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## Reply to “Short antibiotic regimens in community-acquired pneumonia in children”<sup>☆</sup>



### Respuesta a «Pautas cortas de antibioterapia en neumonías adquiridas en la comunidad en niños»

We thank the authors for their interesting comments<sup>1</sup> on the consensus document on the management of community-acquired pneumonia in children.<sup>2</sup> Our consensus follows the same line of thinking by supporting short treatments, as reflected in the proposed duration of less than 7 days.

The article by Same et al.<sup>3</sup> was published on July 11, 2020, 4 months after our consensus document was accepted by this journal,<sup>2</sup> so we could not take it into account, but it does not contradict our recommendation. The results of this study do not provide any clear conclusion that treatment should be 5 days or less, but rather 5–7 days (with a mean duration of 6 days).

Greenberg et al.<sup>4</sup> only show the non-inferiority of amoxicillin, in terms of treatment failure at 30 days, in a 5-day versus a 10-day regimen (which is not the period recommended by our pediatric consensus).

However, this is a controversial topic in pediatrics, and the NICE guidelines<sup>5</sup> recognize that no evidence was identified in children and young people that met the specific criteria of this review: the committee agreed by consensus that antibiotic treatment should be discontinued after 5 days unless the patient is clinically unstable according to clinical judgment. In other words, the level of evidence to unreservedly endorse a 5-day generic treatment in children with CAP is low and based on expert opinion. Therefore, in uncomplicated cases of CAP among the pediatric population, we believe it is more prudent to recommend short treatments with a maximum duration of 7 days, without explicitly and unambiguously limiting them to 5 days, as scientific evidence is insufficient at the present time. We therefore consider that proposing “a maximum duration of 7 days” is more reasonable and in line with current scientific knowledge.

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