

(3) From Dr. J. WALTER of Ghana.

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Dear Sir,

Comments on Dr. G. WEDDELL'S *Pathogenesis of Leprosy* (*Lep. Rev.* 1963, **34**, 51.)

Dr. WEDDELL'S research into the pathogenesis of leprosy must be studied with great interest.

Leprologists in the field will agree upon the unsatisfactory past and present concepts of transmission which, although generally accepted are more empiric than scientific. Numerous cases of leprosy either officially reported or personally observed just do not fit in with their history of short or unaccounted contact with contagious cases into the concept of prolonged or intimate contact (skin), and why is there a high tuberculoid incidence in areas with a low 'infections' (lepromatous) rate? There seems to be more proof in Dr. WEDDELL'S new experimental approach and in his conclusions than in the present hypothesis about transmission.

The Editor of *Leprosy Review* (*idem*) rightly advocates that it would be premature at this stage to initiate changes of control measures, but in the light of Dr. WEDDELL'S findings it should also be

desirable to start a re-orientation about immunological wide scale preventive measures (lepromin? B.C.G. ?) and to place such at least in the field of research much more prominently than this has been done hitherto.

J. WALTER.