

## PANETH ON INAPPARENT LEPROSY INFECTION

Many years ago it was understood that Paneth, when working in Java, promulgated the idea that leprosy infection was in fact very prevalent—i. e., that it is highly contagious—but that only a small proportion of those affected ever showed clinical manifestations. In the years since then that idea has been heard of occasionally from various sources, and Dr. P. H. J. Lampe, in Holland, was recently asked to look up just what Paneth had to say about the matter.

TO THE EDITOR:

As requested, I have looked up the article of O. Paneth on Tuberculosis in the Karo Districts, which appeared in the *Mededelingen Dienst Volksgezondheit Nederlandsch Indië* 17 (1928) 653-648, to see how the idea originated that he believed inapparent leprosy infection to be very

widespread. He had obtained positive Mantoux tuberculin reactions in 30 per cent of children under 15, and 74 per cent of adults. Speculating on the cause of these results, he said that there is no other explanation of tuberculin sensitivity than tuberculosis infection, except perhaps leprosy infection; but, since the prevalence of that disease in the Karo region was only 0.5-1.5 per cent, false positive tuberculin reactions due to *clinical* leprosy could be of much importance. He then went on to say:

However, there is another possibility. It is by no means improbable that, in an endemic region, large numbers of people harbor leprosy bacilli without ever showing clinical symptoms. These unknown carriers, although free from tuberculosis infection, might react to tuberculin.

I tried to approach this problem in an indirect way. Suppose latent leprosy causes sensitivity to tuberculin. If so, then manifest leprosy would do the same, and even more so. Accordingly, leprosy *cases* should show a higher percentage of positive tuberculin reactions than nonleprosy cases in the same population group.

The investigation, however, showed rather the opposite. Therefore, I do not believe that leprosy infection makes a person sensitive to tuberculin.

From this it is evident that the idea of widespread but inapparent leprosy infection was merely a conjecture, entertained as a hypothesis for the possible explanation of the high frequency of positive tuberculin reactions among the people he was working with, and by no means an opinion or conclusion. Since his attempt to investigate the point led to the conclusion that overt cases of leprosy were less, rather than more, frequently positive to tuberculin than nonleprosy people, it follows that the hypothesis which he had entertained was without support. In other words, Paneth did not hold the opinion with which he has been credited.

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