

## New study puts focus on increasing ORS use and to combat antibiotic resistance

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**A new study by researchers at University of Southern California explains why kids aren't getting a cheap, effective treatment for diarrhoea**



Healthcare providers in developing countries know that oral rehydration salts (ORS) are a lifesaving and inexpensive treatment for diarrhoeal disease, a leading cause of death for children worldwide, yet few prescribe it.

A new study published in *Science* suggests that closing the knowledge gap between what treatments healthcare providers think patients want and what treatments patients really want could help save half a million lives a year and reduce unnecessary use of antibiotics.

“Even when children seek care from a health care provider for their diarrhea, as most do, they often do not receive ORS, which costs only a few cents and has been recommended by the World Health Organization for decades,” said Neeraj Sood, Senior Author of the Study, Senior Fellow at the USC Schaeffer Center for Health Policy & Economics and a professor at the USC Price School of Public Policy.

During the study, Sood and his colleagues enrolled over 2,000 healthcare providers across 253 medium-size towns in Karnataka and Bihar, and found that provider perceptions of patient preferences are the biggest barrier to ORS prescribing not because caretakers do not want ORS, but rather because providers assume most patients do not want the treatment.

“Despite decades of widespread knowledge that ORS is a lifesaving intervention that can save lives of children suffering from diarrhea, the rates of ORS use remain stubbornly low in many countries such as India,” said Manoj Mohanan, co-author of the study and professor of public policy, economics, and global health at the Sanford School of Public Policy at Duke University. “Changing provider behavior about ORS prescription remains a huge challenge.”

Study authors said these results can be used to design interventions that encourage patients and caretakers to express an ORS preference when seeking care, as well as efforts to raise awareness among providers about patients' preferences.