

Dr. Ebenezer Replies

TO THE EDITOR:

Professor Richard I. Frankel's comments on our paper entitled "Multibacillary nerve histology in clinically diagnosed borderline tuberculoid leprosy patients," which appeared in the September 1996 issue of the INTERNATIONAL JOURNAL OF LEPROSY, has given us an opportunity to restate our opinion.

All patients in our study had either five skin lesions or less. Only borderline tuberculoid patients who had an obvious cutaneous nerve enlargement were selected, and none had any nerve trunk enlargement. Inadvertently, this information was not presented in our manuscript. Out of the 21 patients selected, 1 was skin-smear positive for acid-fast bacilli (AFB) and skin biopsies from 2 and nerve biopsies from 10 showed AFB with borderline lepromatous histology.

In practice, most programs use clinical criteria for classifying and deciding the ap-

propriate treatment regimen for individual patients, particularly in view of the non-availability or non-dependability of skin-smear services (1). Therefore, irrespective of the skin smear, clinically grouping such patients as paucibacillary may inappropriately include a significant number of patients having multibacillary leprosy.

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REFERENCES

1. World Health Organization. A guide to eliminating leprosy as a public health problem. 1st edn. Geneva: World Health Organization, 1995, p. 20. WHO/LEP/95.1.