Common Flow chart for Leprosy and Kala Azar workers

In all cases presenting with hypo pigmented macules

For kala azar staff

For leprosy staff

Duration of patch may be months to years

• ASK for loss of sensation in lesion and look for patch lighter in colour than rest of skin or reddish in colour Maybethickened,shiny.

Depigmented patch is not leprosy

• Evidence of peripheral nerve involvement

If definite loss of sensation is there or evidence of peripheral nerve Involvement exists

SUSPECT

Leprosy and refer to nearby health facility for confirmation

No loss of sensation in lesion

Ask for H/o Itch

absent

ask for H/o inflammation

H/o treated kalaazar(no active signs and symptoms will exist)

O/E In PKDL lesion may be macular, popular, nodular or mixed in addition to hypopigmentation, Predilection of lesion to sun exposed parts may exist in PKDL)

refer to nearest health facility or kalaazar field worker for confirmatory test

Present

topical antifungal

If not relieved

refer to dermatologist