Africa Hit Hardest as TB Rates Continue to Rise

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Both drugs had 100% microbiologic success in patients with baseline methicillin-resistant S. aureus, although there were only seven affected patients.

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Infectious Diseases

New Topical Antibiotic May Thwart Resistance Problems

LISBON — Five days of the novel topical antibiotic retapamulin is as effective in the treatment of uncomplicated skin infections as 10 days of an oral cephalosporin, Dr. Lawrence C. Parish reported at the 12th International Congress on Infectious Diseases, Lisbon.

Patients prefer topical over systemic therapy in this setting by a 3-to-1 margin. When retapamulin ointment becomes available—and GlaxoSmithKline anticipates Food and Drug Administration approval later this year—many physicians will prefer this new option, too, predicted Dr. Parish, a dermatologist at Jefferson Medical College, Philadelphia.

Retapamulin is first in a class of antibacterials known as pleuromutilins. They possess a novel mechanism of action and an extremely low propensity for development of bacterial resistance. The drug has excellent activity against gram-positive organisms, including the chief pathogens involved in skin and skin structure infections, such as Staphylococcus aureus and Streptococcus pyogenes and Staphylococcus aureus, including the methicillin-resistant S. aureus strains.

In vitro studies indicate the drug has no target-specific cross resistance to other antibiotic classes, so it’s highly effective against bacteria resistant to antibiotics. Retapamulin’s oral absorption is poor, and has therefore been developed as a topical agent. Allergy to the product is “almost nonexistent,” said Dr. Parish.

He reported on 546 patients with secondarily infected dermatitis who participated in a phase III, randomized, double-blind, double-dummy clinical trial conducted at 109 centers in North America, Europe, Asia, and Africa. The patients, among them 124 children and adolescents, were assigned 2-to-1 to 5 days of retapamulin ointment 1% b.i.d. or 10 days of oral cephalaxin at 500 mg b.i.d. in a noninferiority trial involving physicians from multiple specialties. Dr. Parish served as principal investigator.

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