Streptomycin in T. B. Caecum

Streptomycin is an antibiotic agent produced by Streptomycin Griseus and first isolated by Waksman and his associates at the New Jersey Agricultural Experiment Station, Rutgers University.

Streptomycin is useful, primarily in treating infection due to susceptible gram negative or acid fast organisms, but may at times be of value also in treating infections caused by gram positive organisms or certain gram negative pathogens usually not sensitive to Penicillin, such as Neisser Gonorrhoea, which have not responded to penicillin but are Streptomycin sensitive.

Streptomycin seems more promising than any previous chemotherapeutic agent. Its toxicity is less and its effects better on experimental animal infection than those of the Sulfa compounds. In men prolonged administration is free from serious toxic reactions and it seems possible that some of the reactions which we have secured are due to impurities in certain preparations. The effect on human tuberculosis justifies cautious optimism concerning its usefulness in certain forms of the disease, but prolonged treatment and studies are pre-requisites for serious consideration of its efficiency. Past failures with gold, copper and tuberculon and false promises given by animal experiments with Sulfa indicate the need for caution. If Streptomycin occupies only a temporary place in tuberculosis therapy the resulting increase in biological and chemical knowledge will assist in further advances.

Streptomycin is the first drug to show definite value in treatment of human infections. It was first used in 1944 and since then more than 100 patients have been successfully treated. Streptomycin was found capable of bringing about temporary or prolonged remissions of the symptoms and physical signs in most cases of tuberculous meningitis and miliary tuberculosis.

Case Study:
A Hindu woman named Krishnabai was admitted in our hospital on 24th May, 1948 at 11:50 a.m., in one of the surgical Wards from the Out-patient Department. She was about 17 years old.

She complained of:
- Pain in abdomen for last 6 months followed by a delivery, after which she started getting severe clutching pain in the right hypochondriac region. It was not related to meals and could be relieved by pressure. Along with this she used to have intermittent type of fever and loose stools associated with pain in the epigastrium

General Examination of the Patient:
- Patient was well built, fairly nourished, intelligent and conscious when admitted. Sleep, speech, micturation, T.P.R. etc. were normal. Abdomen was soft. No rigidity but tenderness in the right iliac fossa with a fixed and palpable lump.

Family History:
Patient is married and has a child 1½ years old. Father died of tuberculosis 10 years ago. Mother and brother still living.