

Indeterminate Leprosy

TO THE EDITOR:

I wonder why Dr. Browne in his letter (1) on indeterminate leprosy in cases of doubt accepts the advice of Dr. Pettit "to temporize" and "to await indubitable signs of leprosy," without first referring to other means of diagnosing indeterminate leprosy. To my experience each lesion suspected of being indeterminate leprosy should be examined by sweat testing rather than by histopathology or sensory tests. The absence of sweating, visualized by 5% o-phthalaldehyde in xylene (2) provides convincing evidence of indeterminate leprosy. This test

is easier to carry out than pilocarpine injections with iodine and starch as the indicator.

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REFERENCES

1. BROWNE, S. G. Indeterminate leprosy, a valid clinical concept. *Int. J. Lepr.* **50** (1980) 221–223.
2. JUHLIN, L. and SHELLEY, W. B. A stain for sweat-pores. *Nature* **213** (1967) 408.

Reply to Dr. Klokke's Letter

TO THE EDITOR:

The short answer to Professor Klokke's letter is that by the time the "absence of sweating" (not its diminution) is present in a hypopigmented skin lesion, the clinical appearances are pathognomonic to the experienced clinician. Characteristic, but non-specific anhidrosis does not give the indubitable evidence of the leprosy origin of the lesion as does the demonstration of acid-alcohol-fast organisms in typical situations

in the nerve fibrils coursing in the deep dermis.

The less experienced clinician or the less experienced histopathologist is, in my opinion, well advised to await indubitable signs of leprosy.

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Foam—the Result of an Interaction Between Unactivated Macrophages and Dead *Mycobacterium leprae*?*

TO THE EDITOR:

The foam in lepromatous leprosy has been the object of study for many years, and it has been said that it consists of phospholipids and fatty acids (2, 4, 7, 9, 10). Recently, in an important communication by Hunter and Brennan, it was shown that armadillo-derived *Mycobacterium leprae* contain a

phenolic glycolipid that "may be responsible for the electron transparent foam which surrounds the leprosy organism in infected tissue" (6).

Light- and electron-microscopic studies of the structure of lepra cells have shown that the opaque droplets seen around *M. leprae* in the early stages of the infection coalesce in the later stages to produce foam containing degenerating bacilli (1, 8, 12).

Several suggestions have been made with

* Dr. Charles C. Shepard kindly served as Acting Editor regarding this communication.—RCH