



[Freely available review of randomised trials in child health: a public good](#)

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This year's review booklet of [Randomised Trials on Child health in Developing Countries](#)—compiled annually to summarize the evidence on child health derived from randomized trials in developing countries over the previous year—has just been published and is freely available to download (and print as many copies as wanted/needed) on the website of the [International Child health Review Collaboration](#). (There is no specific URL so go to the Review section and scroll down to “summary of randomized trials in developing countries”)

This year's review included 200 studies and, importantly, several trials have led or will lead to significant changes in child health approaches and clinical recommendations. In particular, four trials published in this period reported some interventions which led to significant reductions in child mortality:

-In Kenya, South Africa and Burkina Faso giving a combination of three antiretroviral drugs to pregnant women who had HIV infection, from the last trimester through to six months of breastfeeding, reduced the risk of transmitting HIV to the baby and improved survival, compared to zidovudine in pregnancy and single dose nevirapine.

- In 11 centres in 9 African countries, among more than 5000 children with severe malaria, Artesunate substantially reduced mortality compared to quinine treatment.

-In rural China, iron and folic acid supplementation to pregnant women from the poorest households reduced neonatal mortality, and reduced low birth weight. Standard iron and folic acid provided more protection against neonatal death than multiple micronutrient supplements.

-In Pakistan, in a trial involving over 46,000 households, a community-based program involving lady health workers who delivered antenatal care and maternal health education, clean delivery kits, promoted facility births, immediate newborn care, identification of danger signs, and care seeking, significantly reduced still-births and neonatal deaths.

The aim of this review project is to make the latest evidence-based information relating to child health widely available to paediatricians, nurses, midwives, students and administrators in resource-poor settings where up-to-date information is hard to find and access.

Project lead, Professor Trevor Duke at the [Centre for International Child Health](#) in Melbourne, Australia, hopes that such information will be helpful in reviewing treatment policies, clinical practice and public health strategies. Professor Duke told me:

“The philosophy of the booklet is the same as that of PLoS Medicine-that this information should be a public good.”

The search strategy for use in Pubmed (a search engine that is freely available and widely used in most countries throughout the world) captures as many relevant studies as possible, and is freely [reproducible](#) and Trevor Duke would like to hear from you if you find a relevant study that, somehow, was not included in this year’s review.

Rhona MacDonald is a freelance editor for *PLoS Medicine*. Competing interest: RM is the co founder of the [International Health Protection Initiative](#)