

Pneumonia wonder drug: Zinc saves lives

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Respiratory tract infections, including pneumonia, are the most common cause of death in children under the age of five. In a study looking at children given standard antibiotic therapy, new research published in BioMed Central's open access journal *BMC Medicine* shows how zinc supplements drastically improved children's chances of surviving the infection. The increase in survival due to zinc (on top of antibiotics) was even greater for HIV infected children.

In a double-blind, randomized, placebo-controlled trial, 350 children, aged from six months to five years old, were treated with standard antibiotic therapy at Mulago Hospital. Half the children were given zinc and the other half a placebo.

The researchers from Makerere University found that while there was no difference between zinc and placebo in the time it took to recover from the infection (measured by time it took to return to a normal temperature, reparatory rate and <u>oxygen saturation</u>) the risk of death between the groups was very different. 4% of the children taking zinc died compared to 12% of the children without zinc. This means that an extra eight out of 100 children could have been saved by taking zinc. Among the HIV infected children this rose to 26 out of every 100.

Prof James Tumwine explained, "Zinc is known to bolster the immune system and zinc deficiency is rife all over the developed, and developing, world. In Uganda, where this study was performed, zinc deficiency in some areas can be as high as 70%. We would only need to give 13 of these children with pneumonia zinc on top of their antibiotics to save



one life. This equates to about 4 USD – a small price to pay."

More information: Zinc adjunct therapy reduces case fatality in severe childhood pneumonia: a randomized double blind placebocontrolled trial, Maheswari G Srinivasan, Grace Ndeezi, Cordelia Katureebe Mboijana, Sarah Kiguli, Gabriel S Bimenya, Victoria Nankabirwa and James K Tumwine, *BMC Medicine* (in press)

Provided by BioMed Central

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