Correspondence

Rapid diagnosis of dengue infection in acute phase

Sir,

The recent report on “Rapid diagnosis of dengue infection in acute phase” is very interesting. Ahmed and Broor\(^1\) noted that “NS1 antigen detection ELISA and real-time RT-PCR were found to be rapid, convenient and efficient tests for diagnosing dengue fever in acute phase”. In fact, there is no doubt that the new tool can help in rapid diagnosis of dengue, however, it is still questionable for its cost-effectiveness. In the endemic area of dengue, such as Southeast Asia, it’s diagnosis is usually presumptive, based on clinical features (acute febrile illness with thrombocytopenia, atypical lymphocytosis and hemoconcentration)\(^2\). To have a definitive diagnosis of dengue, might sometimes not necessary and it does not change the clinical management. The definitive diagnosis by specific laboratory test is rarely used and it is useful for only epidemiological record. The simple test such as tourniquet is reported to be a good diagnostic test and it is highly cost-effective\(^3\).

REFERENCES


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Author’s Reply

I agree with the views of Wiwanitkit et al. Etiological diagnosis of dengue for an individual case is not important during dengue season, and knowing the epidemiology of dengue in a region, clinicians can make clinical diagnosis and treat patients as per their signs and symptoms. Diagnosis of dengue is important for epidemiological purposes, however, the new assay like NS1 antigen and real time-PCR provide tools for rapid and early diagnosis.

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