

considered definitely abnormal. The anemias, leukopenias granulocytopenias and thrombocytopenias observed in the control patients on chloramphenicol therapy all subsided after the drug was discontinued. One control patient who developed anemia, thrombocytopenia and leukopenia, concurrently developed staphylococcal pneumonia and extensive phlebitis and cellulitis at the site of an intravenous polyethylene catheter. However, as the patient's differential count remained normal, and the lowest total white blood cell count recorded was 3,100 per cmm. the superinfection was not necessarily related to the mild leukopenia.

SUMMARY

Overall results of treatment of *H. influenza* meningitis with ampicillin or chloramphenicol appeared comparable, but no definite advantages were demonstrated in the use of ampicillin other than the freedom from hematologic depression. While one death occurred among the ampicillin group and two additional patients required neurosurgical procedures for correction of hydrocephalus, four control patients died and one had severe neurological residual. Further study, perhaps with higher dosage, is indicated.

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APPENDIX XI

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EXPERIENCE WITH AMPICILLIN IN BACTERIAL MENINGITIS

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ABSTRACT

The mortality of bacterial meningitis is 10 to 15% in large contemporary series and prompts continuing search for effective, nontoxic therapeutic agents.