Leprosy Elimination in Brazil*

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Leprosy is very unevenly distributed in Brazil. Brazil is na extremely large country — almost three times the size of India — with major cultural and social-economic differences in the many regions.

Significant progress has been made in Brazil towards the elimination of leprosy after the official and extensive introduction of MDT in 1993. The prevalence rate has dropped steadily to reach 4.5/10.000 in habitants in 1998. However, twith widening coverage of MDT services, active case finding, leprosy elimination campaigns, there has been a dramatic increase in the new cases detected each year. In 19985 alone 44,000 new cases were detected — what means this represents a 58% of increment increase in the detection rate over the last 10 years. This dramatic increase could be attributed most probably to operational reasons than to the continuing spread of the infection, mainly because intensive leprosy control activities were promoted in the country in this period.

Health services, although available in the majority of its municipalities, shows a wide variety in their ability to deal with leprosy. Based in the effectiveness of the available drug treatment (MDT as recommended by WHO) it was evident that a different approach was required in order to eliminate leprosy and that the new approach had to be tailored to local conditions and the existing health services.

There was general recognition by MoH that the key to eliminate leprosy from Brazil is to expand coverage of leprosy services by providing MDT services with in the primary health system at the municipal level. To guide this process a Task Force was established in January 1999 which represented all key players: the National Leprosy Program of the Ministry of Health, the municipal health secretaries (CONASEMS), PAHO/WHO, MORHAN (a social mobilization organization for leprosy) and leprosy experts.

Leprosy is now on the public health agenda in Brazil and the original coalition has been expanded to include important players creating a National Alliance for the Elimination of Leprosy. The members of the Alliance are Family Health Program of the Ministry of Health, the States Coordinators of the national leprosy programme, the Task Force, Paho/who and members of International Federation of the Anti-Leprosy Associations (ILEP) in Brazil.

The National Leprosy Program, the leader of the National Alliance, has developed the first Joint National Plan for 2001. The objectives are to improve access to leprosy service as well as reduce leprosy related disabilities among children. The bottom line of the plan is to detect and cure all the remaining leprosy cases and eliminate leprosy from Brazil, at the latest by the year 2005.

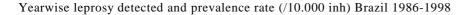
The key elements of the strategy are:

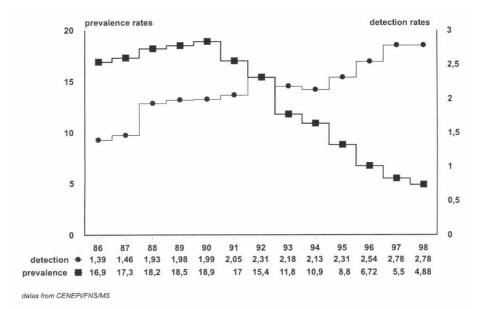
- Improving access to leprosy services by integrating MDT services within the primary health care system
- Capacity building to enable all health workers in
 - endemic areas to diagnose and treat leprosy
- Simplifying logistics to ensure the availability of free MDT drugs at health centers
- improved awareness of leprosy and changing the negative image of leprosy
- Ensuring high cure rates through innovative treatment delivery and greater community involvement
- Actively monitor the local leprosy situation and progress towards elimination.

The Task Force had challenging terms of reference: it had to serve as a catalyst to motivate municipal health authorities to decentralize leprosy services as well as provide them with the necessary technical support to do

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so. Another task was to change community perception of leprosy and motivate people to actively seek treatment. Clearly, monitoring the impact of decentralization with the municipal health authorities was a key element of its mandate.

And the approach worked — the Task Force worked closely with municipal health teams to make MDT services available, adapted the strategy to their field reality, launched a campaign to create a positive image for leprosy, and effectively shifted the ownership for leprosy elimination to them and their communities. Within the first year of operation the number of health facilities providing leprosy treatment doubled and reached 100% coverage of all 400 facilities in its area of operation.

As outlined in the Joint National Plan, the task force will assist the MoH by working closely at the municipal level to:

improve geographical, cultural and economic access to MDT services,

- simplify the information system in order to effectively monitor the decentralization of services
- advocate leprosy elimination to local politicians, health authorities and communities and in particular reduce the impact of leprosy among children. To this end CONASEMS has appointed an Ambassador of leprosy Elimination.

Our Brazilian experience clearly shows that when all players in the health sector and in civil society work together, in partnership, with a common goal and strategy, significant changes are made in leprosy control. In this moment our conclusion is that oWe are confident that we will soon consign leprosy to history in Brazil.

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