

RISK OF EXPOSURE TO LEPROSY IN HYPERENDEMIC SLUMS OF BOMBAY

Sir,

The hazard posed by abnormal multibacillary leprosy cases in metropolitan cities situated in hyperendemic zones of India has been well established by a series of epidemiological studies carried out in Bombay over the past decade. Dharmendra & Ganapati¹ have recently reviewed these studies. Possible effect of transmission of leprosy to susceptible population hailing from areas of low endemicity through migration was indicated in a slum study in Bombay.² This study revealed that the prevalence rate (PR) of leprosy among slum dwellers hailing from Ratnagiri, a low endemic district of Maharashtra State, and settling down in Bombay slums was almost 10 times the estimated PR of 1.67 per thousand in the district proper. It was considered necessary to investigate the possible factors responsible for subjects acquiring the disease in this particular district. The investigators visited Ratnagiri and confirmed the low PR of leprosy in different villages through scrutiny of records. Adult enumeration was found to be low as most of the male population had migrated to Bombay and many returned to Ratnagiri for varying periods.

Children in 4 schools in a rural set up in this district were surveyed. Out of 772 children examined 2 cases with tuberculoid leprosy were detected (PR 2.6 per thousand). Both cases gave history of having stayed in hyperendemic slum pockets of Bombay for the purpose of schooling and returning to Ratnagiri. The families of both children were examined for evidence of leprosy and no intra familial cases were detected.

It is not possible to imagine these children to have acquired infection by any means other than migration to a hyperendemic slum pocket and exposure to a high quantum of infection therein.

The above observation indicates the importance of considering leprosy transmission as due to exposure to a pool readily available in urban slum communities and point to the need for reducing the pool with vigorous chemotherapy.

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