

CORRESPONDENCE

Diethylcarbamazine citrate

To the Editor:

It was a pleasure to read the carefully made study of Drs. Marshall Benner and Francis C. Lowell, "The failure of diethylcarbamazine citrate (Hetrazan) in the treatment of asthma" (*J. ALLERG.* 46: 29, 1970).

Since the report I made in 1965 (Mallén, M.: Treatment of intractable asthma with diethylcarbamazine citrate, *Ann. Allerg.* 23: 534, 1965), I have had many failures also but still a few good results in very bad cases of asthma. The one that impressed me most was that of a patient with very severe asthma of the "intrinsic" type, associated with *Ascaris lumbricoides* parasitization and blood eosinophilia from 40 to 83 per cent. He was clinically cured after three days of therapy with Hetrazan.

Some favorable results have also been seen here by others,⁷ and so I believe that Hetrazan is not altogether valueless in the treatment of selected cases of asthma.

Two recent reports^{2, 3} on the prevalence of *Ascaris* infection in asthmatic persons in Canada and on the importance of *Ascaris* infection as a cause of asthma in India may perhaps explain the discordance between what we have seen here and what Drs. Benner and Lowell found.

I hope this letter will serve to somewhat clarify my position in relation to my former opinion on the use of Hetrazan in asthma.

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REFERENCES

- 1 Montes, J., and Melgar, F. E.: Report to the Sociedad Mexicana de Alergia e Inmunología, *Alergia Revista Latinoamericana de Alergología*. (Accepted for publication.)
- 2 Tullis, D. C. H.: Bronchial asthma associated with intestinal parasites, *New Eng. J. Med.* 282: 370, 1970.
- 3 Chacko, D. D.: Intestinal parasites and asthma, *New Eng. J. Med.* 283: 101, 1970. (Letter.)