

REENSTIERNA'S ANTILEPROSY SERUM

1789

To the EDITOR:

In the several years during which I have been working on my antileprosy serum the reports on the subject which have appeared in medical journals have on several occasions, though without my consent, been published in current newspapers. Those newspaper reports, some of which have been noted in *THE JOURNAL*, have not always been wholly accurate or properly conservative, and I wish to have the matter placed in the correct light. Having recently returned from a long stay in South America, where the last tests of my serum were carried out, I have prepared a detailed report on the matter for the Swedish Government. That report will appear this year as a supplement of *Acta Medica Scandinavica*, but in order that it may be more directly available to leprosy workers I have prepared a résumé of it for publication in *THE JOURNAL*.

The serum has now been tested in more than two hundred cases, especially of the anesthetic form, by some twenty-five doctors—not all of whom can have been mistaken. On the whole they have obtained similar results in different leprosy manifestations. These results are healing of cutaneous ulcers and improvement of severe lesions of the nasal mucosa; return of lost sensibility; improvement or disappearance of paralysis of the eyelids and of the fingers; subsidence of lepra fever, etc.

As these improvements, although probably only of a temporary nature, have occurred—and they occurred rapidly in several cases in which long periods of chaulmoogra treatment had brought about only very slight improvement or none at all—I feel entitled to assume that serum injections, suitably administered, may be a good auxiliary to the standard chaulmoogra treatment. That is all that I hoped for from my serum, as I stated in my first article which was presented by Nicolle in 1933 to the French Academy of Science. Naturally it is highly improbable that anybody will be able to *cure*, by serum treatment alone, such a chronic disease as leprosy.

Interest in treatment with antileprosy serum has become very great in the last year. I may say that it is too great, as there is a possibility that persons who have not the requisite competency and experience will attempt to make it, and even that commercial preparations below the scientific standard may be put on the market. It seems to me that the most suitable thing to

do would be to put the preparation of this serum—and such preparation is now inevitable—into the hands of a few experienced bacteriologists who are interested in leprosy but have no commercial interests, who would prepare it without profit, thus making a high-class product available at cost price to all those who desire it. This could be done under the supervision of the International Leprosy Association or some group of its members, especially since the aim of the Association is to support just such advances in leprosy.

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