

BOOK REVIEW

ATLAS DE LEPROLOGIA. By O. Diniz, J. Mariano, and F. E. Rabello, Director of the National Leprosy Service, Chief of the Department of Leprosy of the State of Minas Gerais, and Professor of Dermatology, University of Brazil, respectively. Rio de Janeiro, National Service of Health Education, 1960; paper and cloth (not paginated).

This atlas, a collection of clinical photographs without text designed to complement the manual recently published by the National Leprosy Service, is bilingual with respect to its preface and the legends of plates, the translation to English done by Dr. Avelino M. Alonso. It is large in over-all size, 7" x 10½", and many of the pictures have been enlarged to as much as 7" x 9¾". Unpaginated, the pages by count number 150, and the figures number 109—several such numbers covering 2 or 3 pictures. On the back of the paper-covered edition is the legend, "Distribuição gratuita."

The list of topics is given as follows: 1. Fundamentals of leprosy doctrine: the leprosy bacillus (2 figs.); immunology (6 figs.); pathology (8 figs); the polar types (3 figs., 5 pictures). 2. General symptomatology; neural syndrome (15 figs., 17 pictures). 4. The lepromatous type (22 figs., 25 pictures). 5. The tuberculoid type (7 figs.). 6. The reactional forms (15 figs.). 7. The indeterminate group (5 figs., 6 pictures). 8. The borderline group (10 figs., 11 pictures). 9. Leprosy under treatment (4 figs.). This arrangement does not lead systematically from the lesser to the more severe forms of the disease, and the lack of an index is felt.

It is explained that "A great deal of what is presented in the Atlas about the lepromatous aspects will, in the very near future, belong to the past," and hence care was taken to document for posterity the typical forms of the disease. In that endeavor there is stress on the more advanced forms, especially leonine facies, and also on mutilations and trophic ulcers. It is noted that in four of the pictures of lepromatous leprosy (Figs. 25, 29, 50 and 54) the lesions in the gross appear definitely to be of the variety which

the reviewer has called "histoid"—that name being used because of the peculiar cytology of the lesions—and another four (Figs. 17, 58, 59 and 60) may be of that nature.

The many pictures of tuberculoid leprosy, quiescent and reactional, show a wide range of conditions, some of them interestingly peculiar. Curiously, nowhere is mention made of the usual division into minor and major forms, although there are some good illustrations of the latter. One of them (Fig. 20) is presented as reactional, which it probably was originally; but another so presented (Fig. 89) shows no evidence of reaction. Of two cases with extensive lesion areas over buttocks and thighs (Figs. 70 and 73) the active marginal zone of the former is thick and broad (major), while that of the latter is thin and narrow (minor). Nor is there mention of immune areas, although some good examples are to be seen (especially Fig. 81). However, in two pictures of borderline cases mention is made of "reserved [areas] of clean skin" (*reservas de pele limpa*). No "mother lesion" is exhibited in any of the reactional tuberculoid cases—which, of course, may not have had any, but such areas are interesting features where present.

The several borderline (*limitrofe*) cases pictured—mostly ascribed to a study by Alonso and Azulay—are evidently of that nature, but one not so labelled (Fig. 23) should probably have been included.

No such collection of large-scale photographs has been seen before. It will interest any leprologist, and should be widely distributed. The owners may be led each to prepare his own index. There is no indication whether, to obtain a copy—for which no charge is made—one should address the senior author (Dr. Orestes Diniz, at Rua Antonio Aleixo 619, Belo Horizonte, Minas Gerais) or the Serviço Nacional de Educação Sanitária, at Rua Coelho e Castro 6, Rio de Janeiro.—H. W. W.