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in severe respiratory infections refractory to other measures...

## CHLOROMYCET

## for established clinical efficacy against susceptible organisms\*\*\*

In Friedlander's Pneumonia3.13 • In Hemophilus Influenzae Pneumonia3.4.13.14

• In Staphylococcal Pneumonia<sup>1-8,13</sup> • In Acute Epiglottitis<sup>4,10,11</sup> • In Pneumonias Due to Gram-negative Bacilli\* • In Staphylococcal Empyema12

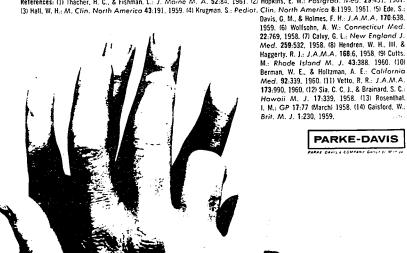
CHLOROMYCETIN (chloramphenicol, Parke-Davis' is available in various forms, including Kapseals' of 250 mg., in bottles of 16 and 100. See package insert for details of administration and dosage.

Warning: Serious and even fatal blood dyscrasias 'aplastic anemia, hypoplastic anemia, thrombocytopenia, granulocytopenial are known to occur after the administration of chloramphenicol. Blood dyscrasias have occurred after both short-term and prolonged therapy with this drug, Bearing in mind the possibility that such reactions may occur, chloramphenicol should be used only for serious infections caused by organisms which are susceptible to its antibacterial effects. Chloramphenicol should not be used when other less potentially dangerous agents will be effective, or in the treatment of trivial infections such as colds, influenza, or viral

infections of the throat, or as a prophylactic agent.

Precautions: It is essential that adequate blood studies be made during treatment with the drug. While blood studies may detect early peripheral blood changes, such as leukopenia or granulocytopenia, before they become irreversible, such studies cannot be relied upon to detect bone marrow depression prior to development of aplastic anemia.

References: (1) Thacher, H. C., & Fishman, L.: J. Moine M. A. 52:84, 1961. (2) Hopkins, E. W.: Postgrod, Med. 29:451, 1961.



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