## Letters to the Editor

## IS THE LEPROMIN TEST RELIABLE IN CHILDREN?

Sir.

Having recently had occasion to review, in the light of findings in Venezuela and elsewhere, some notes made in Nigeria (1959–65), I must conclude that in young children the lepromin test as ordinarily practised may not be a reliable indication of resistance to leprosy infection or to capacity to mount a degree of cell-mediated immunity parallel with the positivity of the test. I would suggest that workers who are in touch with child contacts of leprosy patients in areas of high leprosy prevalence should institute investigations into this problem.

My own findings suggested that while a positive test—and *a fortiori*, a strongly positive test—was useful in indicating a measure of cell-mediated immunity, a negative test provided no evidence that the individual was incapable of mounting a degree of cell-mediated immunity sufficient to limit the enlargement of a single lesion or a few lesions, and eventually to encompass their spontaneous resolution. Some child patients in whom tuberculoid leprosy was histologically confirmed, with acid–alcohol-fast débris in superficial nerve fibrils, might proceed to resolution while the lepromin test remained negative. On the other hand, some child patients in whom the test was negative gave evidence that their indeterminate macular lesions were in reality prelepromatous by showing large numbers of acid–alcohol-fast rods in the dermis on regular fortnightly slit-smear examinations.

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