



SDI FINAL EVALUATION FORM 1.1

PART 1:

Journal Name:	International Journal of TROPICAL DISEASE & Health
Manuscript Number:	Ms_IJTDH_32636
Title of the Manuscript:	Spectrum of childhood tuberculosis: Ensuring and Making a Differential Diagnosis by Tuberculin Skin Test and Clinical Signs in Kisangani, DR Congo
Type of Article:	Original Research Article

PART 2:

FINAL EVALUATOR'S comments on revised paper (if any)	Authors' response to final evaluator's comments
In a lot of countries, TST is not used to diagnose TB. It is usually used to diagnose latent TB. Here are the CDC guidelines - https://www.cdc.gov/tb/topic/testing/ or even https://www.cdc.gov/tb/publications/factsheets/testing/skin_testing.htm . The authors still need to clarify and reference the rationale for using TST and 10 mm as the cut off for this study. They mention "A diameter ≥ 10 was considered as active TB while between 5 and 10 was taken roughly as latent form. But both were treated." Also what were the treatments for Latent TB and Active TB that they followed.	I am surprised! This is the first time I hear an expert saying that TST is not used to diagnose TB. Many references in this paper show the use of TST to diagnose TB. Other exams are required to confirm The reviewer sent us a reference where it is said "Tuberculin Skin Testing. What is it?" The Mantoux tuberculin skin test (TST) is the standard method of determining whether a person is infected with <i>Mycobacterium tuberculosis</i>. When placed correctly, the injection should produce a pale elevation of the skin (a wheal) 6 to 10 mm in diameter". What is then infected with <i>Mycobacterium tuberculosis</i>? The same text continues with defining how to interpret TST induration: Classification of the Tuberculin Skin Test Reaction An induration of 5 or more millimeters is considered positive in -HIV-infected persons -A recent contact of a person with TB disease -Persons with fibrotic changes on chest radiograph consistent with prior TB -Patients with organ transplants -Persons who are immunosuppressed for other reasons (e.g., taking the equivalent of >15 mg/day of prednisone for 1 month or longer, taking TNF-α antagonists) An induration of 10 or more millimeters is considered positive in -Recent immigrants (< 5 years) from high-prevalence countries -Injection drug users -Residents and employees of high-risk congregate settings -Mycobacteriology laboratory personnel -Persons with clinical conditions that place them at high risk -Children < 4 years of age - Infants, children, and adolescents exposed to adults in high-risk categories >An induration of 15 or more millimeters is considered positive in any person, including persons with no known risk factors for TB. However, targeted skin testing programs should only be conducted among high-risk groups. Explanation given In clinic setting, when we say latent that means infection is there but silent and contagious is low, and that will progress to clinical disease. The patient is put under surveillance and will be treated once the medical team decides to intervene. In our case, since the area is at high-risk, we take precaution to intervene before the situation gets worse. Everyone expert knows how to treat TB and that is not necessary to repeat what is in the general guidelines, and treatment is also adapted to each person taking care of co-morbidities. This is not a book we are writing.