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## Letter to the Editor

# Apropos “Rotavirus infection in a tertiary hospital: laboratory diagnosis and impact of immunization on pediatric hospitalization”

Dear Editor,

We compliment the investigators at the Universidade Federal do Paraná, Brazil<sup>1</sup> for their meticulous assessment of rotavirus diagnostics, based on latex agglutination (LA), enzyme linked immunosorbent assay (ELISA), and polyacrylamide gel electrophoresis (PAGE), for diagnosis of rotavirus infection in stool samples.

Nevertheless, it would not be that simple to employ their recommended ELISA technology<sup>1</sup> in several non-academics, non-research healthcare centers since laboratory facilities are less than satisfactory.<sup>2</sup> Consequently, simple, one-step assays would be essential to diagnose cases with rotavirus gastroenteritis. Although the currently available rapid diagnostics for rotavirus infection are, to some extent, serving the purpose,<sup>1,3</sup> it would be desirable if more efficient assay formats were developed. They would be useful for disease diagnosis in clinical practice among infants, young children, and elderly,<sup>4</sup> and to monitor efficacy of rotavirus vaccines in rural and remote areas, where one-step diagnostics might be the only option.

In conclusion, the development of simpler, sensitive and specific one-step, point-of-care diagnostics for rotavirus diagnosis is needed to address the global morbidity attributable to rotavirus among masses at both the extremes of their life.

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## Conflict of interest

All authors declare to have no conflict of interest.

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