

CORRESPONDENCE

This department is for the publication of informal communications that are of interest because they are informative and stimulating, and for the discussion of controversial matters. The mandate of this JOURNAL is to disseminate information relating to leprosy in particular and also other mycobacterial diseases. Dissident comment or interpretation on published research is of course valid but personality attacks on individuals would seem unnecessary. Political comments, valid or not, also are unwelcome. They might result in interference with the distribution of the JOURNAL and thus interfere with its prime purpose.

Pathology at International Congresses

TO THE EDITOR:

The recent Congress seemed to be a happy and for the most part successful event, thanks to the excellent arrangements, efficient organization and the warm hospitality of our Mexican hosts.

This letter is a plea that at the next International Congress of Leprosy, pathology should be allocated its due share of the program in sessions and workshops. It may be that the present is a time in which human pathology can make its greatest contribution to leprosy research through an interaction with experimental pathology and immunology, though the gap between pathology and immunology has not yet been bridged. It may also be true that clinical and pathological aspects benefit mutually from a joint presentation. Whether or not these were the arguments that prompted the arrangements made at Mexico, the fact remains that pathology is as much as ever a subject in its own right, and if pathologists are to make the journey to attend international meetings, they have as much right as any other group to expect an opportunity to exchange ideas amongst themselves. The inter-relationship between inflammation, granulomatous response, nerve involvement, bacterial load and prognosis is

fundamental to an understanding of leprosy and the problems of its diagnosis and classification. It is a subject of wide interest, not only to pathologists. The nature of the processes involved are not fully elucidated and there is need for dissemination of knowledge already available. At Mexico, much of this went by default.

We hope that on the next occasion this situation will be remedied. If, however, it is still necessary that parts of a subject such as pathology should be distributed between a number of sessions (preferably not concurrent sessions), it would be of some help if the chairmen would observe the published order of papers. Otherwise it is extremely difficult to hear the papers of greatest interest.

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Investigation of Chemical Compounds with Antileprosy Activity

TO THE EDITOR:

One of the fields of investigation in the leprosy division of O.M.S. is THELEP which has, among other purposes, the pur-

pose of finding drugs with antileprosy activity. This can be accomplished by the only two experimental models known up to the present, that is inoculation of *M. leprae* into the mouse foot pad (Shepard), or inoculation

of the bacillus into nine-banded armadillos (Kirchheimer-Storrs).

Even though Shepard's model has been known since 1960, practically no antileprosy drug has been discovered through its use; and because of this it is very doubtful that such an event may happen sometime in the future.

The method of Kirchheimer-Storrs is not suitable at all as a screening method for antileprosy drugs. It is not practical, is very expensive, and it is not possible to use many animals—a condition of fundamental importance when screening methods are concerned.

Due to these facts, these two methods have been the subjects of many criticisms. We sug-

gest instead the following method: to investigate the *in vitro* antioxidant activity of biologic as well as industrial antioxidants by using as substrate, that is, the fatty material, a synthetic mixture of fats quite similar to the human subcutaneous fat of leprosy patients, or of normal persons living in countries where leprosy is highly endemic. From the most powerful antioxidants found to act upon such fats it would be advisable to test their antileprosy activity in patients.

—Professor Meny Bergel

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No Enforced Segregation in Australia

TO THE EDITOR:

I would appreciate your publishing the following in reply to the review which appeared in the Current Literature section of the IJL in Volume 46 of 1978, page 232: comments by Dr. Lechat on the article "Exorcising the Leper" which was published in the *MEDICAL JOURNAL OF AUSTRALIA* (2 [1977] 345-347).

The article quoted above has already been discussed and has a reply from the Director of Health, Northern Territory Division of the Australian Department of Health (*Med. J. Australia* 2 [1977] 652). This reply points out the inaccuracies of the original article from which Dr. Lechat quotes. Since the reply was published before Dr. Lechat's comments, it would have been preferable that he consulted the source before writing his own comment as it leaves one with the impression that segregation could still be in force in the Northern

Territory. Nothing could be further from the truth. I would like this clearly stated: **THERE IS NO ENFORCED SEGREGATION IN THE NORTHERN TERRITORY OF AUSTRALIA.**

The confusion could have arisen because I was not in Australia when the original article was published, but I wrote to Dr. Gurd, who signed the article in reply as soon as it came to my notice. I think I also sent you a copy but am not sure of this. I must point out that I am very concerned about the inaccuracy of the original article and I am sure, knowing Dr. Lechat, that he will agree with me of the importance of clearing the matter up.

—John C. Hargrave, M.D.

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Features of Ridley-Jopling Classification and Its Application in the Clinical Field

TO THE EDITOR:

I would like to draw attention to certain features of the Ridley-Jopling classification and its application in the clinical field. Originally the Ridley-Jopling system of classification (1966) was based on histopathologic

findings of biopsy specimens from different types of leprosy lesions. However it might better be called a slide classification of a particular biopsy section and varies from biopsy to biopsy with respect to histologic features of BB, BT or BL. Borderline leprosy presents varied and pleomorphic clinical as well as