ACCEPTABILITY OF CHEMOPROPHYLAXIS FOR HOUSEHOLD CONTACTS OF LEPROSY PATIENTS IN BANGLADESH: A QUALITATIVE STUDY

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Introduction

• Chemoprophylaxis with single dose rifampicin (SDR): promising intervention to prevent leprosy in contacts of patients
• Application in control programmes often requires disclosure of the leprosy diagnosis
• Promoting control and treatment of stigmatised diseases without contributing towards stigma: very difficult
• Objective of this study: to assess social acceptability of disclosure of the diagnosis and attitude towards taking prophylactic medicines in a leprosy endemic area in Bangladesh
Methods

• Qualitative study through focus group discussions

• Study population:
  – 136 participants from 3 different locations: 2 rural villages and 1 urban area
  – Male and female groups of about 12 participants divided in two age groups: adult and adolescent
  – 14 health workers with extensive experience with leprosy patients
Themes

• Attitude towards chemoprophylaxis

• Attitude towards disclosure of the leprosy diagnosis
  – To household members and family
  – To neighbours and other social contacts
Attitude towards chemoprophylaxis

• All participants were positive about taking a prophylactic drug, even after explaining that full protection against leprosy was not guaranteed

Rural female adult: “Of course we will take the medicine. We are also taking the medicine for filariasis, because we know we will be protected from the disease when we take the medicine”

Urban female adolescent: “Health workers in our area give medicine for different diseases. Our parents are taking these medicines and allow us to take them also. They do not have any objection for that”
None of the participants would object to disclosure of the diagnosis to household or family members. Health staff reported refusal in limited number of cases.

Many participants had objections to share this information with neighbours and other social contacts due to stigma of the disease.

<table>
<thead>
<tr>
<th>Group</th>
<th>Site</th>
<th>Disclosure of diagnosis to family</th>
<th>Disclosure of diagnosis to neighbours or others</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adult male</td>
<td>Urban</td>
<td>+</td>
<td>+</td>
</tr>
<tr>
<td></td>
<td>Rural</td>
<td>+</td>
<td>+/-</td>
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<tr>
<td>Adult female</td>
<td>Urban</td>
<td>+</td>
<td>+</td>
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<tr>
<td></td>
<td>Rural</td>
<td>+</td>
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<tr>
<td>Adolescent boys</td>
<td>Urban</td>
<td>+</td>
<td>+</td>
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<td></td>
<td>Rural</td>
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<tr>
<td>Adolescent girls</td>
<td>Urban</td>
<td>+</td>
<td>+</td>
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<tr>
<td></td>
<td>Rural</td>
<td>+</td>
<td>+</td>
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<tr>
<td>Staff TLMB</td>
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<td>+/-</td>
<td>-</td>
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<tr>
<td>Total</td>
<td></td>
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<td>+/-</td>
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</tbody>
</table>

+ = positive attitude, - = negative attitude, +/- = some of the people were positive and some reacted negatively
Disclosure to family

Rural male adolescent: “I have to tell my parents about my problem for my own good. They will help me”

Urban male adult: “If I have any problem, my family should know about it. It is important that our family knows about the disease so that they can be aware and take precautions”

TLMB staff: “I have an female patient who doesn’t want us to go her house, because she thinks it will create problems for her marriage”

“Patients will not face many problems in their household unless they become disabled. Then it can create problems, but this is the minority.”
Disclosure to neighbours

Rural male adult: “It will be a problem for our children, they will not get married”

Rural male adolescents: “I don’t want to tell my neighbours about the disease, because they might hate us. It will be good if they don’t know”

Rural female adult participants: “There are many people who will not talk to a person who has leprosy, will not walk beside her, will not touch her”
Conclusions

• Chemoprophylaxis for household contacts of leprosy patients is an effective and socially acceptable addition to current leprosy control programmes

• Chemoprophylaxis for other contacts would only be feasible without disclosure of patient information: for example in the form of mass campaigns for the whole population of the area
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