COST-BENEFIT ANALYSIS OF CASE FINDING ACTIVITIES: A CASE OF LEPROSY CONTROL PROGRAM IN MYANMAR

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The current problem in the Leprosy Control Program is low coverage of registered cases which is roughly estimated to be about 50% of the total estimated cases in the country. There is a need for intensification of case finding activities in the implementation of the Leprosy Control Program.

The major objective of this study is to assess the costs and benefits of different methods of case finding activities : Active Case Detection and Passive Case Detection, from the provider as well as patient perspectives. In this study benefits in terms of cost savings for early case detection were used to find out which method of case finding activities is better in the sense that more early cases are detected. If the patients are detected in the early stage that is before disability sets in, there will be substantial cost savings from provider as well as patient sides.

The benefit/cost ratios are found out from three different scenarios : Baseline scenario, ACD alone scenario and PCD alone scenario in low, median and high endemic areas of the country.

The study shows that from the provider perspective, ACD alone scenario had the highest benefit/cost ratio among the three scenarios. In the low endemic areas the benefit/cost ratio for ACD alone scenario is 1.33 and the value in PCD alone scenario is 1.25 but in high endemic areas these values vary too much: 10.38 and 1.37, respectively. It means that in the high endemic areas ACD activity should be more emphasized than PCD activity in terms of the early case detection. From the patient perspective, in the low endemic areas benefit/cost ratio for ACD is 34.86 but in the high endemic areas benefit/cost ratio for ACD is 76.99 which is very much larger than PCD.

The study concludes that ACD activities are more emphasized than PCD activities especially in the high endemic areas. By doing economic evaluation, the program can identify which method of case finding activities should be given more priority in different endemic areas of the country in terms of analyzing the costs for each method of case finding activities and cost savings for early case detection which is acting as benefit of the study.

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San San Aye
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ABBREVIATIONS

ACD	:	Active Case Detection
ALI	:	Assistant Leprosy Inspector
BCR	:	Benefit/Cost Ratio
BHS	:	Basic Health Staff
CBA	:	Cost-Benefit Analysis
CBR	:	Community Based Rehabilitation
CE	:	Contact Examination
CFA	:	Case Finding Activities
ER	:	Economic Rehabilitation
JLW	:	Junior Leprosy Worker
LCP	:	Leprosy Control Program
LI	:	Leprosy Inspector
MB	:	Multi Bacillary
MDT	:	Multi Drug Therapy
MS	:	Mass Survey
OPD	:	Out Patient Department
PB	:	Pausy Bacillary
PCD	:	Passive Case Detection
PHC	:	Primary Health Care
SE	:	School Examination