CORRESPONDENCE


Tuberculosis Infection in BCG Vaccinated Children

1. A good number of BCG vaccinated children do not develop a scar. In Kerala, BCG coverage is above 95%. But in the present study(1), only 59% of children have a BCG scar. This clearly shows that the BCG scar alone, to identify the vaccinated children, is an irrational and misleading criteria. This study ideally should have been conducted as a prospective study(2,3).

2. Tuberculin induration measured, should be interpreted without any prejudice, whether the children are vaccinated or not. But this study probably brings out that the interpretation of Tuberculin induration differentially in vaccinated and unvaccinated children is baseless.

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REFERENCES


Reply

1. We disagree. Studies have demonstrated >90% scar formation post-vaccination with BCG(1-5). These data indicate that a BCG scar is indeed a sensitive and reliable indicator of BCG vaccination. However, we do concur with Dr. Kartha that a prospective study could have had more validity but temporal and resource limitations ruled this out.

2. We do not deny that the use of a differential cut-off is unconventional. The multiple reasons for using this strategy have been described in detail in the article. Our hypothesis is that, despite tuberculin reactions appearing similar in both groups (as suggested by the data and pointed out by Dr. Kartha), vaccinated and unvaccinated children, ipso facto, have different risks of acquiring tuberculosis and developing disseminated disease that necessitates a different tuberculin cut-off reading for each group. It is an