immunosuppression and usually after infancy, they present with an acute intracerebral event(5). Hence, screening of high risk children, preferably by MRI, is advisable for the early detection of cerebrovascular abnormalities(2). The fusiform nature and location of these aneurysms makes any form of surgical intervention or embolization impossible(1). Early detection and intervention with ART could prevent entirely or diminish the incidence and severity of cerebral vasculopathy(2).

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REFERENCES

- Mahadevan A, Tagore R, Siddappa NB, Santosh V, Yasha TC, Ranga U, et al. Giant serpentine aneurysm of vertebrobasilar artery mimicking dolichoectasia: an unusual complication of pediatric AIDS. Clinical Neuropathol 2008; 27: 37-52.
- Patsalides AD, Wood LV, Atac GK, Sandifer E, Butman JA, Patronas NJ. Cerebrovascular disease in HIV- infected pediatric patients: Neuroimaging Findings. AJR Am J Roentgenol 2002; 179: 999-1003.
- 3. Park YD, Belman AL, Kim TS, Kure K, Llena JF, Lantos G, *et al.* Stroke in pediatric immunodeficiency syndrome. Ann Neurol 1990; 28: 303-311.
- 4. Shah SS, Zimmerman RA, Rorke LB, Vezina LG. Cerebrovascular complications of HIV in children. AJNR 1996; 17: 1913-1917.
- 5. Dubrovsky T, Curless R, Scott G, Chaneles M, Altman N, Petito CK, *et al.* Cerebral aneurysmal arteriopathy in childhood AIDS. Neurology 1998; 51: 560-565.

Kawasaki Disease and Window of Opportunity

I read with interest the very informative review on Kawasaki disease – an Indian perspective(1). However their assertion that cases of Kawasaki disease are commonly missed by Indian pediatricians because of lack of awareness of the disease is presumptuous. The bigger danger is in missing the window of opportunity in discovering the cause of Kawasaki disease. There is some change which we do not understand well, and it is not solely our lack of knowledge of the disease that more cases

are coming to light in some areas and not in others. A serious study of the epidemiology of the disease potentially can uncover the cause in times of transition being witnessed in India, rather than assuming the lack of awareness as the reason.

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REFERENCE

 Singh S, Kawasaki T. Kawasaki disease – An Indian Perspective. Indian Pediatr 2009; 46: 563-571.