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References (1) Lancet 1957, ii, 820.

(2) Lancet 1957, ii, 1005.

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The Chemotherapy of Tuberculosis

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5-Bromsalicylhydroxamic Acid

Recent publications* on a new chemotherapeutic agent, 5-Bromsalicylhydroxamic Acid, suggest that it may be of value as a replacement for PAS in combined chemotherapy of tuberculosis. A comprehensive survey of the literature, mostly published in Poland, led us to believe that investigation of the Polish claims was merited, and first-hand information was obtained from discussions with the authors of the Polish papers.

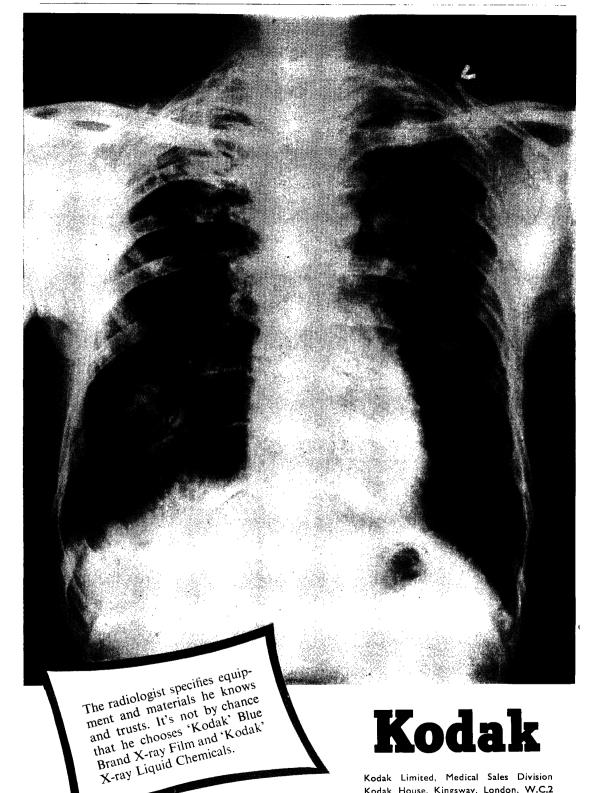
It is our considered opinion, after assessing all the available data that, whilst 5-Bromsalicylhydroxamic Acid may have a place in the chemotherapy of tuberculosis, further work, both experimental and clinical, must be undertaken with it before its use can be recommended. Therefore, extensive clinical trials in this country have been arranged and until the results of these trials are known, we cannot recommend its general use. Supplies of 5-Bromsalicylhydroxamic Acid have been made available for selected clinical investigation under controlled conditions, and a comprehensive dossier containing all available data has been compiled.

^{*} Brit. J. Tuberc. 1958, **52**, 19. Lancet, 1958, **1**, 746.



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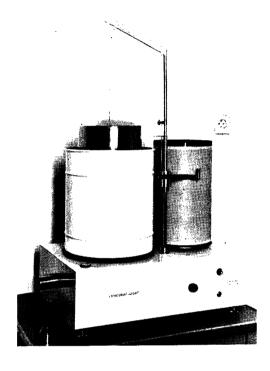
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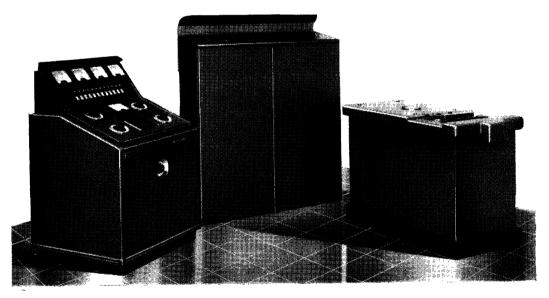
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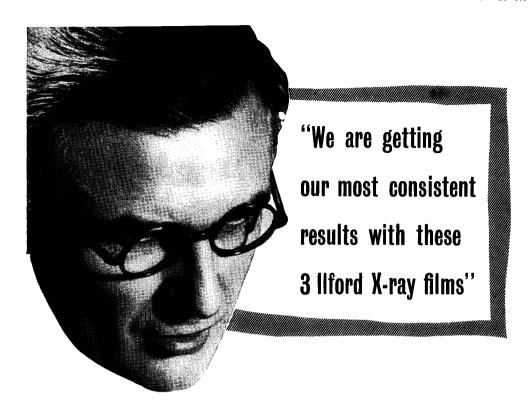
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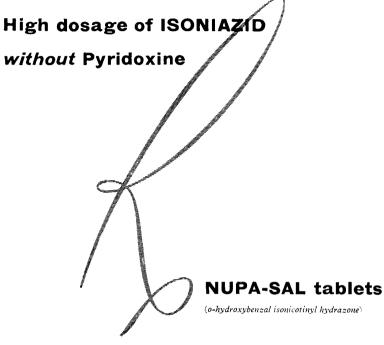
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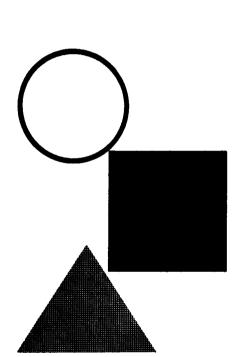
"Radiological improvement was significantly hastened by prednisolone over a six-months period, most of the significant difference occurring in the first two months. Cavity closure and sputum conversion were slightly hastened by prednisolone, but not to a significant degree."

4 "No patients receiving prednisolone showed any significant evidence of deterioration, though a temporary 'rebound' phenomenon was observed radiologically in one-sixth of cases. No serious side-effects were recorded."

A booklet presenting a review of the subject to date is available on request from the Medical Service Department.



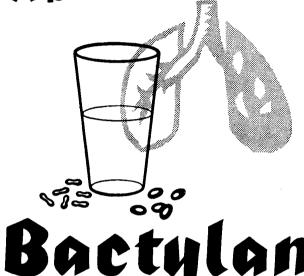
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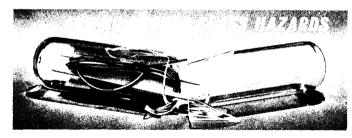
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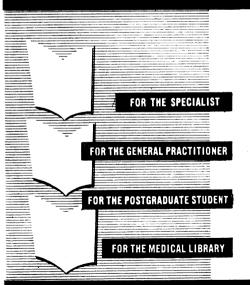
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