Clinical immunologist for Malaysia: Is it all about primary immunodeficiencies?

Lokman M Noh

Hospital Tunku Azizah, Kuala Lumpur

ABSTRACT

WHO defines the practice of clinical immunology as a clinical and laboratory activity encompassing the study, diagnosis and management of patients with disease resulting from disordered immunological mechanism. Such conditions are managed by the clinical immunologist, a clinical specialist with further training in immunology. The recommendation states that a country should have 2 clinical immunologists per million. Primary immunodeficiency (PID) in Malaysia began with the first reports of IqA deficiency in 19772. The next flurry of reports came from Noh LM et al in 1988 with congenital hypogammaglobulinemia. The total number of cases from Malaysian Primary Immunodeficiency Network [MyPIN] registry up to 2016 was 235. The average cases rose from 3.7 to 15.7 yearly between the period [1986- 2005] and [2006 - 2016] respectively, an increase of 4.2 time (420 %). PID as a group should not be considered as rare although individually it is [rare defined as less 1per 2000 of population (EU)]. PIDs are under reported in almost all countries; only 2.2 % of expected in Europe and 0.1 % in Africa. For Malaysia, with a likelihood of 1 % of expected [less than Europe,] would compute towards a probable total of 23,500 PID or a prevalence 0.96 per 1200 (similar of 1:1200 for US 4). The way to verify these figures is to create a National Registry for PID to include all PIDs in Malaysia. Mortality of PID is of concern as it remains high. Preliminary data from a single centre, WCH in Kuala Lumpur recorded a mortality of 17 % compared to Qatar at 21.4% (1998-2012). The substantial volume of PID in Malaysia is sufficient to cause unease amongst the PID population if their needs are not attended which create health issues for Malaysia. There is a need to provide optimum care beginning with creating subspecialty clinical Immunologist which is yet to materialise. The PID parents & patients has form a Patient Group 'MyPOPI' as advocacy for their cause. With the COVID-19 pandemic ablaze, clinical immunologist should be at centre of COVID 19 research activities for Malaysia as the practice in research intensive countries.