Panel on Anti-Infective Drugs (III)

INDICATIONS

I. Staphylococcal infections, by implication of the discussion on the first page of the insert, may be an indication: "in a survey of experimental and clinical experiences of susceptibility of staphylococci to chloramphenicol, it was found that the incidence of chloramphenicol-resistant staphylococci appears unrelated to frequency or to intensity of use of this antibiotic. Development of resistance to chloramphenicol can be regarded as minimal for staphylococci and many other species of bacteria."

EVALUATION: Possibly effective.

COMMENTS: Although chloramphenicol was useful for the treatment of some staphylococcal diseases during the mid-1950's, it now seems to be rarely indicated. Its major trial was in the staphylococcal pneumonias accompanying the influenza epidemic of 1957. Its effectness was somewhat less than expected, even for sensitive strains, statement concerning resistance is not true in the opinion of the lose below). In the description of in vitro work just before the stence quoted above, there is no reference to the transfer of episor particles carrying chloramphenicol resistance. The advent of betta agents for staphylococcal disease relegates this drug to a very ran needed alternate choice.

DOCUMENTATION:

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- Wallman, I.S., R.C. Godfrey, and J.R.H. Watson. Staphylococca pneumonia in infancy. Brit. Med. J. 2:1423-1427, 1955.
- II. Rickettsial diseases: epidemic and murine typhus, Brill's disease scrub-typhus, Rocky Mountain spotted fever, and rickettsial pox.