

Susruta holds that the progeny of leprosy sufferers are also prone to leprosy. He says:

Strīpurnīsayoh kushthadosād dustaṣonitaśukrayoh
Yadapatyam tayor jatam jneyam tadapi kushthi-
tam

["On account of the man and woman suffering from leprosy, their sperms and ova become infected and the child born out of their union is prone to leprosy."]

He also points out that kushtha is an outcome of the person's own foul deeds:

Brahma-strī-sajjana-vadha-parasva-haranadibhih
Karmabih pāparogasya prahuh kushthasya sam-
bhavam

["It is said that acts of killing a Brahmin, a woman or noble person and usurpation of other's money, etc., are responsible for leprosy, which is a disease born out of sins."]

Susruta says that a leprosy sufferer is afflicted by leprosy in his next birth also, until and unless, taking recourse to salutary food, good conduct, proper treatment, and penance, he gets rid of it. He refers to the contagious nature of the disease in the following verses:

rasaṅgād gātrasamsparśān niśvāsāt sahabhojanāt
Sahaśayyāsanāccāpi vastramālyānulepanāt
Kustham jvaraśca śośaśca netrabhīsyanda eva ca
Aupasargikarogāśca sankrāmanti naran naram

["Leprosy, fever, consumption, diseases of the eye, and other infectious diseases spread from one person to another by sexual union, physical contact, eating together, sleeping

together, sitting together, and the use of same clothes, garlands and pastes."]

Kushtha or leprosy has been dealt with in a like manner in the later Ayurvedic texts like Mādhavanidāna of Mādhavakara (8th century A.D.) and Bhāvaprakāśa of Bhāva Mīśra (16th century A.D.), and there does not appear to be much originality in dealing with the disease.

Treatment of leprosy has been prescribed by the application of various herbal oils in Indian Ayurvedic medicine. Chaulmoogra oil (*Hydnocarpus*) and the purified esters of this oil were commonly used for hundreds of years until the mid 1940s, although their efficacy in the treatment of this disease has never been established. Modern therapy involves treatment by sulfone drugs and further breakthroughs have been made in the treatment of leprosy, which no longer remains an incurable disease if properly attended to in its initial stages.

—N. Rastogi, M.Sc., D.Sc.

*Research Scientist
Leprosy Sub-unit
Service de la Tuberculose
et dans Mycobacteries
Institut Pasteur
25 Rue du Dr. Roux
75015 Paris, France*

—R. C. Rastogi, M.A.

*Joint Secretary
Uttar Pradesh State Government
Lucknow, India*

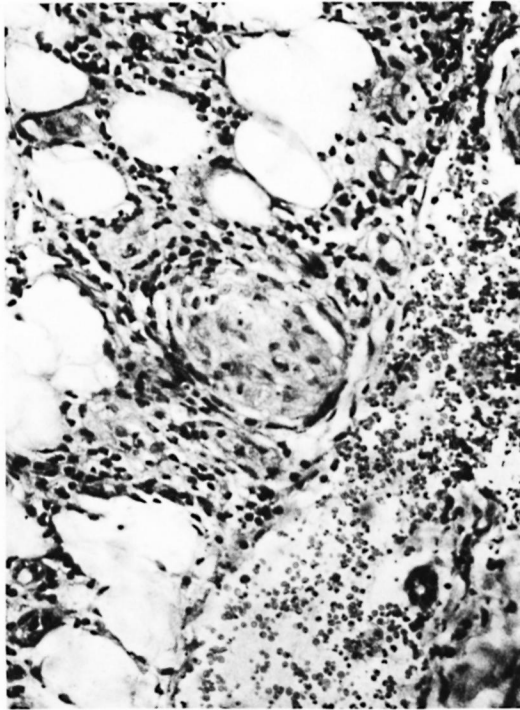
ENL in Histoid Leprosy

TO THE EDITOR:

Your attention is drawn to the occurrence of erythema nodosum leprosum (ENL) in histoid leprosy which has hardly been documented thus far in the literature. We recently had an established case of histoid leprosy⁽³⁾ on multiple drug therapy, comprising 100 mg each of dapsone and clofazimine and 600 mg of rifampin daily. In the course of treatment, the patient developed mildly erythematous, deep-seated mobile and tender nodules of the size of an almond located

over the extensor aspects of the extremities. They were associated with constitutional symptoms, namely, low-grade irregular fever with diurnal variation and fleeting joint pains.

Hematoxylin-eosin (H&E) stained sections from an ENL nodule revealed an intense infiltrate of polymorphonuclear leukocytes surrounding and/or infiltrating the blood vessels of the subcutaneous tissue. The blood vessel changes were, however, cardinal and consisted of marked edema and



THE FIGURE. Intense polymorphonuclear infiltrate in and around the subcutis blood vessels (H&E $\times 400$).

swelling of the endothelial lining (The Figure). An extravasation of red blood cells (RBC) was also seen. Marked edema of the dermis with disruption of collagen fibers was another feature.

Both the early and late lepromin (lepromin A, armadillo derived, containing 40 million bacilli per ml) reactions read after 48 hours and four weeks, respectively, were negative. Total T and B lymphocytes were 69% ($1219.9/\text{mm}^3$) and 20% ($353.6/\text{mm}^3$), respectively. The total leukocyte count was $6800/\text{mm}^3$; while the differential leukocyte count was: polymorphs, 70; lymphocytes,

26; eosinophils, 2, and monocytes, 22. The immunoglobulins estimated were IgG (2042 mg/dl), IgA (321 mg/dl), IgM (237 mg/dl), and the C3 level was 50 mg/dl in the serum. Circulating immune complexes (¹) were present in the serum and had a fairly high total protein concentration (5.007 mg/dl). Cryoglobulins were also found.

The importance of the infrequent occurrence of ENL in histoid leprosy may lend support to our observations (²) that histoid is a relatively stable component of multi-bacillary leprosy.

—V. N. Sehgal, M.D., M.A.M.S.

Professor and Head

—G. Srivastava, M.B.B.S.

—R. K. Gautam, M.B.B.S.

Junior Residents

—R. V. Koranne, M.D., D.V.D.

Assistant Professor

*Department of Dermatology
and Venereology*

Maulana Azad Medical College

and Associated LNJP and

GB Pant Hospitals

New Delhi, India

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