76 Letter to the Editor

Rotavirus Vaccines

Dear Editor,

I read the compilation on Rotaviruses by Kocabaş and Dayar (1) with great interest. Rotavirus infections are responsible for the mortality of 453.000 children aged under five. Rotavirus infections cause 25 million doctor visits and two million hospitalizations. 18.8% of diarrheas in Turkey are rotavirus gastroenteritis (2).

There are two live rotavirus vaccines in Turkey. Five-valent Rotateq® prevents 95% of hospitalizations. It is recommended orally in the 2-4-6 months. The mono-valent Rotarix® prevents 85% of hospitalizations. It is administered orally in the 2^{th} and 4^{th} month (1).

The rotavirus vaccines in the 2-4-6 months should be administered in the same months as the live vaccines such as BCG and oral polio vaccine (OPV) in the routine immunization program. The fact that the vaccine has to be paid for and obtained by the patient, that it has to be made available in the pharmacies and drug warehouses, commercial concerns, the financial situation of the family in that particular month all have an impact over the day of administration of the vaccine. The BCG vaccine is administered in community health centers at a certain day of the week.. All these reasons require the time interval between rotavirus vaccines and other vaccines to be revised.

Rotavirus vaccines can be given simultaneously with the other nasal or parenteral vaccines. The American Advisory Committee on Immunization (ACIP) points out that there is no need a specific time interval with the OPV vaccine. The Institute of European Pediatric Gastroenterology Hepatology and Nutrition (ESPGHAN) and European Society of Pediatric Infections (ESPID) do not recommend rotavirus vaccine to be administered simultaneously with the OPV (1).

The Public Health Agency of England has recommended the administration of the two live vaccines simultaneously or at least with four-week interval. In the new recommendation the agency made in February 2014, they announced that BCG and rotavirus vaccines could be administered at some time before or apart from one another (3).

Australian National Centre for Immunization Research and Surveillance and Public Health Agency of Canada announced that BCG and rotavirus vaccines could be administered at the same time or at some time before or apart from one another (4, 5).

In conclusion, the BCG and rotavirus live vaccines administered through different routes can be shot without a priority and regardless of the time interval. It is crucially important and valuable to emphasize it in order not to miss the golden vaccine opportunities.

Best regards,

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Comparison of Healthcare-related Infection Rates Based on the National Nosocomial Infections Surveillance System of Turkey Diagnostic Criteria Reported in 2010 and Centers for Disease Control and Prevention Reported in 2014 in A Tertiary Hospital

Dear Editor,

I read the article titled "Comparison of Healthcarerelated Infection Rates Based on the National Nosocomial Infections Surveillance System of Turkey Diagnostic Criteria Reported in 2010 and Centers for Disease Control and Prevention Reported in 2014 in a Tertiary Hospital" by Oruç et al. (1) with great interest. Healthcare-related infections are the major problems responsible for the frequently encountered morbidity, mortality and increased cost in the neonatal intensive care units. The definitions used for the surveillance of healthcare-related infections have been developed by "Centers for Disease Control and Prevention (CDC)" and are implemented in the surveillance studies in hospitals. In the study by Oruç et al. (1), the effects of implementation of the CDC 2014 Healthcare-Related Infection Diagnostic Criteria and the previous Diagnostic Criteria for Nosocomial Infections Surveillance in Turkey and the 2009 CDC Intravascular Catheter-Related Bloodstream Infection Diagnosis Guide on the hospital infection rate values were