

# Evidence Update

Summary of a Cochrane Review

Child Health Series

In children developing mild or moderate pneumonia at home,  
is three days of antibiotics enough?

Three days of antibiotics is as effective as longer treatments for mild  
and moderate community-acquired pneumonia.

## Background

Pneumonia is the leading cause of mortality in children under the age of five years. Treatment of pneumonia requires an effective antibiotic used in adequate doses for an appropriate duration.

## Inclusion criteria

### Studies:

Randomized controlled trials.

### Participants:

Children under five with mild or moderate community-acquired pneumonia.

### Intervention:

Intervention: antibiotic therapy.

Control: antibiotic therapy of a different duration.

### Outcomes:

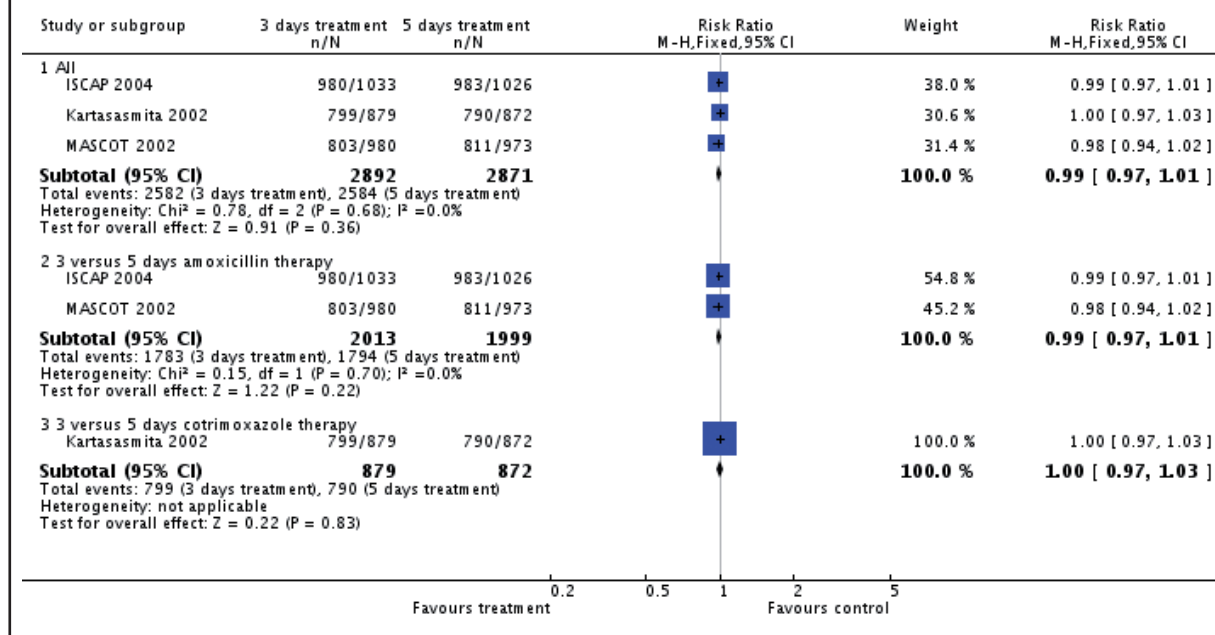
Cure rate, relapse.

## Results

- Three trials, involving 5763 children, were included; two were adequately concealed.
- Clinical cure with three days' treatment and five days' treatment was the same for amoxicillin (risk ratio 0.99, 95% confidence interval 0.97 to 1.01; 4012 participants, 2 trials); and for cotrimoxazole (relative risk 1.00, 95% confidence interval 0.97 to 1.03; 1751 participants, 1 trial).
- There were also no significant differences in relapse.

Adapted from Haider BA, Saeed MA, Bhutta ZA. Short-course versus long-course antibiotic therapy for non-severe community-acquired pneumonia in children aged 2 months to 59 months. *Cochrane Database of Systematic Reviews* 2008, Issue 2. Art. No.: CD005976. DOI: 10.1002/14651858.CD005976.pub2. *Evidence Update* published in December 2009.

**Three days vs five days treatment with the same antibiotic: clinical cure**



**Authors' conclusions**

**Implications for practice:**

Three days of antibiotic therapy is as effective as five days for mild and moderate pneumonia in children under five years of age.

**Implications for research:**

This review only allowed comparison of three days of treatment against five days. More well-designed trials, comparing different durations of antibiotic therapies, are needed to support the review's findings.



Produced by the Effective Health Care Research Consortium ([www.liv.ac.uk/evidence](http://www.liv.ac.uk/evidence)), Liverpool School of Tropical Medicine, supported by the Department for International Development UK. *Evidence Update* can be distributed free of charge.

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