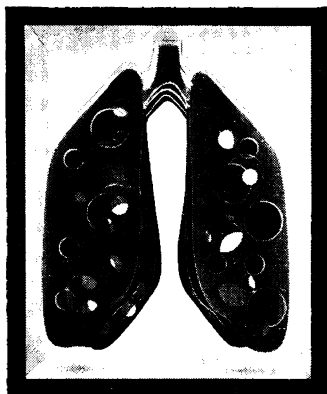


# in bronchitis more effective than ampicillin or tetracycline



## Compared with ampicillin

In a controlled single-blind trial involving 50 patients with chronic bronchitis SEPTRIN\* was shown to be more effective than ampicillin, with reference to reduction of sputum volume and purulence.

## Sputum volume reduction

There was a significantly greater reduction in mean sputum volume after treatment with SEPTRIN than after treatment with ampicillin.

## Sputum purulence reduction

23 out of 24 cases with purulent sputum receiving SEPTRIN improved as compared with 16 out of 22 cases with purulent sputum receiving ampicillin. (Sputum was graded according to MRC criteria). The success rate for SEPTRIN was significantly higher than for ampicillin.

## Clinical improvement

Clinically, 24 out of 25 cases receiving SEPTRIN responded as compared with 19 out of 25 receiving ampicillin.

## Reference:

*Postgrad med J.* (1969) 45, Supplement (November) 86.

\*Trade Mark

## Compared with tetracycline

In a trial designed to compare the effect of SEPTRIN with that of tetracycline in the treatment of chronic bronchitis, it was found that a week's course with SEPTRIN was more beneficial than a week's course of tetracycline.

24 patients received SEPTRIN and 22 received tetracycline. Objective data was collected from the two groups at the beginning and at the end of treatment.

## Sputum Volume

The decrease in mean sputum volume after treatment, as a fraction of the initial measurements, was significantly larger for the SEPTRIN group.

## Sputum purulence

Objective grading of reduction in purulence of the sputum showed better results with SEPTRIN than with tetracycline at the end of treatment.

## Reference:

*Postgrad med J.* (1969) 45, Supplement (November) 91.

SEPTRIN Tablets, SEPTRIN Paediatric Suspension and SEPTRIN Paediatric Tablets contain trimethoprim and sulphamethoxazole.

Full information is available on request.



