## Letters to Editor

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". Indeed, several reports confirm the possibility of using honey dressing for burn patients. 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". The main flaw of the report by Baghel *et al.* is the lack of a matched control group in the study. In addition, an important problem to be concerned is the sterility of the honey. The contamination of Clostridium should not be overlooked.

## Viroj Wiwanitkit

Wiwanitkit House, Bangkhae, Bangkok, Thailand

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

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## Honey vs. silver sulphadiazine

Sir,

I read the recent publication by Baghel *et al.* on wound healing in burn patients with great interest.<sup>[1]</sup> Bahgel *et al.* concluded that "Honey dressing improves wound healing,