# An Unusual Location of Leproma of Bone; A Case Report[1]

J. G. Andersen and J. Warndorff[2]

An 18-year-old girl presented herself at the All-Africa Leprosy and Rehabilitation Training Centre, Addis Ababa, Ethiopia, because of skin eruptions of one year's duration. Physical findings revealed the face, chest, back, and the greater parts of the limbs to be covered with small, slightly hypopigmented macules and numerous small nodules, all in an asymmetrical distribution. All palpable peripheral nerves were enlarged, particularly both ulnar and radial cutaneous nerves, but not tender. No neurological deficit was found. The distal end of the left ulna presented a fusiform, hard, indolent tumor, apparently in connection with bone.

Laboratory examination revealed highly positive (BI 3–6+ on the Ridley scale) slit skin smears from six sites with 2%–5% solidly staining bacilli. Radiological examination showed a well-localized, multilocular tumor of the distal end of the metaphysis of the left ulna, probably with perforation through cortical bone (The Figure).

Clinical diagnoses were borderline-lepromatous leprosy and a bone tumor of the left ulna, probably an osteoclastoma. The patient was started on treatment with rifampin, 600 mg daily, and dapsone (DDS), 100 mg daily. Surgical exploration of the tumor

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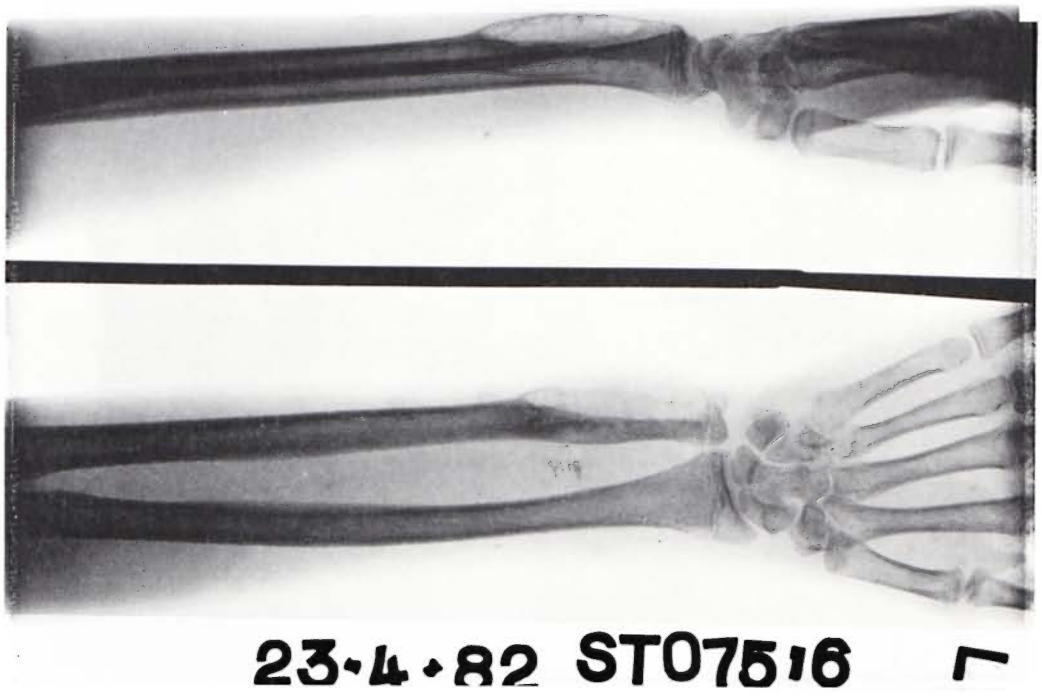
[2] J. G. Andersen, Chief of Surgery and Rehabilitation; J. Warndorff, Director of Training, All Africa Leprosy and Rehabilitation Training Centre, P.O. Box 165, Addis Ababa, Ethiopia.




THE FIGURE. X-rays of the left forearm and proximal hand.

revealed several perforations of the cortex. Through these perforations, greyish, very friable masses with no distinctive features had pushed out from an intraosseous tumor. There were no signs of infiltration into the surrounding soft tissue. The thin cortical shell was incised, and a large mass of amorphous tissue was excochleated down to firm bone. Histological examination of the removed tissue showed a hyperactive leproma with very many large and dense globi and with very many plasma cells. The patient's postoperative course was uneventful. Healing was by primary intention.

Until now, lepromata of bone have been described from cancellous bone, characterized by a rich blood supply (bone marrow, phalanges of fingers, nasal, and premaxillary bones). The present case is, to the best of our knowledge, the first description of a leproma in cortical bone.

## SUMMARY

A hyperactive leproma, stimulating osteoclastoma, was excised from the distal metaphysis of the left ulna in an 18-year-old girl with borderline-lepromatous leprosy of short duration.

## RESUMEN

Se extirpó un leproma que simulaba un osteoclastoma, de la metafisis distal del hueso ulnar de una paciente de 18 años de edad con lepra lepromatosa intermedia (BL) de corta duración.

## RÉSUMÉ

On a procédé à l'excision d'un léprome hyper reactive, simulant un ostéoclastome, au niveau de la métaphyse distale du cubitus gauche chez une jeune fille âgée de 18 ans, qui souffrait de lèpre dimorphe-lépromateuse depuis peu de temps.

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