

CORRESPONDENCE

To the Editor, *Leprosy Review*,

In the July, 1940, issue of *Leprosy Review* there appeared (p. 152) an abstract of an article published by me with Doctors J. N. Rodriguez and J. G. Tolentino in the *International Journal of Leprosy* [7 (1939) 473-494], regarding the course of open cases of tuberculoid leprosy at the Cebu leprosarium. One of the conspicuous features of the cases involved was the frequency with which secondary lesions, beginning as nodules, had appeared as a reaction phenomena. In the abstract referred to this feature was spoken of as a "well-known" fact. May I submit that if it is well known, it is not well appreciated? There is ample evidence that, even today, such cases are not infrequently taken to be of "nodular" nature—of the lepromatous type of the current international classification.

More important is a statement—this one put into brackets, so that it is clearly of editorial nature—in connection with our observation that in some cases the lesions underwent change in the course of time from major to minor tuberculoid. The editorial insertion purports to explain this change, as follows: "[or, in other words, a temporary phase of reaction appeared and passed off]." It is feared that this statement may cause some misunderstanding, if not of the difference between the major and minor tuberculoid varieties of the disease, at least of our understanding of them.

Inasmuch as the writer was the first to publish specifically on reaction in tuberculoid leprosy [*International Journal of Leprosy* 2 (1934) 279-292], and has dealt with the matter repeatedly in later publications, it may perhaps be granted that we should be capable of distinguishing between the acute, reactional conditions

in that form of leprosy, whether major or minor, and the more ordinary, nonreactional clinical phases. The change which we described was not a mere recession of a temporary reaction phase, but a late change from the more exuberant major grade to the lesser, minor one and progression of lesions as of that form. Publication of this statement will be appreciated.

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Dr. Muir's reply to Dr. Wade's remarks is as follows:—

“ The major tuberculoid, in my opinion, frequently denotes a reactionary phase in the course of leprosy in a resistant patient. Most commonly, in my experience, the lesions are already large in size when they more or less suddenly appear as major tuberculoids. This shows that previous to this sudden appearance they have been spreading in a much less observable form. Major tuberculoids, once they have appeared as such, may continue to extend their margin, but, especially in the most conspicuous and typical one, it is commoner for them to cease to spread, and, after a longer or shorter period, to resolve. Thus in quite a large proportion of cases it may be said that the major tuberculoid lesion denotes a temporary phase between two other phases: (a) the inconspicuous one in which it increases in size, and (b) that of resolution in which it is either reduced to an inactive scar or at least to a much less conspicuous lesion.”

Chacachacare,
Trinidad, British West Indies.
9th June, 1941.