makes the wound sterile in lesser time, has a better outcome in terms of prevention of hypertrophic scarring and post-burn contractures, and decreases the need of debridement irrespective of time of admission, when compared to SSD dressing”.^[1] Indeed, several reports confirm the possibility of using honey dressing for burn patients.^[2,3] However, according to the meta-analysis, it is shown that “Honey dressings as an adjuvant to compression do not significantly increase leg ulcer healing at 12 weeks. There is insufficient evidence to guide clinical practice in other areas”.^[3] The main flaw of the report by Baghel *et al.* is the lack of a matched control group in the study.^[1] In addition, an important problem to be concerned is the sterility of the honey. The contamination of Clostridium should not be overlooked.^[4]

Viroj Wiwanitkit

Wiwanitkit House, Bangkhuae, Bangkok, Thailand

Address for correspondence: Viroj Wiwanitkit,
Wiwanitkit House, Bangkhuae, Bangkok,
Thailand - 10160.
E-mail: wviroj@yahoo.com

DOI: 10.4103/0970-0358.63947

REFERENCES

1. Baghel PS, Shukla S, Mathur RK, Randa R. A comparative study to evaluate the effect of honey dressing and silver sulfadiazene dressing on wound healing in burn patients. *Indian J Plast Surg* 2009;42:176-81.
2. Wijesinghe M, Weatherall M, Perrin K, Beasley R. Honey in the treatment of burns: A systematic review and meta-analysis of its efficacy. *N Z Med J* 2009;122:47-60.
3. Jull AB, Rodgers A, Walker N. Honey as a topical treatment for wounds. *Cochrane Database Syst Rev* 2008;8:CD005083.
4. Bogdanov S, Jurendic T, Sieber R, Gallmann P. Honey for nutrition and health: A review. *J Am Coll Nutr* 2008;27:677-89.

Honey vs. silver sulphadiazine

Sir,

I read the recent publication by Baghel *et al.* on wound healing in burn patients with great interest.^[1] Baghel *et al.* concluded that “Honey dressing improves wound healing,