## TRIAL WITH LEPSULMIN OINTMENT IN ULCERS OF LEPROSY

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The treatment of ulcers in leproay is difficult, prolonged and various applications and forms of treatment have been listed in the literature. The three major factors in the causation of ulcers, particularly planter ulcers in leprosy are sensory loss, motor loss, and vasomotor loss (4),

Various drugs have been used to cause vasodilation, for example injections of priscol, nicotinic acid, etc. have given good results in the healing of ulcers. (1, 5). Yet complete rest in bed and immobilisation in the plaster cast are well tried methods in dealing with plantar ulcers. However, these are not really very practical methods as these require long hospitalization. (4),

## Pharmacology of Lepsulmin:

Leaves, barks and roots of the tree-Moringa Pterygosperma-were used in Ayurveda for treating ulcers, inflammation, gout and leprosy. Mr. G. S, Chatterjee first isolated a compound of Phenyl methylamine from Moringa pterygos perma, which was his significant original work and on the basis of this, LEPSULMIN was invented by him. Lepsulmin is a combination of Phenylmethylamine-P-amino benzene sulphonate and Phenylmethylamine hydrochloride. Lepsulmin possesses parasympathomimetic effects (6). For this purpose the ointment was tried in the ulcers of leprosy patients to see the effects in the healing of the ulcers.

The composition of Lepsulmin Ointment.

Fhenylmethylamine-p-amino benzene sulphonate — 1.5% w/w.
Phenylmethylamine hydrochloride — 1.5% w/w.
In water miscible carbowax base — 10 (Males)

8 patients with bilateral planter ulcers (3) 1 patient with unilateral friction ulcer (3) 1 patient with bilaterial ulcers of forearms dur to breaking of the nodules.

Those who had bilateral ulcers, the leg with bigger ulcer was chosen for the lepsulmin ointment dressing and the ulcer of the other legacted as control and was dressad with mag. sulph. glycerine 50%.

The treatment was continued for a period of 2 weeks to 8 weeks. The ulcers were dressed daily. All cases were under dapson treatment during this period. Antibiotics were given in cases with septic ulcers.

The results of improvement were assessed on the following criteria:—

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(a) Reduction in the exudate and swelling (cessation of exudate (2). (b) Reduction of the slough and formation of granulation tissue (stage of epithelial cover (2). (c) Reduction in the size of the ulcer (state of consolidation (2). (d) Other effects if any.

## Results.

(1) Out of 4 patients under lepsulmin treatment, in one, there was complete healing and in 3 the healing was more marked; (2) In 4 patients, under lepsulmin treatment the ulcers became bad with more discharge as compared to the ulcers in the control group. (treated with mag. sulph. glycerine); (3) In the remaining 2 cases, the improvement in the ulcers was the same in both the groups; (4) In the ulcers under lepsulmin reduction of the slough and the formation of granulation tissue was more marked; (5) No side effects were seen.

Summary. Ten leprosy patients with ulcers were chosen for treatment with lepsulmin ointment. Eight patients with plantar ulcers in both feet, one with unilateral friction ulceration and one with bilateral small multiple ulcers on both the arms due to breaking of nodules. Within the limitations of the trial, lepsulmin treatment was found to help in the reduction of the slough and the formation of the granulation tissue in the ulcers better than in the ulcers in control group,  $\checkmark$ 

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