
To the Editors:

Should sensitivity testing be suspended in Sri Lanka?

In Sri Lankan hospitals, thousands of sensitivity tests are done every day, mostly for benzathine penicillin, and before the use of certain sera. This is an obsolete procedure in developed countries.

A negative sensitivity test could give a false sense of security. A patient may develop anaphylaxis for the sensitivity test. On the other hand, a patient may develop anaphylaxis even after a sensitivity test, when the drug is administered.

In my opinion, sensitivity testing is a waste of valuable resources such as time of medical personnel, money and material.

Alternatively, patient care could be ensured by following measures:

1. By attempting to predict whether the patient will have an allergic reaction.
 - i. A reliable history of a previous adverse response to penicillin, immediate type reactions such as urticaria, angioedema and anaphylactic shock can be taken to indicate allergy.
 - ii. Atopic individuals.
Since alternative drugs such as erythromycin can usually be found, penicillin is best avoided if there is any suspicion of allergy.
2. Medical staff should be ready to treat anaphylaxis at outpatient department or in any other place of the hospital when such injections are given.

I feel this should be seriously considered and a policy decision should be taken on sensitivity testing.

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