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Expected rate of enterovirus D68 infection among renal recipients with reference to pandemic H1N1 influenza/2009 virus infection; appraisal on 25-year transplant registry data in Thailand

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B infectious disease among renal transplant recipients (1). The acute neurological illness is reported as an unwanted complication of enterovirus D68 infection among renal transplant recipients (1). In fact, enterovirus D68 infection is observable worldwide and it primarily present as respiratory illness. In Thailand, the infection is also observable and the main clinical problem is the respiratory tract infection (2). In the recent report by Thongpan et al, the concurrence between enterovirus D68 and pandemic H1N1 influenza/2009 virus is common (3). The observation on five pandemic H1N1 influenza/2009 virus infections with 25 co-incidence enterovirus D68 infections is reported (3).

Here, the authors tried to estimate the magnitude of enterovirus D68 infection among renal recipients. The 25year transplant registry data in Thailand is reappraised. According to the national registry data, during 25-year period from 1987 to 2012, there are 3808 kidney recipients (4). During the same period, there are 2 cases of pandemic H1N1 influenza/2009 virus infections among Thai renal recipients (5). The rate of pandemic H1N1 influenza/2009 virus infection among renal recipients is hereby equal to 0.053%. Referring to the previously mentioned data on the concurrence between enterovirus D68 and pandemic H1N1 influenza/2009 virus in Thailand, the expected rate of enterovirus D68 infection among renal recipients will be equal to 0.265%. Since there is still no routine screening for expected enterovirus D68 infection in our setting, the mentioned possible enterovirus D68 infection might be an important hidden problem for the renal recipient.

Authors' contribution

Both authors wrote the manuscript equally.

Conflicts of interest

The authors declare that they do not have any conflicts of interest.

Ethical considerations

Ethical issues (including plagiarism, data fabrication, double publication) have been completely observed by the authors.

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