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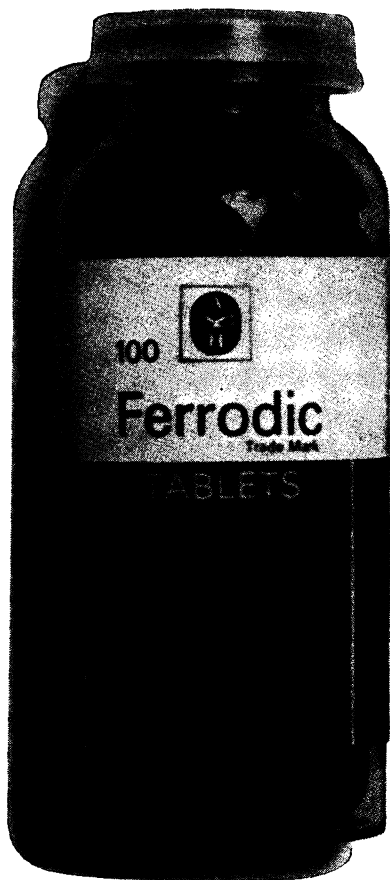
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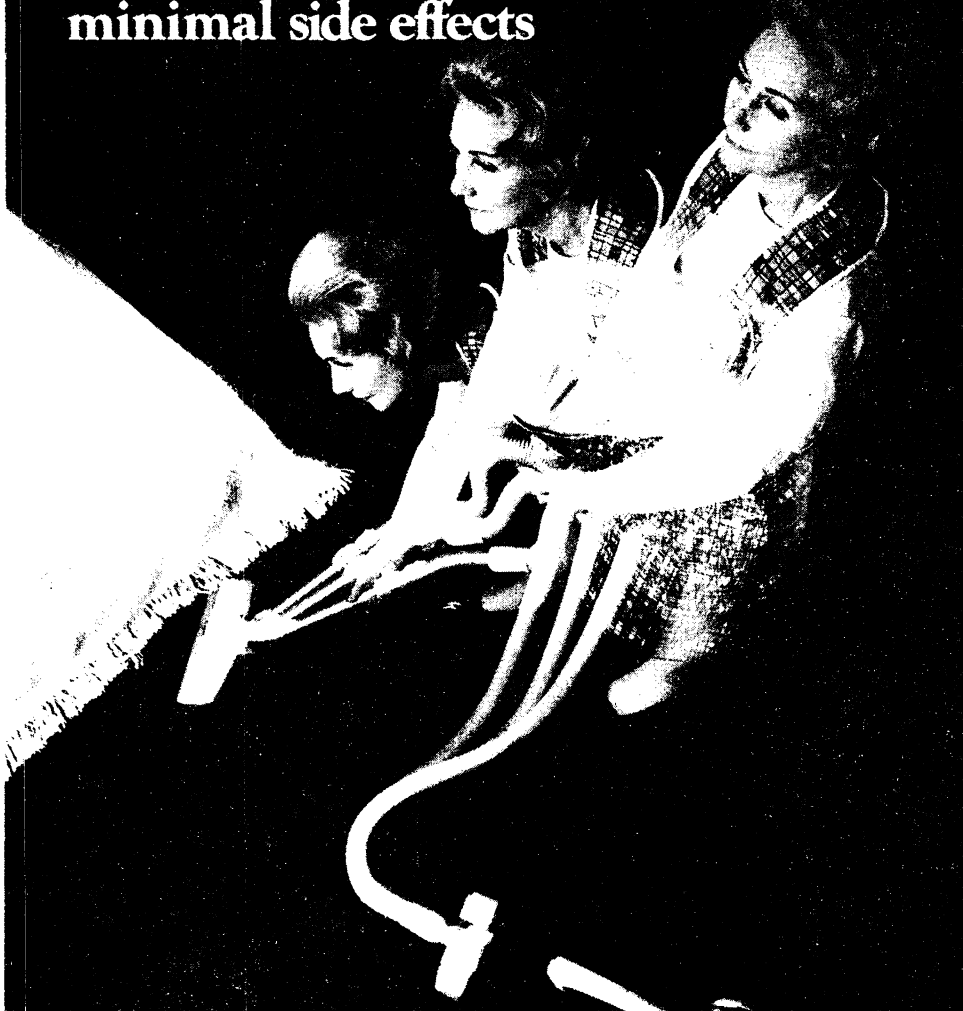
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applications can come only from clinicians—the general-practitioner teachers. One learning situation for the general-practitioner registrar will arise from observing his teacher; others must be devised, and small group discussions of particular cases would seem suitable. To make clear the rôles of the various members of the health team, it would be valuable sometimes to include in these discussions people training to be the social workers, health visitors and nurses of the team.

### *Implications for the individual general practitioner*

It was earlier suggested that reactions to stress depended upon three factors; ability to cope, ability to handle ones emotional reactions, and motivations or involvement. This classification is valid for the general practitioner.

His ability to cope depends upon his training and the skills he has acquired—matters which his education and experience should give him.

His ability to handle his emotional reactions depend on his recognizing that innominate science applies to everyone, including doctors. If he is not aware that his perceptions are subjective, that he has been influenced by his society and culture and that he has needs, values, attitudes, beliefs and reaction patterns like everyone else, he is behaving too unscientifically to be an innominate scientist. He must know himself before he can use his perceptions diagnostically and his relationships therapeutically.

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### REFERENCES

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## References

1. Med. Sci. (1967) May p. 37-49
2. Brit. Med. J. (1969) 4: 803

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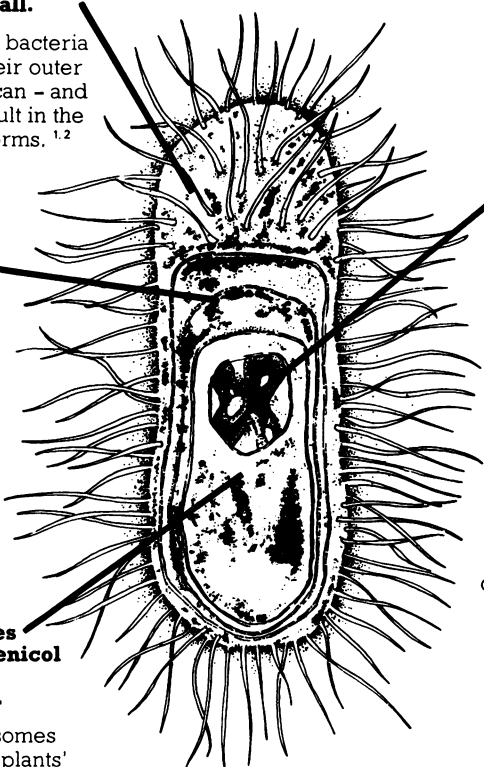
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1. Hosp. Practice, (1967) 2 : 54

