

To the EDITOR:

Replying to your inquiry regarding our experience as to the influence of malaria on leprosy, I may make the following comments:

The immediate effect of malaria upon leprosy was to produce "lepra reaction" of varying severity in possibly 30 or 40 per cent of the cases. The reaction occurred commonly within about a week of the onset of malaria, and subsided when it did.

Regarding the ultimate effect upon the leprous condition I can say very little. I have observed no cases either of marked improvement or of marked increase of the symptoms of leprosy. In a few of the nerve cases there was leprous neuritis aggravated by the lepra reaction, with a tendency to increase of the trophic lesions. In cutaneous cases this was not so marked, and the reaction produced no permanent increase in the signs of the disease. Whether such cases with prolonged fever would show improvement I am unable to say, but in most of my patients the malarial fever lasted only a few days.

Some years ago Muir, encouraged by the apparent improvement

in leprosy cases suffering from fever due to kala-azar, did some experiments in induction of kala-azar for the treatment of leprosy. The ultimate result of the experiment was negative, and he concluded that no permanent benefit was derived in most cases from that procedure. Muir attributes the apparent diminution of the leprous lesions, which is sometimes seen when a leprous patient suffers from some secondary febrile condition, to the temporary diminution of the powers of the tissues to respond to the bacilli present in them, with a consequent flattening out of the lesions. He believes that this is not due to any diminution of the leprous infection, and that when the secondary fever subsides the powers of tissue response return and the lesions become as marked as they were before, or more so. My own observations have tended to confirm Muir's opinion in this matter, and I think that we have to be careful to avoid interpreting the diminution in the leprous infection. The only evidence of diminution of infection is the diminution in the number of bacilli present, and we have failed to demonstrate this in many cases in which the lesions have become much diminished as a result of some febrile condition.

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