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Short Communication

Major Risks and Treatment Methods of Leprosy

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DESCRIPTION

Leprosy, also known as Hansen's Disease (HD), is a long-term infection caused by the bacteria *Mycobacterium leprae* or *Mycobacterium lepromatosis*. Infection can damage nerves, respiratory tract, skin, and eyes. This nerve damage can lead to loss of sensitivity to pain, leading to partial limb loss from repeated injuries and infection from unnoticed wounds. Infected people also develop muscle weakness and vision loss. Symptoms of leprosy may appear in him within a year, but in some people it may take him 20 years or more before symptoms appear [1,2].

Although extensive contact is required, leprosy spreads between humans. Leprosy disease has a low pathogenicity, and 95% of people infected with *Mycobacterium leprae* do not develop symptoms. Transmission is thought to occur through contact with coughs and nasal fluids of people infected with leprosy. Genetic factors and immune function influence a person's susceptibility to disease. Leprosy is not transmitted to the fetus during pregnancy or through sexual contact. Leprosy is more common among people living in poverty. There are two main types of the disease, oligococcal and polycoccal, which differ in the number of bacteria present. Patients with polymicrobial disease have 5 or less pigmented, numb skin patches, and those with polymicrobial disease have 5 or more skin patches. Diagnosis is confirmed by detection of mycobacteria on skin biopsy [3-5].

Unfortunately, there are usually no immediate leprosy symptoms that signal *M. leprae* infection. Instead, it can take at least a year for symptoms to appear, and most people do not show signs of leprosy until five to seven years after getting sick.

In general, leprosy affects the skin (in the form of rashes, lesions, bumps) and peripheral nerves. Numbness of the skin, loss of sensation in the limbs, and muscle weakness are all symptoms of peripheral nerve loss. Symptoms of leprosy vary depending on how advanced the disease is. In the worst case, if leprosy is not treated in time, it can lead to disfigurement and blindness.

If we have skin lesions that may be leprosy, your doctor will take a small sample and send it to a laboratory for testing. This is called a skin biopsy. The doctor may also do a skin swab. In the case of oligocal leprosy, the bacteria do not appear on the test results.

A Repromin skin test may be required to determine the type of leprosy. For this test, doctors inject a small amount of the inactive bacteria that causes leprosy just under the skin on the forearm. Check the injection site after 3 days and see if there is a reaction again after 28 days. People who do not have leprosy or who have leprosy do not respond to this test.

Leprosy can be cured. Over the past 20 years, 16 million leprosy patients have been cured. The World Health Organization provides free treatment for all leprosy patients. Treatment depends on the type of leprosy. Antibiotics are used to treat infections. Doctors recommend long-term treatment, usually six months to a year. If you have severe leprosy, you may need to take antibiotics longer. Antibiotics cannot treat nerve damage associated with leprosy [6,7].

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