had been previously treated with podophyllin, entered the study. Of these, 35 showed complete regression; 12 had skin condylomata, nine mucosal, nine skin and mucosal, three perianal, and two anal. The six patients who showed no reaction whatsoever all had mucosal condylomata and no reaction whatsoever occurred in these patients following the application of the 5-fluorouracil cream. The condylomata were eradicated in three to seven days.

Erythema, blistering, and superficial ulceration occurred in four patients and were controlled with the local application of copper sulphate. Eleven patients complained of slight erythema and one of a stinging sensation.

It is therefore considered justifiable to use 5-fluorouracil cream in all patients with genital warts under careful medical supervision.

Yours faithfully,

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References


TO THE EDITOR, British Journal of Venereal Diseases

Campylobacter species in male homosexuals

Sir,

There is growing awareness of the importance of Campylobacter species in the aetiology of mild diarrhoea (British Medical Journal, 1978). This appeared relevant to us in view of the reports of a high incidence of enteric pathogens in homosexuals in the United States (Drusin et al., 1976; Meyers et al., 1977; Vaisrub, 1977).

Following the unexpected growth of Campylobacter species on a routine specimen for culture for Neisseria gonorrhoeae taken from a heterosexual man, who attended this department complaining of rectal bleeding, a prospective study of homosexual men was undertaken to see if there was any relation between Campylobacter species and anl intercourse.

Fifty consecutive male homosexuals from whom rectal specimens had been cultured for N. gonorrhoeae, were investigated. Routine charcoal swabs placed in Stuart's medium were plated on to Oxoid Base no. 2 containing 7% lysed horse blood, vancomycin 10 µg/mL, polymyxin B2.5 IU/mL, and trimethoprim 5 µg/mL (final concentrations). Plates were incubated at 40°C in an atmosphere of about 5% oxygen and 10% carbon dioxide in hydrogen in an anaerobic jar without catalyst. The plates were examined at 18 and 48 hours (Communicable Disease Surveillance Centre, unpublished report). Campylobacter species were not isolated from any rectal sample. It is concluded that Campylobacter species are uncommon organisms in male homosexuals attending this clinic.

Yours faithfully,

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References


TO THE EDITOR, British Journal of Venereal Diseases

Possible suppressor T lymphocyte activity in experimental syphilis

Sir,

In relation to the comments of Pavia et al. (1978) on the possible role of suppressor thymus-derived lymphocytes during syphilis, we would like to report the following experiment.

Inbred CBA mice were used and fed on autoclaved water and an antibiotic-free diet. Mice aged 6 weeks were infected intraperitoneally with 0.5 ml of a suspension of Treponema pallidum (Nichols strain) adjusted to 0.5 × 10⁶ spirochaetes. The preparation of the suspensions of T. pallidum, the method of tissue homogenisation, and the measurement of treponemal immunofluorescent antibodies have previously been described (Wright et al., 1974; Wright and Wharton, 1977).

In the first experiment 24 mice were infected and six were left uninoculated. In the second experiment 27 mice were infected, six were inoculated intraperitoneally with a heat-killed suspension of T. pallidum, and six were again left uninoculated. Cyclophosphamide (Wyeth Brothers, Maidenhead) 150 mg/kg was given intraperitoneally at weekly intervals from the end of the second week to the seventh week following infection. In the first experiment all but three infected mice were given cyclophosphamide and in the second all but six. In both experiments there was a group of six mice that received only cyclophosphamide. Plasma was examined from all the mice before inoculation and at weekly intervals from the third to the seventh week following inoculation. The livers, spleens, kidneys, and hearts were taken from three cyclophosphamide-treated animals at weekly intervals and homogenised. The supernatants were then examined for the presence of spirochaetes.

All plasma from the infected control mice gave an immunofluorescent titre of > 625 at the seventh week indicating that infection had taken place. No antibodies or spirochaetes were found in plasma from any other mice. No spirochaetes were seen in the supernates from homogenised tissues on darkground examination with the exception of three spirochaetes seen in the supernate of one liver homogenate taken on the third week from one of the mice in the first experiment.

The experiments indicate that cyclophosphamide does not enhance the multiplication of T. pallidum, and more surprisingly the infection is controlled in the absence of detectable antibody. It is relevant that in similar experiments in which some mice treated with one injection of cyclophosphamide 150 mg/kg and infected with Borrelia duttoni (STIB 503)
Correspondence

not only recovered from the infection in the absence of detectable antibody but the surface antigen changed in the first relapse (Wright and Frost, 1978). It is possible that the absence of borrelial, lytic, agglutinating, and spirochaetal fluorescent antibodies need not mean that all antibody is removed. Antibody which might induce or modulate the antigenic variation could still be present. It is conceivable that the production of hypothetical antigen-modulating-antibody might be enhanced by a deletion of T lymphocyte suppressor effect. Damage caused by cellular or humoral immune mechanisms would thereby be controlled and the microbial persistence ensured.

In unpublished experiments with Professor John Turk, cyclophosphamide 150 m/kg was given to rabbits 10 days before intravenous T. pallidum inoculation. In the cyclophosphamide-treated rabbits lesions on the shaved, dorsal rabbit skin were exacerbated and the subsequent specific antibody titres were raised in these animals. Since spirochaetes were found only in the lesions and not in the unaffected tissue, the implication again is that there was an inhibition of T lymphocyte suppressor response rather than an increased effector cell activity.

Yours faithfully,

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References


Notice

International Symposium on Sexually Transmitted Diseases

An international symposium will be held in conjunction with the first Pan American Congress of Andrology, 13–16 March 1979, in Caracas, Venezuela. The purpose is to initiate international co-operation and exchange of scientific information on current diagnosis and therapy of male diseases. Abstracts are accepted on urethral microbiology, gonococcal urethritis, aetiology and treatment of epididymitis, penile lesions, and genital herpesvirus; diagnostic tests for STD. Deadline: 1 December 1978. Programme director: F. N. Judson, M.D., Disease Control Service, 605 Bannock Street, Denver, Colorado 80204, USA (303) 893–7051.