DOCUMENTATION:

1. Bartonellosis, pp. 603-606. In G.W. Hunter, III, W.W. Frye, and J.C. Swartzwelder, Eds. A Manual of Tropical Medicine. (3rd ed.) Philadelphia: W.B. Saunders Co., 1960.
2. Payne, E.H., and O. Urteaga. Carrion's disease treated with chloromycetin. Antiobiot. & Chemother. 1:92-99, 1951.
3. Pinkerton, H. Bartonellosis (Carrion's disease, Oroya fever, Verruga peruviana), pp. 327-329. In P.B. Beeson and W. McDermott, Eds. Cecil-Loeb Textbook of Medicine. (11th ed.) Philadelphia: W.B. Saunders Co., 1963.
4. Urteaga, B.O., and E.H. Payne. Treatment of the acute febrile phase of Carrion's disease with chloramphenicol. Amer. J. Trop. Med. 4:507-511, 1955.

XIV. Relapsing fever.

EVALUATION: Possibly effective.

COMMENTS: Treponema (Borrelia) recurrentis infections in experimental animals are susceptible to chloramphenicol. On a weight basis, however, penicillin G is more active. In human infections, no direct comparison has been made, and, although chloramphenicol has been used successfully, penicillin should be tried first if it is tolerated.

DOCUMENTATION:

1. Hirschboeck, M.M. Use of chloramphenicol in relapsing fever. Amer. J. Trop. Med. 3:712-713, 1954.

XV. Granuloma inguinale.

EVALUATION: Effective, but . . . .

COMMENTS: It has been reported that chloramphenicol caused the disappearance of Donavan bodies more rapidly than either tetracycline or streptomycin. Relapses after chloramphenicol have seemed to be less than 10%. Although chloramphenicol may be slightly better than tetracycline, the latter may be preferred for toxicologic reasons.

DOCUMENTATION:

1. Greenblatt, R.B., W.E. Barfield, R.B. Dienst, R.M. West, and M. Zises. Five-year study of antibiotics in treatment of granuloma inguinale. Amer. J. Syph. 36:186-191, 1952.
2. Robinson, R.C.V., and T.L. Wells. Intramuscular chloramphenicol in the treatment of gonorrhea and granuloma inguinale. Amer. J. Syph. 36:264-268, 1952.

XVI. Plague.

EVALUATION: Effective, but . . . .