It was the year of 1995. After completion of medical graduation, I started my career in an NGO in the North Bengal. One of the projects of that NGO was to detect and treat Leprosy patients of Lalmonirhat and Kurigram district, refer them to specialized Leprosy hospital if required and aware the people regarding Tuberculosis and Leprosy as well. There were satellite clinics for TB and Leprosy in every Union and anti-TB & anti-Leprosy drugs were distributed by the health workers among TB and leprosy affected patients free of cost. I had to visit every satellite clinics by turn, manage the patients and refer them to specialized Leprosy hospital in appropriate circumstances. I used to visit patients’ house in special instances when the patients could not come to the clinics due to physical disability.

One day I came to know of such a leprosy struck, crippled and home-bound patient in Baura Bazar, Patgram Upazila, Lalmonirhat district near Bangladesh - India border. There are reasons other than physical disability please let us go and visit the patient in his house, the health worker humbly requested, although it was fair distance away. I decided to go. I started one morning, along with the health worker and travelled near about 70 kilometers by my motorbike to reach the patients’ home in Baura Bazar. The health worker guided me inside where the patient was sitting on a bed. I was shocked, even being a doctor, to see the extensive involvement of his body by Leprosy. I started talking with the patient, looking in to his medical records and listening to his story spell bound.

I was moved at the onset as, to my surprise, his name including the nick name was that of my elder brothers’. This brave freedom fighter of our 1971 liberation war contracted Leprosy 10 years back. He had multi-bacillary disease. Very few patient of Leprosy develop multi-organ involvement i.e. liver, spleen, testes etc. but this unfortunate gentleman had multi-organ involvement. He had several attacks of Lepra reaction before requiring hospital admission. Along with other disabilities, he had lost his libido too. Although Leprosy is a less transmissible disease, it has been considered highly contagious since ancient period and Leprosy patients are thought to be cursed ones in the society.

Our patient started suffering from every social stigma of Leprosy. He became an outcast in his village and lost his job. Poverty crept in his family. Wife could not tolerate this poverty-stricken, disfigured man with loss of libido for long. She left him at some point of his illness taking the advantage of a British law of colonial regime that a wife can divorce leprosy affected husband without much legal procedure. Two beloved children followed their mother leaving behind their ill and physically disabled father all alone.

I started treatment for lepra reaction according to management protocol. I could do nothing to help him further and left the house leaving behind the vacant stare of a helpless man who was abandoned by his family, society and country he fought for. Two months later his medical record file was brought to me as he had developed lepra reaction again. I referred him urgently to Damien Foundation Leprosy hospital in Nilfamari district where he had died within two weeks.

*Dr Ahsan Habib, Assistant Professor, Department of Neurology, BSMMU, Dhaka

*For correspondence