

LETTER

Effectiveness of internet-delivered handwashing intervention

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Dear Editor,

We read with interest the report by Little et al. on the effectiveness of an internet-delivered handwashing intervention against gastrointestinal and respiratory infections (1). In a systematic review of 30 intervention trials, Aiello et al. reported that hand hygiene is clearly effective against gastrointestinal infections and effective to a lesser extent against respiratory infections (2).

We were confused by the conclusion that the intervention would be effective against pandemic influenza, because the authors did not report laboratory data on the viral etiologies of the respiratory illnesses, and only a small fraction of those illnesses would have been due to influenza virus infections (3). A recent meta-analysis of 10 randomized trials found no statistically significant effect of hand hygiene against laboratory-confirmed influenza virus infections (4). The modes of transmission of influenza virus remain controversial (5).

We were also concerned about the substantial protocol deviations and unplanned decisions made during the trial, such as introducing additional arms

and switching from stratified to simple randomization (1). Of particular note, the primary outcome had remained unspecified and was ultimately chosen based on logistical considerations that had to be further supplemented by mailed questionnaire and telephone follow up. As opposed to limiting the period of recall to four weeks, the primary outcome was ascertained at the end of 16 weeks, thus potentially increasing recall bias of under-reporting and mis-reporting. Furthermore, the definition of a respiratory tract infection was non-standard and unique to the trial, rendering direct comparison with routine public health practice difficult.

References

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