

LETTER TO EDITOR (VIEWERS CHOICE)

REPLY - FLUID REPLACEMENT IN CHILDREN WITH DENGUE AND FACTORS ASSOCIATED WITH PULMONARY EDEMA: A LETTER TO EDITOR

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To

The Editor,

The points highlighted by Kumar et al are very valid and we appreciate their valuable inputs. The case definition of Dengue hemorrhagic fever (DHF) and Dengue Shock syndrome (DSS) were already referenced in the introduction as per the World Health Organization (WHO) guidelines. (1) We agree that inclusion of patients just based on dengue Elisa IgM test would miss out on patients who could still be having dengue but a negative IgM Elisa. However, the study was done in 2007 and at that time dengue NS1 antigen test was not available in Mumbai. Also we have already mentioned in the methods that the dengue IgM was done by capture Elisa method and not by the commercial rapid diagnostic tests (RDTs). Regarding the statistical analysis, it has indeed important implications in calculating p value as then a Mann Whitney U test should be run instead of Students t-test. However, on plotting histograms the data looks normal with mild skewness, so we did a student's t-test instead. Though platelet count of <1,00,000 cells/cumm is an essential criteria for diagnosis of DHF/DSS as per national guidelines (2), in the current study, the definition of DSS and DHF were based on WHO criteria (1) As per WHO typical cases of DHF are characterized by four major clinical manifestations: high fever, hemorrhagic phenomenon, hepatosplenomegaly and circulatory failure. Moderate to marked thrombocytopenia with concurrent hemoconcentration is a distinctive clinical laboratory finding of DHF. (3) We thus had patients with thrombocytopenia but not with platelet count

<1,00,000 cells/cumm who still had third spacing or circulatory failure and thus were included in the study. Patients with DHF were started on NS of 6ml/kg/hour initially as per the recommendations. There seems to be a typographical error in the manuscript regarding the fluid rate. Thank you for pointing out the same.

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