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QUALITY OF LIFE, QUALITY OF CARE, AND PATIENT SAFETY

EXISTING COMORBIDITIES, COSTS INCURRED AND LINKAGES TO PUBLIC WELFARE SCHEMES AMONGST LEPROSY PATIENTS AT STATE LEPROSY HOSPITAL— A DESCRIPTIVE STUDY

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Introduction: The unprecedented challenge for leprosy patients is development of comorbidities and the poverty which makes them vulnerable to stigma attached with the disease. It further worsens the socioeconomic and health status of the patients and their families.

Objectives: To determine the proportion of co-morbidities among leprosy patients, costs incurred by them for the management and also to ascertain the linkages to public welfare schemes.

Materials and methods: A cross-sectional, descriptive study was conducted at State Leprosy Hospital during four month period. The participants of the study were patients admitted during study period which included newly detected and old treated cases. Patients were interviewed using a semi-structured questionnaire and a few of the study variables were collected from the case-records and laboratory reports. The data obtained was entered and analysed using EpiData Analysis V2.2.2.183.

Results: Among 80 participants, 75% were males, 25% were females, 65% were from rural areas, 65% were illiterate, 82% belonged to lower socio-economic class, 40% were separated from their families and 72% were unskilled workers before they were affected by the disease and are currently unemployed (89%). The middle-aged and elderly constitute 73% of patients. Comorbidities were present in 57% of patients. Hypertension (39%) was commonest followed by diabetes (12%). The cost incurred for treatment of comorbidities during last 6 months ranged from Indian rupees (INR) 500-15000. Cost incurred due to loss of workdays ranged from INR 500-30000. In 92% of patients linkage to public welfare schemes (PWS) like health care, nutrition and pension was present.

Conclusion: The comorbidities were present in one in two patients. Cost incurred due to comorbidities is a huge burden for patients who are, elderly, unemployed and separated from family. Creating awareness and linking to PWS will significantly improve











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socioeconomic and health status of this vulnerable population and their families.





