ducing diagnostic suspicion bias is usually viewed in the context of the outcome measures. This highlights the problems associated with considering bias in general terms rather than assessing its effect on the specific questions addressed.

We agree that Boyer and Gotoff[11] did not analyse patients on an intent-to-treat basis; the pros and cons of this approach are well documented.[19]

The main issues Ohlsson and Myhr raise paradoxically strengthen our conclusions. The independently conducted meta-analyses[1-3] they found also showed a beneficial effect of intrapartum penicillin prophylaxis. Their search identified no additional RCTs and thus confirms the adequacy of our search. They concur with the ranking of quality of the main studies. Their comments on problems and biases in the primary studies have enabled us to clarify our methods and show that our conclusions remain robust.

Their accusation that the studies included in our meta-analysis are of poor quality is unfortunate, given the evidence and the acknowledgement that there is no gold standard for assessing quality. We believe that our meta-analysis is scientifically sound and that it will facilitate decision making in Canada. As well, the studies included formed the basis for current consensus statements on intrapartum prophylaxis of early-onset GBS infection.[20-22]

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Medic Alert bracelets

On behalf of the Canadian Medic Alert Foundation I applaud the article "Fatal anaphylactic reactions to food in children" (*Can Med Assoc J* 1994; 150: 337–339), by the Allergy Section of the Canadian Paediatric Society, particularly the statement that "all patients at risk of a lethal allergic reaction to food should wear a Medic Alert bracelet." Other patients who should wear these bracelets include those with implants, transplanted organs, pacemakers, epilepsy and diabetes, those receiving multiple drug therapy and those with dementia, who may be inclined to wander.

Although the authors kindly provide the address for the foundation, the toll-free telephone number may be even more helpful to physicians and patients who want to apply for membership: (800) 668-1507.

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