

To the Editors:

Culture and immunochromatographic technique for diagnosis of trichomoniasis

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We appreciate the interest shown by Joob and Wiwanitkit (*Ceylon Medical Journal* 2013; **58**: 180) regarding our article on “Use of culture and immunochromatographic technique for diagnosis of trichomoniasis in Sri Lanka” (*Ceylon Medical Journal* 2013; **58**: 122-3). We wish to respond to several statements made by them.

They state that “some previous reports had different results” to ours. We found that the immune-chromatographic test (ICT; OSOM® *Trichomonas* rapid test) had a sensitivity of 100%, specificity of 96%, positive predictive value of 60% and negative predictive value of 100%; the corresponding values from the report they quote by Hegazy *et al* were 97.98%, 99.37%, 98.98%, and 98.75% respectively [1]. Except for the positive predictive value the results seem quite comparable. This is in spite of the studies having different sample sizes (601 in ours vs. 258) and using two different reference standards. We compared ICT with the gold standard culture whilst Hegazy *et al* had used a combination of wet mount and culture as the composite reference standards (CRS).

We admit that we did not attempt a cost analysis, but our focus was mainly on the feasibility and quickness of ICT as a point of care diagnostic tool. As for the current practice of clinical diagnosis for trichomoniasis, wet mount, culture and nucleic acid amplification test (NAAT) is being used in many countries [2], but OSOM® *Trichomonas* rapid test (Sekisui Diagnostics, Framingham, MA) and nucleic acid probe test [The Affirm VPIII Microbial

Identification Test (Becton Dickinson, Franklin Lakes, NJ) have also been approved for clinical use [3]. Apart from ours, other studies [4,5] have also found that ICT/rapid antigen test has a high sensitivity, and is therefore suitable to be used when wet mount and culture are not available.

References

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4. Huppert JS, Batteiger BE, Braslins P, *et al*. Use of an immunochromatographic assay for rapid detection of *Trichomonas vaginalis* in vaginal specimens. *Journal of Clinical Microbiology* 2005; **43**: 684-7.
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