Answer to diagnostic limitations in tuberculous meningitis

Respuesta a la carta sobre las limitaciones del diagnóstico de meningitis tuberculosa

Dear Editor,

Given the limitations of the microbiological tests, tuberculous meningitis is a diagnostic challenge. The sensitivity of the culture is very low (20%), and although molecular techniques have been perfected in recent years, their sensitivity in cerebrospinal fluid is 60%–70%.[1] Due to these limitations, in our study[2] we used the criteria defined in a consensus, created precisely with the objective of facilitating definition and comparison in clinical research.[3] Focusing only on microbiologically confirmed cases would have incorporated a very significant bias, excluding many of the cases and making the cohort incomparable with clinical practice, in addition to preventing comparison between periods, since molecular techniques were incorporated and developed over the course of the study period. In any event, we made the comparison between microbiologically confirmed cases and those which were not, and we found no significant differences in either mortality rates (13/60 [21.7%] *vs* 10/75 [13.3%], $P = .20$) or sequelae (14/39 [35.9%] *vs* 12/53 [22.6%], $P = .163$).

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