

Correspondence

Bacille Calmette-Guerin immunotherapy of viral warts

To the editor

I read with interest the article by Sharquie et al¹ on Bacille Calmette-Guerin immunotherapy of viral warts. Their pioneer work is impressive in advocating a new modality of treatment of viral warts through 1-3 shoots of Bacille Calmette-Guerin vaccine at one month intervals. However, further evaluation through extensive experimental studies is still in need. The accurate diagnosis of latent tuberculosis is an important component of any tuberculosis control programme. Tuberculin skin testing (TST) is often included in the diagnostic algorithms for tuberculosis. Anecdotal studies have demonstrated that interpretation of TST reactivity is influenced by the confounding effect of previous BCG vaccination.²⁻⁵ Therefore, on final approval of Bacille Calmette-Guerin immunotherapy of viral warts, weighing the benefits versus risks must be exercised particularly in developing countries where tuberculosis is still a major health threat.

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Reply from the Author

I should be most grateful for Dr. Mendalawi for his interest in this paper and for his valuable comments. I would like to mention that I personally have used Bacille

Calmette-Guerin immunotherapy in the treatment of hundreds of patients with viral warts and alopecia areata in the last 25 years without doing tuberculin testing and no complications or adverse effects had been observed even in patients with past history of Bacille Calmette-Guerin vaccination during infancy as a part of mass Bacille Calmette-Guerin vaccination. In the present work we did not include tuberculin testing in our study mainly because unfortunately tuberculin testing was not available in Baghdad during the study. Further clinical, experimental and immunological studies are highly recommended.

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References

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