

Letters to the Editor

6th November, 1967.

Dear Sir,

Having noted (in Archives of Dermatology, Vol. 92, page 603; Society Transactions, 1965) that epsilon aminocaproic acid was effective in the control of the lesions of Anetoderma of Jadassohn, I thought that perhaps this substance might have a similar effect in erythema nodosum leprosum.

A supply of this drug was provided by Cyanamid International through the kindness of the Medical Director, Dr. Walter E. Boehm, M.D.

The aminocaproic acid (AMICAR-Lederle) was administered to 7 patients with lepromatous leprosy who were having signs and symptoms of erythema nodosum leprosum, and to one patient with dimorphous leprosy with severe neuritis and early foot drop.

The drug was used in dosages of up to 8 gm. daily and for periods of from 5 days to 17 weeks without any conclusive evidence of improvement in the signs and symptoms. Thus it can be concluded that this drug is of no value in the management of the reactive states of leprosy.

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21st November, 1967.

Dear Sir,

I was somewhat surprised to note the wording of a sentence in the body of Dr. C. S. Goodwin's article in *Leprosy Review* (1967), 38, p. 182,

which reads thus: 'Following the suggestion of Waters and Rees (1962) that the percentage of evenly stained, morphologically normal forms of *M. leprae* should be calculated in routine Ziehl-Neelsen stained preparations, the term "Morphological Index" was adopted (Goodwin, 1963), and has been accepted (Pettit and Rees, 1964; Browne, 1965)'; and of the acknowledgement on p. 186 ('The author is indebted to Dr. S. G. Browne for instruction in the examination of the morphology of *M. leprae*').

To avoid any ambiguity regarding the word 'adopted' as used by Dr. Goodwin, it should be recorded that in 1963 while on a World Health Organization Study Tour, I visited the Hong Kong Leprosarium of The Leprosy Mission (Hay Ling Chau), and on March 5 and 6 not only demonstrated to Dr. Goodwin differences in morphology of *M. leprae*, but also discussed with him at length the 'Morphological Index' as we had come to call it in Eastern Nigeria, and the method we had been using to calculate the Index. This is recorded in the 'Report of a Study Tour of Leprosy Research Centres in India and the East', which I submitted to the World Health Organization on 11th March, 1963.

In the light of our discussions at Hay Ling Chau, I suggested that the following words be inserted in the typescript draft of the booklet, 'Essentials of leprosy for the clinician': 'In addition the morphology of the bacilli in each smear should be noted, and the percentage of morphologically normal forms, solid rods, calculated; this is known as the Morphological Index.' The revised draft was submitted for publication the following month.

Dr. Goodwin thus 'adopted' a term already in use by others. It is hardly correct to state that this term was 'accepted' by me after April, 1963, when I had previously suggested it to him.

As Cochrane says (1952): 'These changes (i.e., in morphology) have been noted for many years and they take place both in treated and untreated cases, and have been mentioned by many workers.'

The successive Annual Reports of the Director of the Uzuakoli Leprosy Research Unit to the Government of Eastern Nigeria, from 1960 onwards, make mention of the studies that provided the data for the calculation of the Morphological Index, and before 1959, Dr. T. Frank Davey had systematized the laboratory techniques on which the Index could be based.

I am, Sir, etc.

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REFERENCES

- BROWNE, S. G. (1965). A limited clinical trial of injectable Thiambutosine. *Lep. Rev.*, **36**, 21-22.
- COCHRANE, R. G. (1952). The action of sulphones in leprosy, with particular reference to histopathology. *Trans. Roy. Soc. Trop. Med. Hyg.*, **46**, 122-126.
- GOODWIN, C. S. (1963). Essentials of leprosy for the clinician, 1st Ed., 4. Hong Kong: Hong Kong Auxiliary of The Mission to Lepers.
- GOODWIN, C. S. (1967). The significance of *Mycobacterium leprae* in the nasal mucosa, with special reference to Chinese leprosy patients. *Lep. Rev.*, **38**, 181-188.
- PETTIT, J. H. S. and REES, R. J. W. (1964). Sulphone resistance in leprosy. *Lancet*, **2**, 673-674.
- WATERS, M. F. R. and REES, R. J. W. (1962). Changes in the morphology of *Mycobacterium leprae* in patients under treatment. *Int. J. Leprosy*, **30**, 266-277.