

## REFERENCES

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## Homage to José Maria Fernández, M.D.

TO THE EDITOR:

José Maria Fernández was a distinguished Professor of Dermatology at Rosario State University Medical Center in Rosario, Argentina. Some time ago, at a memorial service in commemoration of the 30th anniversary of his passing, a commitment was made to publish his contributions to the progress of dermato-leprology. A brief summary of his work follows.

After receiving his M.D. degree, he was appointed to the Health Control Department of Prostitution in the city of Rosario, the second largest city in the country, and the most important port city in the Province of Santa Fe, Argentina. Deeply committed to his job, it did not take him long to become aware of the health risk his patients were running in those days (1929) when infection from venereal diseases, such as syphilis, gonorrhoea, etc., was rampant. At the same time he soon realized how humiliating prostitution was. Thanks to his awareness of the problem and despite widespread racketeering, the local health authorities took the matter seriously and banned prostitution altogether. Shortly after this law passed in Rosario, a similar one was enacted nationwide. It was only after a fierce struggle against not only economic but also political interests that the aim was finally attained. Thanks to this, Argentina can take pride in having abolished prostitution.

Professor Fernández, together with Professor Salomon Schujman, was soon transferred to Carrasco Hospital in Rosario for the care of leprosy patients. Even though they were fully devoted to their jobs, frustration soon built up in young Fernández due to the limited and inefficient medica-

tion available at the time. In view of this, he devoted himself to the continuing search for ways to prevent leprosy.

He conducted a survey to find out about the different kinds of leprosy, the healthy population and the number of contacts and noncontacts. While researching this field, he observed the 48-hour reaction to the intradermal lepromin injection which he named the "early reaction" and which has since become most valuable for leprologists. This is a highly specific reaction, and a positive test denotes contact with the Hansen's bacillus and a capability to mount a defense against the organism. Consequently, it is more specific than the Mitsuda reaction which tests positive in healthy people with the immunological capacity to react, but who may have never actually been exposed to the bacillus.

In fact, whenever a person shows an injury-free skin anesthetic zone, an incomplete histamine reaction as well as an early positive lepromin test, there are no doubts about contact with the Hansen's bacillus. On the other hand, if the early reaction tests negative and the Mitsuda positive, the person has not been in contact with the Hansen's bacillus or, in other words, the anesthesia is not due to leprosy.

In case both the Fernández and the Mitsuda reactions prove negative, the patients should be carefully checked. To a certain extent, this is a reaction with diagnostic value and, as such, an outstanding contribution to leprology.

While carrying out in-depth research in this field, Professor Fernández observed different responses to BCG in leprosy pa-

tients and in contacts. It was only after extensive testing with both groups of patients as well as with healthy people that he succeeded in demonstrating the protective effect of BCG against leprosy. Therefore, it seems incomprehensible to us that in certain scientific publications, some authors fail to acknowledge that it was Professor Fernández who first succeeded in demonstrating its usefulness. This is even more incomprehensible nowadays when thorough scientific research has proved him correct.

Professor Fernández pursued further research into leprosy immunology. At the 8th International Congress of Leprology, held in Rio de Janeiro (Brazil) in September 1963, he presented jointly with one of the authors of this summary a paper in this

field. Even though the word "immunity" was not mentioned, this was purposefully done to avoid restricting the terms "resistance" and "aggression" which are mentioned in it. Attached to the above-mentioned paper there was a graph showing the precise location of different clinical forms, both in the quiescent state as well as in the acute episodes. His thinking made major contributions to our present-day concepts of leprosy immunology.

In leprology, Fernández established: 1) The value of the early lepromin reaction (48-hours) which is of remarkable importance in the field. 2) The effectiveness of BCG in leprosy prophylaxis. 3) The classification of the different clinical forms of leprosy according to immunity.

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