

A Review on Leprosy

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Abstract: *Leprosy is a chronic infection caused by the bacterium Mycobacterium leprae. The disease manifests on a clinical spectrum between tuberculoid (strong cell-mediated immunity) and lepromatous (weak immunity, most contagious) poles. Transmission is primarily via aerosolized droplets from untreated, multibacillary patients. Although the WHO declared leprosy “eliminated” globally in 2005 about 250,000 new cases are still reported annually. Diagnosis often relies on the classic clinical sign of a skin patch with reduced sensation, as mycobacterium leprae cannot be cultured. The standard treatment is Multidrug Therapy (MDT), which is highly effective and free worldwide. Paucibacillary (PB) leprosy (1-5 lesions) is treated for 6 months with rifampicin and dapsone, while Multibacillary (MB) leprosy (>5 lesions) is treated for 12 months with rifampicin, dapsone, and clofazimine. Prevention includes chemoprophylaxis for contacts and the BCG vaccine. Key challenges to elimination include the stall in new case numbers since 2006, the reliance on passive case detection, and diagnostic delays caused by stigma, which lead to disability*

Keywords: Leprosy, Mycobacterium leprae, Multidrug Therapy (MDT), Tuberculoid, Lepromatous, BCG Vaccine, Armadillo

