GROUP-A BETA-HEMOLYTIC STREPTOCOCCI RESISTANCE PATTERN IN NORTH INDIAN PEDIATRIC POPULATION

Sir,

The interesting article by Jain *et al.* describes the resistance pattern of GABHS (group-A beta-hemolytic streptococci) in northern India.^[1] The article may be of immense interest to all clinicians. The authors mention in the abstract section that the current resistance pattern of GABHS has not been discussed in India, which is incorrect. A thorough search of literature reveals that Lloyd *et al.* had conducted a study on 117 strains of group A streptococcus (GAS), 60 strains of group G streptococcus (GCS).^[2]

The authors have not mentioned, anywhere in the article, the exact place of the study. Northern India is a vast region, and it is necessary to specify a particular region. It is also sure that there are many cosmopolitan cities in northern India which have a mixed population, and the results are bound to vary. Information regarding the exact socioeconomic status of the subjects in the pediatric age group would have thrown more light on the matter.

A closer look at Table 1 indicates that both the sample size and the positivity towards GABHS decreased with an increase in age. A better statistical test would have spelt out the significance of the results. The present study lacks proper statistical tests, and it simply highlights the frequency of the positive culture without comparing any significance between the groups.

The authors should have explained the clinical reasons for the increase in resistance pattern of tetracycline and erythromycin and the sensitiveness towards penicillin. Obviously, genetic factors might have also played an important role. All the factors of drug resistance are to be considered for the interpretation of results. It is important to know the mutations in order to label a macrolide as a resistant one. Also, a complete history of the adverse drug reactions would have helped clinicians to try the best drug under such circumstances.

Earlier studies had even looked into the molecular heterogeneity among the clinical isolates of group-A streptococcus in the north Indian population, which might even help in vaccination.^[3] While comparing the results of this study with those of studies in other countries, the geographical location which plays an important role has to be kept in mind. Overall, it is an interesting article and might be beneficial to all clinicians, and the editor deserves special applause for publishing articles on such important topics.

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Announcement

Dr. J. C. Patel Medical Research Foundation is organizing Fifth Conference on Iron Deficiency at Shanti Sarovar, Hyderaban on 5 -7 February 2010. Early registration closes on 31/8/09. Only first 150 out-station delegates would be registered and would be provided free accommodation. Local delegates not requiring accommodation will have unrestricted registration. Last date for submission of abstracts for free papers is 15/11/09. All accepted abstracts would receive cash awards based on merits.

For details conact: For outstation delegates – Dr. B. C. Mehta, 504, Pracho Society, Juhu-Versova Link Rd, Andheri (W) Mumbai 400 053.

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