

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.

Comments on Leprosy at Age 141

TO THE EDITOR:

The report of a 141-year-old man affected with leprosy (Int. J. Lepr. 1999, 67, 471–473) should draw the attention of all concerned with the disease and its victims. In their zeal to describe this exceptional case and the way it was dealt with, the authors no doubt did not realize the ethical issues they were raising.

What is the purpose of cutting pieces of skin and earlobes from a 141-year-old person, performing biopsies, or drawing blood for hematological and biochemical investigations? To confirm the diagnosis? What is the justification for treating this patient with multidrug therapy (MDT) (even the WHO-recommended schedule of MDT, thank you)? To improve his quality of life perhaps? Or to reduce the risk of infecting his contacts? Or to achieve cure after the prescribed 1-year course of therapy (he expired within 2 weeks).

Laying aside pure experimentation, was this routine management of a most unusual

case the effect of some unreasoned eagerness to exterminate leprosy wherever, whenever, however, and at any cost, human or otherwise? Was it possibly the result of the blind application of some bureaucratic norms?

For centuries, often with the best intentions toward their own good or to protect the community, “lepers” were chased and isolated. They were humiliated and persecuted. They were made to suffer more from their fellow human beings than just from the disease; husbands and wives separated, children removed to die in orphan homes.

True, that was in the past. Today we know better. But do we know better? Modern technology brings with it its own perversions. In their candid report, the authors give an example of temptations that should be seriously pondered.

—Michel F. Lechat, M.D., D.P.H.

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Drs. Agrawal, *et al.* Reply

TO THE EDITOR:

In response to the issues raised by Dr. Michel F. Lechat, we would like to say that we have reported this case because of the patient's advanced age, and also to highlight the possibility of a long incubation period of leprosy. The skin biopsy was done to confirm the diagnosis before starting

treatment in this age group. A slit-skin smear was done to ascertain the bacterial index, which is also important for treatment. Hematological and biochemical tests were done to obtain the renal and hepatic functional status which has bearing on the metabolism and excretion of drugs used to treat leprosy. Punch biopsy, slit-skin smear and venipuncture for blood samples for rou-