

CORRESPONDENCE

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To
The Editor,
Indian Journal of Dermatology and Venereology,
Bombay.

Dear Sir,

I shall deem it a privilege if you kindly publish the following in your esteemed columns :

It is interesting to go through the paper 'Study of Serum Copper levels in patients with pigmentary disorders' by Drs. K. C. Kandhari and C. Sobhandri in which they have attempted to duplicate the work done and published by Drs. Behl, Agarwal and Gurdas Singh. In this connection, I wish to make the following comments.

1. In our series, patients of vitiligo had extensive and progressive disease. Progressive, implies that the new patches of vitiligo were developing at a moderately good pace at the time of copper estimation.

2. Kandhari and Sobhandri have admitted in their findings that *there was variation* (Table 4) in serum copper levels between normal individuals and patients with vitiligo to an extent of over 6 p. c. but it was not significant statistically. I feel that if they would have selected only those cases who had extensive and progressive vitiligo, their findings would have shown bigger and more significant variations.

3. Duplication of the work in the same town has one disadvantage i. e. patients treated in other hospitals with copper or multivitamins containing copper and other copper containing drugs and particularly haematinic preparations happen to be picked up resulting in erroneous findings and hence wrong conclusions. I may further submit that thousands of vitiligo patients in Delhi have been given Copper preparations by us since 1956 when the work was first initiated.

4. *Beneficial results.* Behl et al have been incompletely quoted to give false impression. In about 90 p. c. of cases of active progressive vitiligo, progress of the disease was controlled and over 60 p. c. started pigmentation on copper therapy alone. Progress of the disease was watched at least for a year and compared with controls who were given placebo. Results were very impressive and statistically significant.

5. Original work done by Behl, Aggarwal and Gurdas Singh has been duplicated by Behl, Sareen and Gurdas Singh and Behl and Gurdas Singh and M. M. Singh confirming the original findings in over a 100 patients. Further copper estimation in skin and C. S. F. by Behl, Aggarwal and Sareen and Gurdas Singh and studies with radio active copper by Behl and Col. Suryanarain (Under publication) have corroborated our findings.

Sd. Yours sincerely,
P. N. BEHL

All India Institute of Medical Science,
New Delhi,

To
The Editor,
Indian Journal of Dermatology and Venereology,

Dear Sir,

You had forwarded to me Dr. P. N. Behl's letter with his remarks on our paper titled "Study of serum copper levels in patients with pigmentary disorders." I have been in communication with Dr. Sobhanadri and our reply is appended below as a rejoinder to Dr. Behl's letter.

1. There has been no duplication of work as suggested by Dr. Behl because we have included not only cases of Vitiligo but also those of hyperpigmentation from various causes.
2. It is surprising how Dr. Behl assumed that our cases were not of extensive involvement. Most of our cases in order to get significant results were selected from those who had more than 40% of the skin involved. We also assured ourselves that these cases had not been previously treated and hence there is no scope for any erroneous finding or wrong conclusion.
3. As regard the beneficial results, Behl et al have themselves stated that the disease in most cases was arrested (by itself and erroneous judgement in self limiting and sometimes spontaneously curing disease). They claimed cure only in one case.

Yours sincerely,
Sd. K. C. KANDHARI
Prof. of Der. & Vene.
