MULTIPLICATION OF Mycobacterium leprae IN THE MOUSE FOOTPAD

To the Editor:

The purpose of my paper, which had been accepted for publication in The Journal more than a month prior to the Congress, was to communicate the nature and results of my attempts at Carville to obtain multiplication of the leprosy bacillus in footpads under conditions which explicitly differed from the conditions so clearly stated by Shepard. Therefore, this was not an attempt to duplicate Shepard’s experiments for the purpose of corroboration. Had it been that, I would have to fully agree with the criticism of Drs. Rees and Waters. The strategy of research, however, allows for flexibility of attack and it is perhaps not entirely true that experimenters always are committed to adhere to every detail of preceding work, particularly if they are willing to seek explanations for different results in deficiencies of their own experiments. This I have done. Deviations from the straight and narrow certainly are not unique and at times they seem productive of salutary results, as in the experiments of Waters and Niven.

I fully agree with Drs. Rees and Waters that it would be most unfortunate if readers of The Journal concluded from my paper that Hansen’s bacillus does not multiply in the mouse footpad. If they do, this must be at their own peril, because there is not a word in this article which casts doubt on the validity of Shepard’s work, and the footnote lists independent sources of confirmation, to which I can add now the results of our more recent experiments.

I also agree with what Drs. Rees and Waters say about the significance of Shepard’s work and all acclaim it has brought him.

U. S. P. H. S. Hospital

Carville, Louisiana

December 1964

TREATMENT OF LEPROSY WITH ANTITHYROID DRUGS

To the Editor:

This is in further consideration of the treatment of leprosy with antithyroid substances, with particular reference to the use of Tapazole, on which I reported some time ago (1). At that time I wrote “Extensive use of various antithyroid preparations during nearly eight years, in a total of 236 leprosy cases, may open a new road for the treatment of that disease.” Representative cases treated with different doses of the thyroid-depressant drug Tapazole (methimazole), in which notable improvement occurred, were presented.

Recently Davidson (2) after a pilot study of the effect of Tapazole in three groups of 20 lepromatous patients, reported that the drug had not proved of special benefit. I would like to raise certain objections to the conclusion presented: (1) Tapazole was suspended for two months during a total of 14 months of treatment; (2) too small a dose