



Cerebrospinal Fluid Leucine Rich Alpha-2 Glycoprotein in Children with Tubercular Meningitis with their Diagnostic and Prognostic Significance: A Prospective Study: Authors' Reply

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To the Editor: The scientific letter entitled “Cerebrospinal fluid leucine rich alpha-2 glycoprotein in children with tubercular meningitis with their diagnostic and prognostic significance: a prospective study” published recently in IJP [1] and answer of pertinent questions raised by Dr. Josef Finsterer [2] are mentioned below.

Leucine rich alpha-2 glycoprotein (LRG) is an acute phase protein and its expression is up regulated by the mediators of the acute phase response. The elevation in cerebrospinal fluid of leucine rich alpha-2 glycoprotein is directly related to degree of severity of damage of neural tissue as observed in this study including work done earlier in acute bacterial meningitis and tuberculous meningitis with very high sensitivity and specificity. In acute bacterial meningitis, the sensitivity, specificity, PPV and NPV is 96%, 75%, 92.3% and 85.7%, respectively in differentiating bacterial from aseptic meningitis [3, 4]. Therefore, it serves as a biomarker of not only tuberculous meningitis but also other types of meningitis.

Its expression is also enhanced in children with hydrocephalus and intracranial hemorrhage including extradural hemorrhage and is related to severity of damage of neural tissues [5].

We do agree with the limitation of number of controls i.e. children of febrile seizure with definite indication of lumbar puncture and normal cytochemical study. It is unethical to go for lumbar puncture in normal children. Therefore our control size is less as compared to cases.

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Declarations

Conflict of Interest None.

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