better results in the form of a quicker recovery, a lower relapse rate, fewer side effects or a shorter duration of treatment is welcome. The patient should be the ultimate beneficiary.

J. S. Pasricha
Former Professor and Head, Department of Dermatology and Venereology, AIIMS, New Delhi – 110029 India.

Address for correspondence: Dr. J. S. Pasricha, Skin Diseases Centre, 1-A, Masjid Moth, DDA Flats, Phase-I, Outer Ring Road, Near Chirag Delhi Flyover, New Delhi - 110048. E-mail: j_s_pasricha@hotmail.com

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Rheumatological manifestations of leprosy

Sir,
I read with interest the recent article by Vengadakrishnan et al. They have reported a high occurrence of arthritis in patients with leprosy. However, I would like to make certain observations.

Leprous neuritis leads to a damage of the sensory nerves supplying joints. Therefore, neuropathic (Charcot's) arthropathy involving the weight-bearing joints, such as those of the feet, occurs in more than 10% of patients with leprosy. Involvement of non-weight bearing joints, such as the wrist, has also been reported. Patients may fail to note the development of neuropathic arthropathy due to the absence of pain. This fact was highlighted by a study which found that MRI studies detected significant changes in the feet in all asymptomatic patients with leprosy. Vengadakrishnan et al have not presented data on this aspect in their study.

Another point worth noting while studying the association of leprosy and rheumatoid arthritis (RA) is the efficacy of dapsone in ameliorating the symptoms of RA as effectively as chloroquine and hydroxychloroquine. The mode of its anti-inflammatory action in RA is not clearly understood, but modulation of neutrophil activity or inhibition of neutrophil inflammatory product formation or release appear to play a role.

Kumar Sudhir
Department of Neurological Sciences, Christian Medical College, Vellore, Tamilnadu, India.

Address for correspondence: Dr. Sudhir Kumar, E-mail: drsudhirkumar@yahoo.com

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