

Global Update

News in Brief

New drug to conquer staph

When Ju Wang of Merck Research Laboratories laboriously tested 250,000 compounds extracted from various microbes for antibacterial activity, he finally struck gold in a compound called Platensimycin. This was produced from a South African bug called *Streptomyces platensis*.

The first test was *in vitro* against methicillin resistant Staph and vancomycin resistant Enterococci. When it passed with flying colors, it was tested next in mammalian cells and subsequently in mice infected with these bacteria. Within 24 hours there was a 10,000 fold reduction in bacterial count without toxicity to mammalian cells. The mechanism of action is inhibition of fatty acid synthesis required for bacterial cell wall integrity.

The road ahead is long before it is cleared for use in humans. But the new kid on the block shows definite promise. (Scientific American 18 May 2006, www.sciam.com)

Reservations against reservation

The medical student community all over India is on fire. Their anguish over the Governments plan to increase reservation in medical institutions upto 50% has shown up as rallies, strikes, protests in New Delhi, Mumbai, Bangalore, Ahmedababd, Patna and is still spreading. The police lathicharge against medical students in Mumbai nicknamed "Jallianwalla Bagh 2006" was followed by strong protest from the medical fraternity

leading to the suspension of Inspector Sankhle. Support of sorts was garnered when the National Knowledge Commission headed by Sam Pitroda voted 6-2 against reservations based on caste. A fillip to the agitation came from a section of OBC students in Surat and Ahmedabad who joined in protest. However there is no support from Tamil Nadu where reservation is already 69%. (The Times of India 11, 15, 16, 22 May 2006)

Rectal quinine

A randomized control trial from a health centre in Burkina Faso in Africa has shown that rectally administered quinine has equal efficacy compared to intramuscular quinine. 898 children with moderately severe *P falciparum* malaria who were unable to take oral treatment were studied. Half got rectal quinine (20 mg/kg diluted to 30 mg/ml in water solution) and half intramuscular quinine (12.5 mg/kg) every 12 hours until oral quinine could be taken. Early treatment failure was higher in the rectal group (6% v 3%, absolute difference 3.0%, 95% confidence interval 0.2% to 5.9%). All except two children in each group had negative blood slide results at day 5. Fever recurrence at day 7 was higher in the intramuscular group (37/375 v 18/395, absolute difference 5.3%, 1.6% to 8.9%). Other efficacy outcomes (late clinical failure, late parasitological failure, fever clearance time, time to starting oral intake and rate of deterioration to severe malaria) did not differ. However blood in stools and diarrhea were more common in children given quinine by the rectal route than by the intramuscular route (blood in stools: 5% v 1%, absolute difference 3.9%, 95% confidence interval 1.8% to 6.1%;

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diarrhea: 5% v 1%, 3.5%, 1.3% to 5.7%). Oral administration is often fraught with problems in pediatrics. And the rectal route is underutilized and needs more exploration (BMJ 2006;332:1055-1059 (6 May)).

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Pedscapes

My Pyramid - www.mypyramid.gov

This is a healthy eating guide from the US Department of Agriculture. The website contains dietary guidelines based on the "Food Pyramid". "My Pyramid Plan" helps in creation of an individual dietary plan using the interactive tools in the website. The "My Pyramid Tracker" feature provides a detailed assessment of the diet quality and physical

activity status. "Inside the Pyramid" answers questions about the various food groups and physical activity requirements. This website also contains sections for kids and for healthcare professionals. "Tip of the week" is another interesting feature of the website. This website can be used for creating a healthy diet plan for our patients.

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