

## A MINOR ACCIDENT

To the EDITOR:

Today I gave myself a slight prick on the thumb with a needle I was using to test a leper for pain sensation. I had a piece of the skin the size of a large button-hole removed forty-five minutes after the accident. I do not feel that my risk is serious, but I would like to have advice as to whether I should go on to take a prophylactic course of hydnocarpus oil or esters. I have started with an injection of 2 cc. hydnocecol just above the wrist on the radial side. I would be glad of your opinion, or that of anyone whom you may care to consult. I would prefer not to have my name mentioned.

(M. D.)

*From Dr. James L. Maxwell, Shanghai:*

I would advise this patient that I should think the risk almost nil, even if the skin excision had not been done. As for the advisability of prophylactic injections of chaulmoogra oil or its derivatives I should say, in view of the experience of Rodriguez, that such injections would be quite useless.

*From Dr. C. B. Lara, Cullion, P. I.:*

I believe the inquirer is quite justified in his appreciation of the accident; whether he can be further reassured that the risk of his acquiring the infection is practically if not absolutely negligible would entirely depend on his personal attitude. It may be pointed out that persons having to do with the care of lepers are more or less constantly exposed to the infection and not occasionally as in an accident similar to that mentioned in the query. Personally, I don't think that prophylactic treatment is needed. If it will help to allay apprehension it may be tried, but to expect the greatest benefit out of it the injection (of a "chaulmoogra" preparation) should be made into and at least one-half inch around the site of accidental puncture, thoroughly infiltrating the tissues. One treatment should be sufficient. To diminish the pain after the injection 2 per cent benzocaine may be added to the drug.

*From Dr. Jose Rodriguez, Cebu, P. I.:*

Commenting on the query from the leprosy worker who pricked his thumb with a needle which was being used on a leper to test for pain sensation, I believe that the measures he had taken were perhaps the best under the circumstances. Such accidents are almost unavoidable in the course of years when one is taking care of lepers, and perhaps many of us have had similar accidents repeatedly in connection with our work. I do not believe that prophylactic treatment with hydnocarpus oil will do any good but I would not discontinue the injections if the colleague feels any happier with them. Perhaps a more reliable prophylactic measure would be to keep regular health habits, particularly as regards exercise, which most of us are inclined to neglect.