icity. Fortunately, none of the reactions was permanent, although two patients had persistent and marked hematological depression for more than 2 months.

Although ampicillin is not significantly more effective than penicillin G or chloramphenicol in the treatment of the common types of bacterial meningitis, the advantages of a single drug and the absence of significant toxicity suggest that this agent be considered as the drug of choice for the initial treatment of bacterial meningitis in patients more than 2 months of age. It should be emphasized, however, that, with definite confirmation of the infection as either due to pneumococci or meningococci, penicillin G provides a less expensive and equally effective mode of therapy.

ACKNOWLEDGMENTS

This investigation was supported by the Hastings Foundation Fund, Bristol Laboratories, Inc., Syracuse, N.Y., and by Public Health Service grant 5-TI-AI-275 from the National Institute of Allergy and Infectious Diseases. We thank Pat Hagen for the primary isolation and identification of bacteria.

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APPENDIX XII

EXCERPTS OF AFFIDAVITS SUBMITTED TO THE FOOD AND DRUG ADMINISTRATION FROM VARIOUS PHYSICIANS RE PRESCRIBING OF DRUG THALIDOMIDE BASED ON INFORMATION GIVEN BY DETAIL MEN

D. Scott Bayer, M.D., 2122 West End Avenue, Nashville, Tenn., Obstetrician-Gynocologist, signed an affidavit which states in part, "About November 1, 1960 I was approached by a representative of the Wm. S. Merrell Company . . . regarding the use of Kevadon. This representative told me that Dr. Jere C. Robertson had agreed to use the product in St. Thomas Hospital where he was a resident physician in OB-GYN. . . . This representative told me that the firm just wanted a clinical impression based upon our use and testing or laboratory work were not necessary. . . . Because of the safety representation made by the representative at that time and because it was my understanding that no real clinical experimentation or reporting was required, but that only a clinical impression was wanted, I agreed to sign a statement of investigation for the representative in order to allow Dr. Jere C. Robertson to use the product. . . . It was my understanding that Kevadon would very shortly be available as a prescription item. . . . "

Bernard A. Bercu, M.D., Wayne County General Hospital, Eloise, Michigan, Internist, signed an affidavit stating in part, "The detail man on first visit concerning Kevadon asked me if I would like to try some on patients. I decided to use Kevadon as a sedative for sleep for some of my patients on the basis of the representation made to me by the detailman and the preliminary medical brochure that Kevadon had a very low toxic effect as compared with the other sleep inducing agents such as barbiturates. . . . I have submitted no reports of any kind to Wm. S. Merrell Company or to its representatives concerning Kevadon. I do not consider my use of Kevadon as part of an investigational program to determine safety. I did use it for familiarization. I had not planned any clinical trial. I was not prepared to study the drug. . . ."

Jack B. Brams, M.D., 751 E. 63rd Street, Kansas City, Mo. Internist, signed an affidavit quoted in part, "In October or November 1960 I was approached by Frank Johnson, a detailman for Wm. S. Merrell Company, concerning the drug Kevadon. He presented the drug as a non-barbiturate, non-narcotic, safe sleep