

## CUTANEOUS TB PROFILE IN NORTH WEST PUNJAB, INDIA: A RETROSPECTIVE DATA ANALYSIS

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### comment:

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Source of Support:

Nil

Competing Interests:

None

Our Dermatol Online. 2013; 4(4): 462

Date of submission: 05.09.2013 / acceptance: 23.09.2013

### Cite this article:

Elena Chiticariu, Anca Chiriac, Caius Solovan: comment: Cutaneous TB profile in North West Punjab, India: a retrospective data analysis. *Our Dermatol Online*. 2013; 4(4): 462.

Although it is a “disease of antiquity”, nicely described by Kaur T et al, tuberculosis is still a challenge in the modern medicine. The authors highlighted the role of HIV coinfection, but we don't have to forget about the role of anti-TNF therapies (widely prescribed nowadays) in reactivating tuberculosis infection, especially in endemic regions [1].

Another important point that we could observe here is the important number of cases with a negative Mantoux test (approximately 36%). As we showed previously, Mantoux or tuberculin skin test (TST) is not a reliable technique in detecting the infection. We registered positive tuberculin skin test (defined in the context of biologic therapy as induration >5 mm) in 51% of nondermatologic subjects, respectively 70% of the patients with psoriasis [2]. Among them, 50% of psoriatic patients and 28% of nondermatologic subjects had an induration >10 mm (unpublished data).

We have also reported the reactivation of TB under anti-TNF $\alpha$  therapy [3]. According to World Health Organization, the incidence rate of tuberculosis in Romania was estimated to 101/100000 population [4]. However, even if Romania is an endemic country, we mostly see pulmonary tuberculosis,

cutaneous tuberculosis being very rare.

Thus, we need to compliment the authors for a very clear and didactic presentation of different forms of cutaneous tuberculosis.

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