Letter to the editor

Viroj Wiwanitkit

Comment on: Predictive factors for pneumonia in new pandemic H1N1 influenza

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Sir,

I read the recent publication on new H1N1 influenza infection and predictive factors for pneumonia with a great interest[1]. Lerma et al. concluded that "Obesity, delay in medical care and higher levels of C reactive protein and IgG[2] were predictive factors for pneumonia in adult patients with A (H1N1) influenza infection"[1]. Some points should be mentioned. The interpretation of the results from analysis of C reactive protein (CRP) and IgG[2] in this work has to be careful. Especially for CRP, it can be affected by many confounding factor and the quality control of the test is needed. However, in this report by Lerma et al, this point is not well clarified. Indeed, CRP is an important blood test that is likely to be seen in the cases with new H1N1 influenza[2]. Also, the trend of increased CRP level in the patients with new H1N1 influenza comparing to classical H1N1 influenza is reported[3].

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Predictive factors for pneumonia in new pandemic H1N1 influenza–author´s response

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Sir, we agree with Professor Viroj Wiwantiki that CRP can be affected by many confounding factors, but like in many other studies, in our series it has shown to be a predictive factor of poor prognosis in new H1N1 influenza[1,2]. The quality control of the test was made in our laboratory (Internal quality control: Sequence: second semester 2009. Control Liquichek Immunology Control Bio-Rad; Mean Value 0.755-2.437mg/dl, CV4.69-3.85%, IDS 1.01. External quality control: 100% of control assessment, 100% of acceptable control; monthly IDS between 0.08 and 1.78). In our study CPR figures showed a high standard deviation due to population dispersion, but this is common in similar series[3]. We used a control group of patients with H1N1 infection but without pneumonia in order to minimize the influence of this and other possible confounding factors.

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