Letter to the editor: Trends in human leptospirosis in Denmark, 1980 to 2012

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To the editor:

We have read with interest the recent article by Van Alphen et al. [1]. It is a very informative paper about the leptospirosis situation in Denmark, which contributes to increased insight in leptospirosis in Europe.

As the authors state correctly in the Methods section, serovar Patoc is non-pathogenic and therefore does not cause leptospirosis in humans but can act as a marker for a *leptospiral* infection. Remarkably, however, the abstract mentions Patoc to be the predominant serogroup diagnosed over time. This may confuse readers who are unfamiliar with leptospirosis. Besides, serovar Patoc belongs to serogroup Semaranga; there is no serogroup named Patoc. To assess the temporal and spatial distribution of serogroups in Denmark, titres against Patoc should have been ignored and data be based on only agglutination titres with pathogenic serovars. In case none of these have a positive titre (note that $\leq 1:100$ indicated as cut-off titre should be $\geq 1:100$) the label 'probable infecting serogroup could not be determined' would be appropriate.

The authors mention that *the severity of acute infection is obvious, but the long-term effects of Leptospirosis are unknown and chronic infections with Leptospira have been previously reported* [2]. While this in itself is a contradiction, we would like to stress that persistent complaints after acute leptospirosis receive increasing attention [3].

Interestingly, the authors mention a potential future increase in the incidence because of, among other things, climate change. Did they observe such an increase in the incidence due to autochthonous infections in the previous year(s) as several countries in Europe have done? If not, it would be of interest to know whether this could this be attributed to the suggested prevention measures.

Conflict of interest

None declared.

Authors' contributions

MG and RH wrote the letter together.

References

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