

Thrombo-Wellcotest*

Latex slide test for detection of fibrin (ogen) degradation products in serum and urine.

Really complete and at the ready!

Bottles stand upright for ease of identification and accessability.

20 test kit: ordering Code number HA 13.

Sensitivity: is controlled at 2µg/ml and carefully balanced to minimise the possibility of false positives.

Specificity: latex particles coated with antibody raised against fragments D & E. Therefore, sensitive to both early and late FDP.

Note the full count

3.0 ml latex suspension
1 ml positive control serum <u>and</u>
1 ml negative control serum
2 x 25 ml glycine saline buffer
20 vacuum draw FDP collection tubes
1 tube plastic pipettes
1 tube mixing sticks
Reaction tile (6 rings)
1 rubber teat
Direction circular

Kit shelf life: 12 months (2°-8°C)

The kit with the confidence...
... to stand up and be counted

Thrombo-Wellcotest-Supreme in FDP detection



Wellcome Diagnostics

A Division of The Wellcome Foundation Limited Temple Hill Dartford England DA1 5AH

Please supply	me with '	further	details	on
Thrombo-Wello	otest			

Name Position Address Address

Wellcome Diagnostics A Division of The Wellcome Foundation Limited Temple Hill, Dartford, England, DA1 5AH.

Successful antibiotic therapy when host defences are impaired

When Disease Impairs

Neoplastic disease, old age and malnutrition are amongst the factors which may lead to a severe impairment of a patient's natural resistance to infection. The neutropenic patient is unable to mount an adequate inflammatory response at the site of infection and the slightest area of sepsis has the potential for dissemination, often with lethal results.

Intravenous antibiotics must be started on the suspicion of infection. The choice of antimicrobial depends on the likely pathogenic spectrum and the patient's hypersensitivity characteristics. In addition, the efficacy of certain antimicrobials depends on the host's neutrophils, for example aminoglycosides are less effective in the neutropenic patient.

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The Role of Ticar

Ticar, unlike the aminoglycosides, is not dependent on an adequate neutrophil count for its bactericidal activity 1 (Fig. 1).

In the severely ill, this decisive activity, especially when enhanced in synergistic combination with an aminoglycoside, offers a clinically successful outcome. ² The wide combined spectrum of Ticar with an aminoglycoside is shown in Fig. 2.

Additionally, Ticar shares the safety of the penicillins and therefore poses few problems of toxicity to the already compromised patients. 3

When Therapy Impairs

Radiotherapy, anti-neoplastic chemotherapy and immunosuppressive drugs may also reduce the patient's ability to cope with infection by causing neutropenia or impairing neutrophil function, 4 thus rendering life threatening, those infections which would normally be trivial.

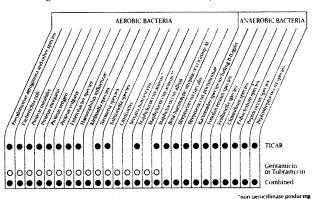
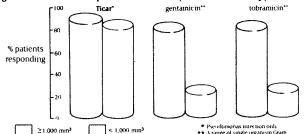


Fig. 2- In vitro spectrum of activity penicillinase producing (most strains of the organisms indicated will be clinically sensitive)

you're right to trust it

Fig. 1 - Relation of neutrophil count to efficacy of antibiotic therapy



Presence of neutropenia at onset of infection

Pseudomonas intection only A range of single organism Gram negative intections including many caused by Pseudomonas

The Role of Ticar

Under these circumstances, the rapid bactericidal activity of Ticar, either alone or in combination, will quickly resolve both aerobic and anaerobic infections even in the absence of competent host defences. In addition Ticar offers the benefit of freedom from ototoxicity and nephrotoxicity 5 and from interaction with cytotoxic therapies which might otherwise cause interruptions of treatment of the patient's primary condition. 6,7

Ticar - widely used, and extensively reported for the treatment of infection in patients with impaired host defences - you're right to trust it.

Prescribing Information: Ticar Infusion: Infusion bottles containing 5g iteracillin as iteracillin disodium together with Water for Injections B.P. and sterile transfer needles in packs of 4 (Price E1148 per bottle). Ticar 5g. 3g and 1g Vials: Vials containing 5g. 3g or 1g treacillin as iteracillin disodium; in packs of 4 (Price E9.76 per vial) packs of 6 (Price E3.86) per vial) and packs of 10 (Price E2.40 per vial) respectively. Prices correct March, 1982. Favourable Hospital Rates are available from the Company. Dosage: ALL DOSAGES BELOW APPEAR AS DALLY TOTALS. WHICH SHOULD BE DIVIDED AND USUALLY GIVEN AT 48 HOURLY INTERVALS. Normal Recommended dosage: Adults 15-20g. Children 200-300mg kg. Acute uncumplicated UTI. Adults 3-4g. Children 50-100mg/kg. Ticar can be successfully given to patients with renal insufficiency. Full recommendations are given on the data sheet. Preparation administration See package enclosure leaflet for full details of preparation. When administered intravenously Ticar should be given by slow injection (5-4 minutes) or infusion over e.g. 30-40 minutes (i.e. at a rate of approximately). So drops per minutely. Contra-indication Preincillin hypersensitivny. Side-effects are uncommon and typical of other injectable penicillins. If pain at the intramuscular injection side is troublesome the vial contents may be dissolved in 0.5% Ignocame hydrochloride solution. In trace cases spontaneous skin and mucous membrane haemorphages due to interferences with normal clotting mechanisms have been reported. Precautions Use of Ticar at less than recommended dosages may permit multiplication of resistant strains of bacteria essentially of 27 minutely 62 drops appear in the internal patients on sodium (approx.) and each 5g vial of Ticar contains 5.3 minutely of sodium (approx.) each 3g vial contains 16.0 minutel of sodium (approx.) and each 5g vial contains 26.7 mmol of socilium (approx...) PL0038/0084. 0118 Further information is available on request to the company



