



LEPROSY

Key data

- Leprosy is caused by the bacteria *Mycobacterium leprae*, also known as Hansen's bacillus. It is a chronic infectious disease that evolves slowly, with an average incubation period of 5 years, although symptoms may take up to 20 years to appear.
- The disease affects mainly the skin, peripheral nerves, mucosa of the respiratory tracts, and eyes.
- If untreated, the disease can cause progressive and permanent lesions in the skin, nerves, limbs, and eyes.
- Leprosy is curable with multidrug therapy (dapson, rifampicin, and clofazimine), a combination that kills the pathogen, cures the patient, and halts transmission.
- Although leprosy is not highly contagious, it is transmitted through direct contact with bodily fluids of the nose and mouth, although this only occurs when there is frequent contact with patients who have not been treated.
- Globally, according to the official reports of 138 countries, 211,973 new cases and 176,176 prevalent cases were detected in 2015 (0.18 cases per 10,000 population).
- Between 2011 and 2015, the number of new cases in Latin America and the Caribbean declined from 36,659 to 28,806 (22%), and the detection rate fell 26% (from 6.07 to 4.49 per 100,000 population). In the same period, the prevalence rate fell from 0.57 to 0.44 per 10,000 population (24%).
- All of the countries of the Americas have achieved the national elimination goal (<1 case per 10,000 population), with the exception of Brazil (1.27), while at the first subnational administrative level six countries have not yet reached the goal (Argentina, Bolivia, Dominican Republic, Guyana, Paraguay, and Venezuela).
- The countries that reported more than 100 new cases per year are Argentina, Bolivia, Brazil, Colombia, Cuba, Dominican Republic, Ecuador, Mexico, Paraguay, and Venezuela.

PAHO/WHO's response

- Since 1992, PAHO/WHO has promoted the *Regional Plan of Action for the Elimination of Leprosy in the Americas*, for coverage with multidrug therapy (MDT). Since then, a 42% coverage rate has been achieved, and from 2001 to the present day, coverage is almost universal. The Organization provides MDT free of charge to all people that need it, through donations from the Novartis Foundation.
- In 2009, the PAHO/WHO Member Countries, through [Resolution CD49.R19](#) of 2009, committed to the goal of eliminating leprosy as public health problem at the first subnational level by 2015, and in 2012 PAHO/WHO formulated a "[Plan of Action in order to Accelerate the Achievement of the Elimination of Leprosy in Latin America and the Caribbean](#)" to reduce the prevalence of this disease to less than 1 case per 10,000 population.
- [Resolution A/RES/65/215](#) on the "Elimination of Discrimination Against Persons Affected by Leprosy and their Family Members," approved by the United Nations General Assembly in 2010, seeks to promote the formulation and implementation of policies and measures to prevent the discrimination of persons affected by leprosy and their family members.
- In 2010, PAHO/WHO published [Community-based Rehabilitation Guidelines](#), with the support of the International Labor Organization (ILO), the United Nations Educational, Scientific and Cultural Organization (UNESCO), and the International Disability and Development Consortium (IDDC), which has a chapter devoted to leprosy.
- In 2016, the PAHO/WHO Directing Council adopted Resolution [CD55.R9](#), which includes implementation of the plan for the elimination of neglected infectious diseases, including leprosy.
- WHO prepared the [Global Leprosy Strategy 2016-2020](#), which provides guidelines to directors of national leprosy programs, so that they can take steps to reduce the burden of the disease in collaboration with various sectors, including organizations that work for human rights and gender equality.