a set of criteria that can be used to evaluate results of clinical trials before they are included in a review. A high-quality review on head lice treatment is what many practitioners need, instead of the current swamp of reviews of disputable quality.

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References

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Low Antibiotic Resistance in Respiratory Pathogens in a Remote Area in Southern Sudan That Was Isolated by Civil War for 18 Years

Sir—We obtained 120 nasopharyngeal swab samples from outpatients with symptoms of respiratory infection within a 5-day period at a rural hospital in Mapuordit, a remote area in southern Sudan where there are ∼50,000 refugees from the civil war. This is the only hospital in an area similar in size to Slovakia (∼50,000 km²), and it serves 80–100 outpatients and 60 inpatients daily in 4 bed departments. The hospital had been isolated until the year 2000 because of 18 years of civil war in south Sudan; in that area, there had been no access to health care and medication.

Collected samples were immediately captured on transport medium (Difco, Oxoid) and were transported by air within 24 h to the Reference Laboratory of Antibiotic Resistance (University Hospital Nitra, Slovakia). Of 120 swabs, 117 were positive for a bacterial pathogen, as follows: Staphylococcus aureus, 19%; Staphylococcus pyogenes, 12%; Streptococcus pneumoniae, 7%; Klebsiella pneumoniae, 9.8%; Moraxella catarrhalis, 9.8%; Haemophilus influenzae, 9.8%; Flavobacterium violaceum, 5%; and Neisseria flavescens, 15%.

The following was also noted: 0% of pneumococci were resistant to penicillin or erythromycin, 0% of S. pyogenes strains were resistant to erythromycin, and 0% of H. influenzae strains were resistant to ampicillin. The absence of antibiotic resistance in this small, 5-day, pilot surveillance study can be explained by the isolation of the area resulting from 18 years of civil war, total lack of infrastructure and communication systems, and absence of antibiotics, even as over-the-counter drugs. Furthermore, until the year 2000, no health care at all was available in the area.

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