

Response to comment on Asad Maqbool Ahmad et al. (JPMA 2018; 68: 1613)

Granulocyte-colony stimulating factor in neonatal sepsis with leukopenia: A prospective cohort study

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We welcome the comments on our article: "Granulocyte-colony stimulating factor in neonatal sepsis with leukopenia: A prospective cohort study". We have not had an opportunity to peruse your article and therefore base our reply on the comments alone. Having achieved randomization and a control group for comparison of GCSF intervention, the conclusions drawn in your study are likely to be more reliable. The significant rise of the TLC and the lack of impact of GCSF on clinical

course/outcome are similar to our study. It is not clear, however, whether the sampled patients in your study had neutropenia or leukopenia prior to intervention. Another difference relates to your focus on early onset sepsis which is distinct from the broad approach (including both early and late onset sepsis) in our study. The similar observations pertaining to TLC rise in populations with distinct source organisms indicates the probability that the pattern of TLC rise in response to GCSF. In our part of the world, GBS sepsis is extremely rare. We would welcome an opportunity to read the full text of your article.

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