

4. Title: PEP++ in the post-exposure prophylaxis of leprosy

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Introduction

A limitation of the current regimen of single dose rifampicin post exposure prophylaxis (SDR-PEP) is that while it is ~60% effective on the whole, but only 24% effective for the closest contacts (household). NLR launched the multi-country PEP++ study in 2017 for providing a better regime. In India the study is being implemented in two districts of Uttar Pradesh.

Method

The study is a cluster randomized trial. In the intervention blocks (12), the contacts are administered three doses of rifampicin and clarithromycin, one month apart. The contacts in control blocks (10) are administered SDR. The follow-up will begin after two years of drug administration. The contacts will be examined for signs and symptoms for leprosy. The drug administration in India started in October 2022.

Result

Between October 2022 and November 2023, out of the total target of 56,000 contacts to be screened/ medicated (PEP++/ SDR), 12,852 and 20,758 contacts have been administered third dose of PEP++ and SDR respectively.

Conclusion

The drug administration is expected to complete by June 2024. The study outcomes: 1] effectiveness of PEP++ compared to SDR-PEP; and 2] reduction of overall incidence of leprosy in the study districts is expected by July 2026.

50. ACTIVE CASE DETECTION THROUGH SYSTEMATIC SURVEILLANCE OF CLOSE CONTACTS OF INDEX CASE UNDER PEP++ STUDY IN UTTAR PRADESH, INDIA

Presenter: Dr. Suchitra Lisam

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Introduction

Increased new leprosy cases among children is predictor of continued leprosy transmission. Active case detection using systematic contact tracing and screening under PEP++ study of NLR India using enhanced post exposure prophylaxis, being implemented in two high endemic districts of Uttar Pradesh aims to stop transmission of leprosy by using a package of innovative tools.

Method

Household visits to index cases registered from April 2015 to March 2022 were undertaken for registration. After obtaining their informed consent, their close contacts were listed as identified by the index case. Listed contacts were assigned with a unique identification code (UIC) with information of index case captured on Redcap mobile App. Contacts were traced and geo-tagged during household visits and were screened for leprosy using screening tools by NLR India's trained Research Assistants (RA). Contacts with possible signs of leprosy were referred to health facility and examined by medical officers who confirmed them as new cases.

Results

From October 2022 to October 2023, total 38985 contacts were screened for eligibility in two districts, of which 436 contacts were excluded. Of 231 contacts with suspect signs who were referred, 125 (54%) visited health facility, 71 (56%) were confirmed as new cases and put on treatment, 50 (70%) were PB cases, 35 (49%) were women, 9 (9.8%) were children, and no new case had G2D.

Conclusion

Active case detection through household visits, contact tracing and screening enhances early case finding and early treatment of leprosy case thereby interrupting transmission of leprosy and preventing potential disabilities.

62. Perceptions of Health Officials and Front-Line Workers On Using The Mobile Application Supported Leprosy Post Exposure Prophylaxis (Lpep) Services In West Bengal

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Introduction

Under the NLR India's research study titled "Testing an App supported delivery system for Leprosy Post Exposure Prophylaxis (LPEP) services" that is being implemented in Howrah and Paschim Bardhaman districts of West Bengal, a side study i.e. exploratory study was undertaken to find out perceptions of government health officials and front-line workers (FLW) on feasibility and effectiveness of using a mobile application supported LPEP delivery.

Method

It was a qualitative research method using key informant interviews (KIIs) and focus group discussion (FGD) in four blocks i.e. Kanksha and Salanput in Pashchim Bardhaman and Jagatballavpur and Amita-II in Howrah. Study participants who were primarily health officials were randomly selected for the key informant interviews. All the interviews were recorded and transcribed into Bengali, and then translated into English. Theme wise content analysis of transcribed files was undertaken.

Results

Between 7th July 2022 to 6th August 2022, total 14 KII and four FDGs were conducted. Majority of key informants and FLWs had appreciated that summarized data as captured through the newly designed mobile App, would be made accessible or available to them. They expressed that this would help in improving the monitoring of LPEP. Familiarity and exposure to digital platforms were higher amongst ANMs compared to ASHA workers.

Conclusion

The mobile App if its stable with good internet connectivity, would reduce the work burden of FLW who need to be well trained on using the App. Digitalised systems are more effective in monitoring programmes than keeping manual registers.