2. Ann. Rev. Microbiol., (1965) 9 : 209

3. J. Bact. (1969) 98 : 96

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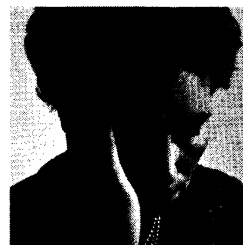
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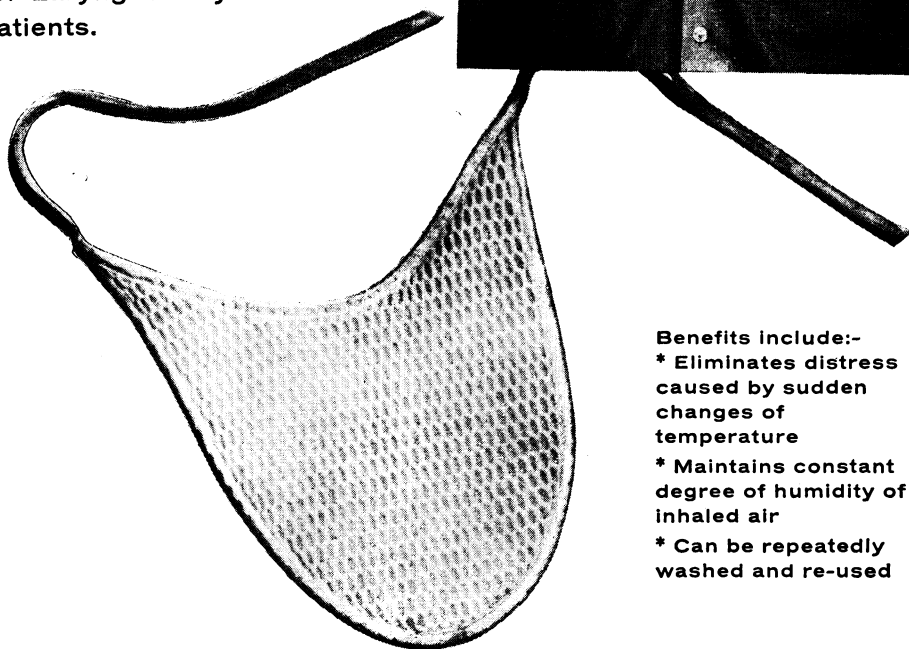
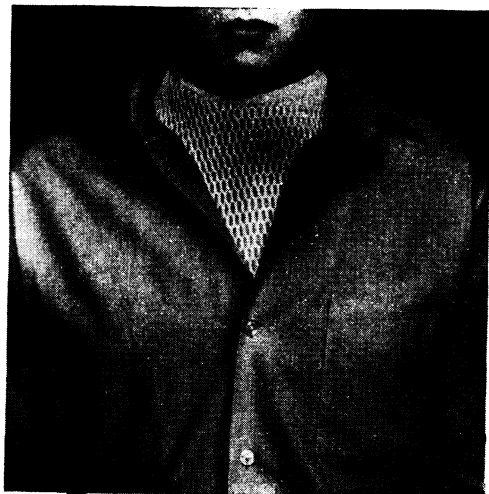
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# In the treatment of Dermatitis Fucidin<sup>®</sup> 'H' Ointment fills a definite need

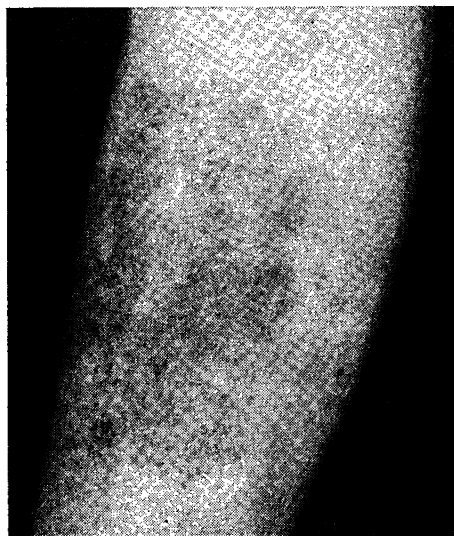
Fucidin H Ointment offers the antipruritic/anti-inflammatory action of hydrocortisone combined with the rapid bactericidal action of Fucidin, minimising the risks of the adverse effects of the more potent steroids and the considerable risk of sensitisation caused by many topical antibiotics.

Fucidin H Ointment:  
Sodium fusidate B.P. 2%;  
hydrocortisone acetate B.P.  
1% in a neutral ointment base.  
available in tubes containing  
10G & 25G.

Infected eczema on leg of 55 year old man

After 7 days' treatment with Fucidin H Ointment

*Photographs from Leo Laboratories' Library of British Dermatological Case Histories, 1969*



® Reg. Trade Mark

Full information available on request.

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