tubersulin test in chronic and recurrent chest diseases in infants and preshool children

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.urn RECOMMENDATIONSThe present study was conducted on 40 infantsand children of the preschool age, who suffered achronic or recurrent chest troubles. Most of themwere regular visi tors of Pediatric Chest Clinic ofthe children's hospital, Ain-shams University.This work aimed to find out the significanceand validity of tubercu11n test, as a diagnostictool in chronic and reourrent ohest conditionsincluding tuberculosis in preschool age and infancy.These (40) cases were olassified into three groupsThe first is that oftuberoUlous patients which included(12) o~ses. The second one is that of asthmatic patientswhioh included (23) cases. The third group included (5)cases who are non tuberculous non asthmatic cases.A control group of (15) normal children were included.of the same age and socioeoonomic class with no historyof ohronic or recurrent ohest troubles.A full history was taken from each of the subjectsof the study. Bach one was submitted to a thoroughclinical examination. The 40 cases were subjected to-151a set of laboratory tests (hemoglobin percentage,total leuoooytio oount and sedimentation rate). Inaddition to pla1J1x. rayon the ohest in posteroanteriorand lateral vi••••All the (40) oases and the (15) eontrol subjectswere tested by tuberoulin. The tuberculin used inthe study is that P.P.D. of new and valid batches.Intradermal injeotion of o.hAl ot ~ ro wasperformed to each ~bjeot in the study. The recordot induration was taken after 48 - 12 hours of theinjeotion positive reaotiont were those only withinduration exceeding 9 mm in diameter, and negativereaotions it induration was less the 10 I11III.The tuberoulous group ot patients showedtuberculin positivity ot (5~). This group also gavea history ot BOG vaooination in (33.~) only. Thehistory ot household oontact was also (33.3%) only.The non tuberoulous group i.e. the second,the third and oontrol group, showed tuberoulinreactivity in (l6.~) only. The history ot householdcontaot was only (6.9%). The history ot BOG vaccinationwas positive in t~)(iSS)The validity of tuberoulin test as a diagnosticmeasure for tUberculosis in that study was assessedby the sensitivity and speoifioity. The sensitivitywas only (50%), While the speoificity was (83.7%).Thus it is obviously observed from tHis studythat tuberoulin test is not a good positt*- test inthe diagnosis of tuberculosis, but it is a goodnegative test.Also this study showed that from the whole casesi~oluded (55) the history of ~OG vacoination was onlyin (29) cases i.e. (52.1.')ot these (29) vaccinatedones only (7) Showed reactivity to tUberculin, i.e.(24.lt). It is worthy to mention that the majorityof oases with history of vaocination laoked thepresence at the scar of

BOG.Pram this study the following recommendationsIldgh-l: be of value ,_1. A revision of the used teohnique and oonditionsof BeG vaooination in different pla6es asMaternal and child Health Center., health5’ffloe”rural units etc ••, should be con.idered.-1592. A reVision o:fmeasurs o:f:BOG applioationto the 1n:tants as an obligatory vaoc1neand its timingshould be remodeled. to be more striot and rapidlyadminstered Soon a:fter birth .instead of waiting the40 days.3. The praot10ner should pay h.is attention to anyhousehold tuberoulous oases instead of giving allattention to a tuberoUlous mother only.4. fhe diagnosis of tuberculosis in ohildren isinitiated by 8Uspeo10n as a halfway :for the :finaldiagnosis.5. The Use o:fP.ll.n of 5 m is more rewardingthat one or two TO :fordiagnosis of tuberoulosis.6. A rewarding soreening of tuberoulosis in thepediatric age groUp should involve a wider group o:fillness than those related to chrOnic or reourrentchest troubles.7. A low sensitivity or react.ivity to tuberoulintest 1s e%pected to oocur in the infante and thepreschool age grOUp in a society like ours wheremalnutri tion and :fl’e,quentacute illness prevail.