

JOSE R. REYES MEMORIAL MEDICAL CENTER
DEPARTMENT OF DERMATOLOGY

HANSEN'S DISEASE CLUB ACTIVITY REPORT
APRIL 2021

LEPROSY LECTURE SERIES: DIAGNOSIS AND MANAGEMENT- April 15, 2021

• **Objective:**

- To present an actual case of leprosy seen at the outpatient department
- To discuss the diagnosis of leprosy
- To review on the different pharmacologic and non-pharmacologic management of leprosy

• **Description of Activity:**

- The second part of the lecture series was conducted through an online platform, attended by the dermatology residents and consultants. The lecture was started by a presentation by our first year resident, Dr. Rizia Margate, of an actual case seen at the Hansen's Disease Clinic. She discussed a case of a 15-year-old male child with a diagnosis of leprosy. The discussion was supplemented by Dr. Abelaine Venida-Tablizo and Dr. Ma. Luisa Abad-Venida. They discussed about the diagnosis of leprosy including the pharmacologic management of child and adult leprosy. Furthermore, they enlightened the residents the different non-pharmacologic management as well as the principles behind giving them.

• **Output:**

- The dermatology residents and consultants actively participated on the activity. They listened attentively and answered the questions from the Dr. Venida and Dr. Tablizo.





Subjective

3 years PTC - noted hypoesthesia of his 4th digit, left hand. This was associated with difficulty in extending said finger. No consult done, no meds taken. During the interim, patient noted that he was unable to flex and extend said digit now extending to the other fingers of both hands. No other lesions noted at this time.

1 year PTC - Erythematous patch on right cheek. (-) hypoesthesia. Applied petroleum jelly and unrecalled herbal meds which did not provide relief. Lesion persisted.

11 mos PTC - noted progression to plaque. (+) hypoesthesia. (-) meds taken. Noted progression and increase in numbers of lesions. Noted clawing of bilateral digits of both hands with associated hypoesthesia. (-) consult, (-) topical meds.

During the interim, noted persistence and progression of lesions which prompted consult at our institution.

(-) fever, SOB, cough, colds
(+) edema on left foot

PmHx: (-) asthma, allergy, atopy

FmHx: (+) HTN - maternal
(+) leprosy - father (deceased - 2011)
(-) DM, asthma, allergy



Plan

1. Continue MDT MB (Dapsone removed)
Dapsone replaced with Doxycycline 100 mg/cap 1 cap once a day (2nd pack given)
Multivitamins OD, Vit B BID
Squalene 2 caps TID
Egg yolk TID
Plain Vaseline BID Mild soap, Emollients BID
2. For regular follow up with rehab medicine. Advised regular check up
3. Refer to wound clinic for management of ulcer
4. Ferrous sulfate 325mg OD

TCB after 2 weeks

