The investigation of congenital toxoplasmosis in a tertiary care hospital in Turkey

To the Editor

I appreciate the extensive work by Tamer et al¹ on the investigation of congenital toxoplasmosis in a tertiary care hospital in Turkey. Congenital toxoplasmosis (CT) imposes a diagnostic challenge in daily practice, as early diagnosis and institution of proper therapy are fundamental to prevent future sequelae, in particular brain and retinal damage. Tamer et al¹ demonstrated in their work no statistically significant difference between enzyme-linked immunosorbent assay (ELISA) and Western blotting performed on both venous and cord sera samples, except in one sample. However, they did not state the exact sensitivity and specificity of each serological test. This seems essential in assessing the validity of each test and deciding which serological test is superior to be contemplated in the clinical setting. It was reported that the sensitivity of Western blotting assay is 91%, and the specificity is 100%,² while that of ELISA test are 57.1% for sensitivity, and 100% for specificity.³ Though a combination of both methods might increase the detection rate of CT to 94%,4 substantial cases of CT could be still missed. The situation seems more cumbersome as the absence of CT serological markers (IgM and IgA) do not rule out CT. Therefore, advanced polymerase chain reaction remains the critical cornerstone to diagnose CT as it has near perfect sensitivity and specificity.⁵

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Reply from the Author

No reply was received from the Author.

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