmatization of the patients. Today, leprosy can be treated effectively and isolating patients with the disease is NOT NECESSARY ANYMORE. Patients can now stay with family members and community while they are receiving treatment.

How is leprosy treated?

The recommended treatment is a combination of oral antibiotics (referred to as multidrug therapy or MDT) such as: dapsone, rifampin, clofazimine for 6 to 12 months. In cases where there is contraindication or intolerance to the above medications second line drugs like ofloxacin or minocycline can be used.

Sometimes patients may developed immunological reactions (Lepra 1 and 2) to the Mycobacterium leprae like fever, swelling of the existing lesions, new erythematous tender nodules, swelling of the hands and feet, nerve pain and worsening of weakness. This inflammation can be controlled with prednisone and immune-suppressants.

Summary

Leprosy can be treated effectively. Once started on treatment patients can be rendered non-infectious, so isolation of patients is no longer necessary. Most important is to be compliance to treatment. If there is any doubt to contact the nearest dermatologist (http://www.dermatology.org.my/dermatologist.htm).

*References: WHO website
Figure: a) Tuberculoid Leprosy; b) Lepromatous Leprosy with thickened earlobe; c) Ulnar nerve palsy leading to claw hand; d) Deformities of the foot caused by leprosy

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