






MAY 2022 | EDITION 17

Samiksha

...by LEpra Society

For any queries, please email us at rmuleprahealthinaction.in

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SOME KEY HIGHLIGHTS

Prevention of Blindness Week (01 Apr - 07 Apr)

Our two eye care hospitals in Odisha - Mahanadi Netra Chikitsalay (MNC) in Sonepur and Junagarh Netra Chikitsalay (JNC) in Junagarh, observed the Prevention of Blindness Week through various activities, which the Government of India plans from 1st to 7th April for increasing the awareness towards the blind people.



Thank you EdCIL (India) Limited. . .



With the support received from EdCIL (India) Limited, we provided cataract surgeries to 300 persons at our eye hospital - Mahanadi Netra Chikitsalaya (MNC) in Sonepur, Odisha.



Along with this, we were also able to provide customised protective footwear to 600 leprosy affected beneficiaries across our operational areas in Bihar.

We thank EdCIL (India) Limited for their generous support!

Resource Mobilisation (RM) Workshop

Under the EpiC project (supported by USAID and PEPFAR), the LEPRA Society team conducted a RM and Knowledge Management workshop to 18 CSOs (Community Service Organisations) in 5 districts of Telangana. This workshop was led by the Resource Mobilisation & Communications team of LEPRA and supported by other colleagues.



FEW ACTIVITY UPDATES

ANDHRA PRADESH & TELANGANA

- A total of 12,812 persons were screened for leprosy in Telangana with the support of govt. staff and volunteers. Three persons were identified with leprosy & put on treatment.
- Participated in the govt. organised health mela - 'Azadi ka Amruth Mahotsav'. Displayed our Information, Communication, and Education (IEC) material and spread awareness in AP.
- The United States Agency for International Development (USAID) team visited a Community Service Organisation (CSO) - Cheyutha and reviewed the performance and how the CSO strengthened their capacities in various aspects.

BIHAR

- 212 pairs of customised protective footwear were provided to leprosy affected beneficiaries through our mobile health service van.
- Under our Jagruti project, a total of 566 persons affected by leprosy and lymphatic filariasis were registered.
- Our team facilitated 365 persons for enrolling and receiving the Ayushman Bharat cards. Out of the total, 43 men with hydrocele received the card and are eligible for the benefits of hydrocelectomy surgery under Ayushman Bharat Yojana.

MADHYA PRADESH

- Participated in the block level health mela
 - where 23 leprosy cases were diagnosed
 - 2 Prevention of Disability (POD) camps were organised for the leprosy affected
 - 31 suspected cases of leprosy were examined
- Conducted a reconstructive surgery camp at our referral centre - St. Joseph's Leprosy Centre (SJLC) in Sanawad. 21 leprosy affected beneficiaries were supported with the reconstructive surgery and post-operative services.
- Training of 104 lab technicians for Stand Alone - Integrated Counselling & Testing Centres (SA - ICTC) was done.

ODISHA

- Sensitisation programme on Lymphatic Filariasis (LF) and self-care demonstration was conducted for 22 post-graduate students of Ayurvedic Medical College in Puri.
- Two new Self-Support Groups (SSGs) were formed by our team where 22 leprosy affected beneficiaries participated.
- Ten hydrocele surgeries were undergone at Nayagarh hospital through the referrals and advocacy of LF Project team.
- Participated in the block health melas where 6 new leprosy were detected and put on treatment immediately.

EYECARE

- 1079 cataract surgeries were performed at our eyecare hospitals - MNC (Mahanadi Netra Chikitsalaya) in Sonapur & JNC (Junagarh Netra Chikitsalaya) in Junagarh.
- One vision centre is inaugurated in Atabira, Bargarh district which is beneficial for the local communities to access quality eye care services.
- Successfully launched the website for our eyecare hospital - MNC.

[Click here to see some pictures related to the above activities](#)

Our staff . .



NN Sahoo

Netrananda Sahoo is associated with LEpra from 1996 and currently working as a project officer in Odisha.

What is the change you observed in the field of leprosy over the years?

Till 2005, we followed a set pattern of vertical programme work and later we started integrated programmes. Currently, we are strong in empowering the govt. health staff, providing complication management and socio-economic support to our beneficiaries. We are observing more number of leprosy cases after the initiation of active case finding activities along with the govt.

