

COMMENT: 'SILENTLY ARISING CLINICAL NEUROPATHY' AND EXTENDED INDICATION OF STEROID THERAPY IN LEPROSY NEUROPATHY

Sir,

I would like to make a few comments on the article entitled 'Silent neuropathy' in leprosy: an epidemiological description.¹

As a first step in an epidemiological evaluation, it is essential to provide a precise definition of the disorder. To more accurately define the ideas put forward by the authors, the expression 'Silently arising clinical neuropathy' would better describe the neurological complications in leprosy as presented within the framework of 'silent neuropathy'. In the same line of thought, 'quietly arising nerve paralysis' would be more appropriate than 'quite nerve paralysis', since by the time paralysis is detected, the nerve damage is no longer quiet, because it has been detected clinically.

The words 'clinical neuropathy' refer better to the pre-clinical stage of the nerve damage which has preceded the clinical neuropathy as detected by routine voluntary muscles and touch sensibility testings. Indeed, it is assumed that symptoms like nerve function deficit are found in those patients who already have severe pathological changes.²

The pathogenesis of nerve damage in leprosy reversal reaction and erythema nodosum leprosum are considered to be accelerated phenomena of the basic and inherent cell-mediated and humoral autoimmune phenomenon present during leprosy.³

As for the pain which eventually attends the neuropathy, it may be associated with the rate of fibre degeneration⁴ and is certainly directly related to the accelerated episodes of nerve damage during overt reactions.

Taking into account the above-mentioned fundamental concepts, 'Silent neuropathy' may actually be considered to be the basic progressive neuropathy inherent to leprosy.

Extending the classical indication of steroid therapy in leprosy to include also 'Silent neuropathy', the hypothesis comes down to a very simple proposition of treating all leprosy cases with steroids. Should we consider this as an approach to the treatment of nerve damage in leprosy?

AHRI/ALERT
P.P. Box 1005
Addis Ababa
Ethiopia

YOHANNES NEGESSE

References

- ¹ Brakel WH, Khawas EB. 'Silent neuropathy' in leprosy: an epidemiological description. *Lepr Rev*, 1994; **65**: 350–360.
- ² Weller RO, Cervos-Navaro J. *Pathology of peripheral nerves*. Butterworth & Co Ltd, 1977; p. 133 and 134.
- ³ Rook GAW, Stanford, JL. Slow bacterial infections or autoimmunity. *Immunol Today*, 1992; **13**: 160–164.
- ⁴ Dyck PJ, Lambert EH, and O'Brien PC. Pain in peripheral neuropathy related to rate and kind of fiber degeneration. *Neurology (Minneapolis)*: 1976; **26**: 466–472.