

MEDICINE

New Potent Antibiotic

Preliminary trials show that it holds promise of conquering diseases which streptomycin and penicillin have not proved effective against.

➤ A GOLDEN-YELLOW DRUG, cousin to streptomycin but promising to conquer diseases which streptomycin and penicillin do not touch, was announced at the New York Academy of Sciences.

The drug is called aureomycin, the "aureo" part of its name coming from the Latin for gold, and the "mycin" showing that it comes from a kind of fungus, like streptomycin.

Aureomycin was discovered by Dr. B. M. Duggar of the Lederle Laboratories division of the American Cyanamid Company. These are the same laboratories that produced the new sulfa drug now being tried in cases of infantile paralysis.

The golden-yellow fungus drug is effective against germs of the staphylococcus family, such as cause eye infections, against some viruses and some germs called rickettsia. Q fever, Rocky Mountain spotted fever and both typhus and scrub typhus are among the diseases caused by rickettsias.

Trials of aureomycin on patients have been made in Boston, Minneapolis, at Columbia University, at Johns Hopkins in Baltimore and Gallinger Municipal Hospital in Washington, D. C.

"Excellent results" in treatment of patients with Rocky Mountain spotted fever have already been obtained with aureomycin, a group of Johns Hopkins medical researchers reported.

The members of the Hopkins group are Drs. Morton S. Bryer, Emanuel B. Schoenbach, Caroline A. Chandler, Eleanor A. Bliss and Perrin H. Long.

This group has also used the new drug to treat patients with urinary tract infections. Again, they report, excellent results were obtained.

"A valuable addition" to other drugs such as penicillin and the sulfas is their summing up of their nine months' experience with it.

Its first public announcement at the New York Academy of Sciences was followed by other enthusiastic reports from the physicians who have been testing it clinically.

Some of the patients treated for eye infections were physicians. These doctor-patients had had recurrent conjunctivitis, commonly known as pink-eye, for many years and had come to believe that no drug was any good for these infections. Aureomycin treatment was given to them by Dr. Alson E. Braley and Dr. Murray Sanders of Columbia University.

"They were emphatically enthusiastic about the drug and thought the cure was even more rapid than with penicillin," the Columbia scientists reported.

Aureomycin was effective in all staphylococcus eye infections, provided it was used over a period of several days, and produced excellent results in influenzal conjunctivitis.

All of a group of 25 patients suffering from another disease, lymphogranuloma venereum, were helped in varying degrees by the drug, Drs. Louis T. Wright, Myra A. Logan, Aaron Prigot and Lyndon M. Hill reported. These patients were treated at Harlem Hospital.

In eight cases of buboes, one form of this usually stubborn disease, all patients showed reduction in the size of the gland after four days of treatment.

"This was an event which in our experience over 24 years with several hundred cases of early lymphogranuloma has never occurred spontaneously in so short a time," the physicians declared.

They believe that the 25 cases represent infections with multiple strains of the virus causing the disease. The activity of aureomycin, therefore, may not be limited to a single strain.

Much of this work is still in the preliminary stage. But trials in Q fever, mixed

bacterial eye infections and a virus-caused venereal disease called lymphogranuloma venereum have reached the stage where the drug may soon be released generally for use in such ailments.

Aureomycin and the anti-polio sulfa drug are the two latest weapons that have been made available to doctors in the past decade. They promise to join the other sulfa drugs, penicillin, streptomycin, polymyxin, and chloromycetin in combatting infections.

Aureomycin should not be confused with the new anti-polio drug, Darvisul. It is not an antibiotic but a modified sulfa drug.

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CHEMISTRY

Penicillin Trade Names Becoming too Numerous

➤ "WE NOW OFFER five to one on P. O. B."

It may sound like the latest from the race track, but it comes instead from the editor of the *Journal of the American Medical Association* (July 17).

"P. O. B." is the trade name of a penicillin product. The journal editor, Dr. Morris Fishbein, says it's five to one doctors won't know the nature of the product from that name. Previously he offered, editorially, odds of eight to five that doctors would not guess the nature of a product called "Penioral."

The point of his editorial spoofing is that trade names for penicillin are becoming so numerous and confusing even doctors cannot keep up with them. In protesting a



AUREOMYCIN DISCOVERER—Dr. Benjamin M. Duggar, microbiologist at the Pearl River Laboratories of Lederle Laboratories Division, American Cyanamid Co., first isolated the fungus from which was obtained the new golden-colored drug.