How has COVID19 affected our services?

The major challenge was that the beneficiaries were not able to come to our referral clinics due to restrictions on public transportation. Our team ensured the beneficiaries received all the required services - customised protective footwear, self-care kits, masks, sanitisers etc. at their door steps. We also facilitated COVID19 vaccinations to most of our beneficiaries.

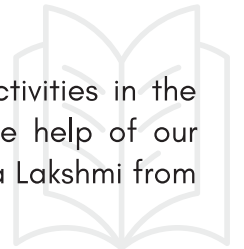
What do you like the most about working with LEpra?

The work culture, positive spirit of the team to serve, our experience staff, providing free treatment to all our beneficiaries and at the end of all, to see the happy faces of our beneficiaries after receiving the treatment and see them leading a normal life. Glad to be a part of making people lives better.



Story - how do we identify new leprosy cases?

We regularly conduct the Leprosy active case finding activities in the difficult and hard-to-reach villages/communities with the help of our volunteers and outreach workers. To read the story of Vara Lakshmi from Guntur in AP, [click here](#).



Message from Prasant

Last month has been quite hectic with the financial year ending processes. LEpra Society hosted the first physical meeting of ILEP (International Federation of Anti-Leprosy Association) members in Hyderabad after the COVID19 pandemic. It was quite refreshing and helpful to have discussions physically after almost two years of virtual meetings. Preparations for International Leprosy Congress are in progress both internally and externally with the organisers and other stakeholders. Met some of our partners in Delhi to discuss about the coming year. One of the notable outcomes was the delegation of a fellow surgeon by SSI (Sight Savers India) to our satellite eye hospital in Kalahandi. ALM (American Leprosy Mission) and LEpra together finalised the financial planning for the coming year. Resource Mobilisation & Communications team visited different locations conducting workshops on local resources and fundraising. LEpra Society participated in various block level health melas organised across our operational areas. With the easing of the COVID19 infection rates, we are looking forward to the UK colleagues visit to India.



Support our work by donating . .

Account Number 0132 0030 06100 **IFSC Code** IBKL0000002 **Account Name** LEpra Society **Type of Account** Savings

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How we identified Vara Lakshmi as a suspect case of leprosy?

LEPRA regularly conducts the Leprosy active case finding activities in the difficult and hard-to-reach villages/communities with the help of our volunteers and outreach workers.

As a part of our regular activities, our team visited a village in Guntur district of Andhra Pradesh for active case detection. The volunteers visited each and every house to collect the details of family members (no. of family members, age etc.). Meanwhile, the outreach workers started examining the families of whom the details are already collected.

During this survey, our team surveyed 50 houses in that village and identified 2 possible suspects who might be affected by leprosy. Our staff perform the Nerve Function Assessment (NFA) to the suspected cases and confirm leprosy. If they are not sure even after NFA, they collect the sample and send it to the laboratory for biopsy test and then confirm leprosy.

Out of the 2 suspects' cases, one is the story of Boddu Vara Lakshmi, 50 years old who is a daily wage worker. She knew that she had patches and was not sure about whom to consult. Our staff during the active case finding, identified skin patches on her right hand elbow joint and detected that she had no sensation in those areas. She is confirmed as a Pauci-Bacillary case (one of the types of leprosy). And most importantly, the patches were found near the elbow where the ulnar nerve is present. If the detection and treatment is delayed, the ulnar nerve might get affected and lead to clawing of hand gradually. Immediately, our staff explained her about leprosy and counselled Vara Lakshmi and family members not to worry regarding the complications as we detected in early stages. Detecting leprosy in early stages is one of the crucial actions to fight the disease.

Vara Lakshmi was referred to the nearby Primary Health Centre (PHC) and provided with the Multi Drug Therapy (MDT) for 6 months and our teams follow-up regularly to observe the improvement and disappearing of skin patches.

After all the process is done, Vara Lakshmi expressed her sincere gratitude for coming to their village voluntarily and help her in detecting leprosy in early stages.

To identify many such hidden cases, active case finding is one of the key interventions done by LEPRA regularly at hard-to-reach and remote places.