Role of a dermatologist in the post-elimination era

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On whom will the burden rest?

When leprosy was declared eliminated from India, the reaction of the entire country and that of the world must have been one of relief, and of achievement. Where does one go from here? Certainly it does not imply that we, as physicians, will never see a case of leprosy again. It is a burden that we shall bear for many more years to come till the happy day when leprosy is completely eradicated.

The learning of the many aspects of leprosy takes experience and continued interest. Can this load be borne by the physicians? With the heavy workload of many other National programmes already on their shoulders, it does not seem fair to saddle them with another responsibility. That leaves us only with the dermatologist who is already in know of the cutaneous and the neural consequences of disease and who can be further trained to recognize all the aspects of leprosy.

Diagnostic dilemmas

Even when leprosy presents in its typical fashion, it is still a diagnostic difficulty for a physician who may see only a few cases a year. If it presents in unusual forms it may go unrecognized and untreated. This holds disastrous consequences for the patient and it becomes a continuing public health problem, as he/she goes on spreading the infection in the healthy population. It is expected that dermatologists with more experience in differentiating between and observing various dermatoses could pick up such cases and prevent such a sequence of events.

In the era of fixed duration regimens, the specter of relapses also looms large. The fine line distinguishing relapses and reactions can be easily crossed, and often mistaken with similar consequences. In order to appreciate this fine demarcation and follow the correct line of treatment for the patient, the services of a dermatologist are essential.

Prescribing problems

Despite the fact that the treatment of leprosy and of lepra reactions has been standardized to a great extent, the human body remains an enigma. There is still a vast pool of patients who will present with a range of problems that fall outside the boundaries of such prescribed limits.
They do not respond to standard treatment and continue to remain the treating doctor’s biggest problem. Such patients require customized treatment. This can vary to such an extent that the possibilities may boggle the untrained mind. Herein steps the dermatologist with a greater experience in both the knowledge of the vast armamentarium of drugs and their correct utilization. This may go a long way even in the prevention of disabilities and deformities.

A patients’ perspective

The commonest presentation appears to be a skin patch. If seen from the point of view of a patient, a patch of leprosy on the skin is perceived as any other dermatological disease with worry and distrust. So it can be reasonably expected that such a patient will present to the dermatologist. Thus, dermatologists will remain the frontrunners in the recruitment of all the remaining cases into the treatment programs and ensuring that we may one day see a leprosy free India.