

CORRESPONDENCE

The Editor,
"Leprosy Review."

Dear Sir,

In "Leprosy Review" of October 1954 (Vol. 25, No. 4), Dr. Relvich refers on page 180 to the fact that in 1953 Latapi and his co-workers reported good results with isoniazid in lepromatous leprosy. He does not mention a further report by the same authors in which they record deterioration in all their patients after continuing treatment a few months longer; and, as this report is not generally known, I would like to take this opportunity to draw attention to it. It appears in the "International Journal of Leprosy" (1953), Vol. 21, No. 4, page 569, in the form of a short abstract in Spanish of their paper presented to the Madrid Congress. In a personal communication Dr. Latapi wrote: "Our final results, in fact, were identical to yours. The apparent improvement which we pointed out in our report published by the J. Invest. Dermat. dated July, 1953, was followed later on by a definite deterioration in all cases."

I am, Sir,

Yours faithfully,

W. H. Jopling, M.R.C.P., D.T.M. & H.

Jordan Hospital,
Earlswood, Surrey.

January 19th, 1955.

The Editor,
"Leprosy Review."

Dear Sir,

I have read with great interest your editorial in the October issue of the "Leprosy Review." However, I should like to take up one or two points in that editorial with which I would not quite agree.

In our conditions where in diagnosing the tuberculosis of lungs we have to depend entirely on physical examination by a physician not specialised in the diseases of chest and on examination of sputum we can only hope to pick out cases of patent tuberculosis and my paper has dealt only with these more severe cases of tuberculosis. This is why I wrote at the end of the second paragraph of my paper: "There might have been a decrease in morbidity. . . . There has been no change whatever in case mortality." It seems to me that this statement is on the whole in agreement with what you say on page 173: "Sulphone given alone as a treatment for patent tuberculosis gives disappointing results."

It might interest you that I have noticed recently in our patients what seems to be a downward trend in the morbidity of tuberculosis of lungs. During the last eight months we have diagnosed only four cases of open tuberculosis, out of whom two were new patients. This small number of cases which we find nowadays might mean that sulphone prevents the development of tuberculosis of the lungs or arrests the disease before it becomes obvious enough to be diagnosed by us. There is, of course, no definite proof and other factors might be involved here as well.

To sum up, our differences of opinion as to value of sulphones in tuberculosis does not seem to be as great as you suggest in your editorial.

Yours faithfully,

A. L. Relvich.

Ossiommo Settlement,
Agbor, Nigeria.

February 28th, 1955.