Letters to the Editor

HOW INFECTIOUS IS SECONDARY DAPSONE-RESISTANT LEPROSY?

Sir,

There is a growing view, supported especially by work in South India, that dapsone resistance does not pose such a serious threat to leprosy control as has been believed. One question which has to be answered unequivocally concerns the infectivity of secondary dapsone-resistant leprosy and, as far as I can ascertain, this has not been investigated. It is well known, of course, that skin smears from active lesions in a case of dapsone-resistant relapse show both Bl and M1 strongly positive, whereas those from clinically normal skin are generally negative, thus supporting a hypothesis that the total bacillary load is probably less than in an untreated lepromatous case. The frequency of positive nasal smears and nose blows, which would be more generally acceptable as an indicator of infectivity, has, however, not been recorded.

One study investigated the bacteriology of the nose in 62 lepromatous patients treated for varying periods with dapsone monotherapy. Nasal smears were examined from a total of 49 cases but in only one was the M1 positive. Dapsone sensitivity was not investigated in this series.

I have myself reported infiltration and nodules of the palate and laryngeal involvement in patients with clinical evidence of secondary dapsone resistance. In these cases, however, nasal smears were not done.

In my opinion, there is a need for a well-planned study to determine the proportion of secondary dapsone-resistant cases which excrete viable Mycobacterium leprae from their nasal mucosa and thus constitute a potential source of transmission of disease. Such a study should be linked to an investigation of the probable index case in all patients with proven primary dapsone resistance.

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References


TUBERCULOID LEPROSY AT THE SITE OF A DOG BITE

Sir,

Although it is well known that skin lesions of sarcoidosis sometimes appear in and around scars ('scar sarcoidosis'), it is less well known that skin lesions of leprosy may originate in scars. Leprosy workers seem to have made little note of this interesting phenomenon, if reports in the literature are any criterion, and the only published photograph with which I am acquainted is given in Jopling & Harman in which a lesion of tuberculoid leprosy is shown involving 3 vaccination...