

EFFECTIVE PROPHYLACTIC MEASURES AGAINST ACCIDENTAL INOCULATION WITH LIVE *MYCOBACTERIUM LEPRAE* IN LABORATORY AND HOSPITAL WORKERS

Sir,

With intensification of research activities in leprosy, larger numbers of workers are now handling live *Mycobacterium leprae* in laboratories and hospitals and this clearly increases the risk of accidental inoculation, putting them at greater risk of contracting leprosy. Unlike the situation in tuberculosis, in which a protective vaccine is available, there is as yet nothing comparable in leprosy and to our knowledge no universally agreed protocol for the protection of laboratory or other staff has been published. We are particularly interested in the matter of antibiotic cover. Dr M J Colston (National Institute for Medical Research, Mill Hill, London) has suggested that daily doses of dapsone, 100 mg, should be given for 4 weeks, together with daily rifampicin, 600 mg, for 2 weeks, for accidents occurring during the handling of armadillos experimentally infected with *M. leprae*.

306 *Letters to the Editor*

We may well adopt this advice, but meanwhile it would be of interest to know if other centres have developed a standard procedure for laboratory and hospital accidents of this kind?

S K KAR

*Regional Medical Research Centre
Indian Council of Medical Research
Operating at Drug Testing Laboratory
Bhubaneswar- 751 005, Orissa, India*