other hand, progressive development in Type T cases does exist, in time effecting the general state.

Basombrio mentioned children reported by Dr. Lauro de Souza Lima who had been lepromin positive and had nevertheless developed lepromatous leprosy. Similar cases have been described by Martinez Dominguez.

Director, Clinic of Dermatology
University of Madrid

J. Gay Prieto

TO THE EDITOR:

The following opinions are offered in response to the question raised by Dr. Basombrio.

1. Sensitivity to lepromin due to the impregnation of the organism with the Hansen bacillus is regarded, with reason, as an index of a state of relative immunity against leprosy, which is reflected by the resistance of the tissues to the bacillary invasion.

Hence, a large proportion of individuals with benign leprosy react to lepromin, and the disease never evolves to the malign form as long as the patient remains sensitive to that antigen. However, this allergy to lepromin is not immutable. Leprologists who have had the opportunity of following cases for many years have seen, especially before the sulfone era, that this allergy may not only diminish in intensity but may even disappear completely. One cannot, then, in every allergic person, regard sensitivity to lepromin as a definitive test of relative immunity. It cannot be said, however, that the lepromin test has no value in the epidemiology of leprosy, since the great majority of individuals maintain their lepromin sensitivity for many years, and probably even for life.

2. According to my experience, untreated lepromatous patients are and remain negative to lepromin. Indeed, it may even be asked if the rare so-called lepromatous patients in whom sensitivity to lepromin appears during or after sulfone treatment were not in reality borderline patients.

3. I have observed in Indochina, during the chaulmoogra days, at least 20 cases (about 3%) of the indeterminate or tuberculoid forms which at the beginning were positive to lepromin, even strongly so, which became anergic and transformed to lepromatous. I also had the opportunity, in 1956 and 1957, to observe many such cases at the Rovisco Pais Hospital Colony, in Portugal.

R. Chaussinand

SR. MARIE-SUZANNE'S LAST REPORT

TO THE EDITOR:

Another year has been spent on our studies which are always progressing, thanks to the aid of all our friends, of whom you are one.

The Letter of Information is going farther and farther into new regions, and everybody appreciates it.
We also have good reports on our Marianum antigen, and we are preparing them for the New Delhi Congress in 1958, which, I believe, will be very interesting.

We have been able to give help to visitors who come to our small laboratory to be informed before departing for their missions in their own leprosaria, in order to be able to work effectively.

Four scientific reports on our researches have been published during this year, and others are still in preparation.

Professor Penso has finished the French translation of the book on the Marianum bacillus. It will be printed when the English version is ready, but that will not be very soon.

All this will give you an idea of the activity of our work, and we hope that the year 1958 will bring full development in attaining this aim. Permit me, Doctor, to wish you a Merry Christmas and a Happy New Year of 1958, and success in all your endeavors.

Laboratoire de Recherches sur la Lèpre
Lyon, France
(October 23, 1957)

A card which accompanied the foregoing communication, which bears all the earmarks of a circular letter, gives the following four titles, without references:

- Vaccination anti-lépreuse, by Sr. Marie-Suzanne.
- De l'influence de l'injection d'une suspension de Mycobacterium marianum autoclave sur l'évolution de la lèpre murine; étude histologique, by R. Noël and Sr. Marie-Suzanne.

—EDITOR.