

are often susceptible only to chloramphenicol.

DOCUMENTATION:

1. Woodward, T.E., and C.L. Wisseman, Jr. Chloromycetin, pp. 105-108. Antibiotics Monographs No. 8. New York: Medical Encyclopedia, Inc., 1958.

VI. Surgical infections: postoperative wound infections.

EVALUATION: Possibly effective.

COMMENTS: Postoperative wound infections have a variety of etiologic agents, but Staphylococcus aureus is the single most common. Chloramphenicol is effective against many of these agents, but is not the most effective against the Staphylococcus. For this reason, plus the toxicity warning, it is not the first choice in most infections unless an organism is isolated against which chloramphenicol is most active in vitro, or other preferred drugs cannot be given or have been ineffective.

DOCUMENTATION: Most favorable report is reference 1 (Altemeier).

1. Altemeier, W.A., and W.R. Culbertson. Chloramphenicol (chloromycetin) and aureomycin in surgical infections. J.A.M.A. 145:449-457, 1951.
2. Bloomer, W.E., S. Giammona, G.E. Lindskog, and R.E. Cooke. Staphylococcal pneumonia and empyema in infancy. J. Thorac. Surg. 30: 265-274, 1955.
3. Carmichael, C.B., Jr. Fatal bacterial endocarditis due to staphylococcus aureus. U.S. Armed Forces Med. J. 4:287-294, 1953.
4. Hausmann, W., and A.J. Karlish. Staphylococcal pneumonia in adults. Brit. Med. J. 2:845-847, 1956.
5. Kanof, A., B. Epstein, B. Kramer, and I. Mauss. Staphylococcal pneumonia and empyema. Pediatrics 11:385-392, 1953.
6. Lepper, M.H., P. Tillman, and R. Devetsky. Patterns of transmission of staphylococci. Ann. N.Y. Acad. Sci. 128: 404-427, 1965.
7. Martin, C.M., C.M. Kunin, L.S. Gottlieb, and M. Finland. Asian influenza A in Boston, 1957-58. II. Severe staphylococcal pneumonia complicating influenza. A.M.A. Arch. Intern. Med. 103:532-542, 1959.
8. Wallman, I.S., R.C. Godfrey, and J.R.H. Watson. Staphylococcal pneumonia in infancy. Brit. Med. J. 2:1423-1427, 1955.

VII. Surgical infections: cellulitis.

EVALUATION: Possibly effective.

COMMENTS: Cellulitis (other than postoperative) is most often caused by streptococci or staphylococci for which chloramphenicol is not the most effective drug. For this reason, plus the toxicity warning, it is not the first choice unless an organism against which chloramphenicol is the most active has been isolated, or the preferred drug cannot be given or has failed.