The Place of Bactrim and Vibramycin in Acute Salpingitis

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INTRODUCTION

Bactrim contains trimethoprim and sulphamethoxasole and has a wide range of bactericidal activity against gram positive and gram negative cocci, E. Coli and proteus organisms. It has been used successfully in the treatment of pelvic infections and urinary tract infections. 1 + 2

Vibramycin (doxycyline) is a relatively new broad spectrum antibiotic synthetically derived from methacycline and is active against both gram positive and gram negative organisms. A comparison was made between the efficacy of Bactrim and Vibramycin in the treatment of acute salpingitis over a 3 year period from 1971 to 1973.

MATERIALS AND METHOD

There was a total of 102 cases. Bactrim was given in 51 and Vibramycin in the other 51.

Patients with acute salpingitis (pyrexia, adnexal tenderness or swelling and offensive or purulent vaginal discharge) were given either Bactrim or Vibramycin. Fifty one cases had Bactrim and the alternate 51, Vibramycin. Patients were started on antibiotics (Bactrim or Vibramycin) prior to the results of the cultures being known. Should the high vaginal swab cultures be sterile, the case was discarded from the trial. Cultures were taken from mid-stream urine specimens and from high vaginal swabs prior to any treatment in all cases.

Blood cultures were performed in those with temperatures of 101°F or more. The doses of the

antibiotics used were as follows:-

1. Bactrim

2 tablets 12 hourly for 5 days each tablet contained 80 mg trimethoprim and 400 mg sulphamethoxasole

2. Vibramycin

200 mg stat orally and 100 mg 12 hourly for 5 days.

If, at the end of 48 hours, the infection did not show signs of subsiding (e.g. settling pyrexia, diminution of pelvic tenderness or vaginal discharge), the case was recorded as a failure and the antibiotic was discontinued. Other antibiotics were selected for the case according to the culture results.

All unfavourable side effects were noted. All patients successfully treated were discharged home and seen again one month later at the follow-up clinic where pelvic examination was performed and urine and vaginal cultures repeated. All patients with severe infection and whose physical condition was poor or whose lives were in jeopardy e.g. bacteraemic shock, were excluded from the trial.

RESULTS

| DIAGNOSIS | BACTRIM | | VIBRAMYCIN | |
|-----------------------|---------|---------|------------|-------|
| | SUCCESS | FAILURE | SUCCESS | FAILU |
| Acute Sal pingitis | 43 | 8 | 37 | 14 |

Successful treatment was indicated by the relief of pelvic pain and tenderness, subsidence of pyrexia, and reduction in the amount of purulent vaginal discharge. Failure was indicated by no significant improvement or deterioration of the patients condition. Out of 51 cases in each series, there were 8 failures with Bactrim and 14 with Vibramycin.

| ORGANISM | BACTRIM | | VIBRAMYCIN | |
|-----------------------------------|---------|---------|------------|---------|
| | SUCCESS | FAILURE | SUCCESS | FAILURE |
| E. Coli | 22 | 2 | 18 | 4 |
| Klebsiella- Aerogenes Group | 6 | 0 | 10 | 4 |
| Staph. Aureus | 4 | 2 | 2 | 2 |
| Streptococcus | 6 | 2 | 3 | 0 |
| Proteus | 3 | 0 | 2 | 2 |
| Pseudomonas | 2 | 2 | 2 | 2 |
| Total | 43 | 8 | 37 | 14 |

The commonest organisms isolated from the vaginal cultures were E. Coli, the Klebsiella-Aerogenes group and the gram positive cocci — staph aureus and streptococcus. Bactrim appeared to be more successful in the treatment of pelvic infection due to these organisms as there were less failures in this group compared with Vibramycin.

SIDE EFFECTS

In the Vibramycin series, 2 patients developed an urticurial rash. In the bactrim series, 3 patients felt nauseated and vomited after taking the tablets and 2 had diarrhoea which stopped when the drug was withdrawn. No other side effects were noticed.

DISCUSSION

Both Bactrim and Vibramycin have been used for the treatment of genitourinary infections with some success -1+2. In our study, however, Vibramycin was not efficacious in the treatment of acute salpingitis as the failure rate was high (27%).

It was found that Bactrim was a better antibiotic to use as it had a higher success rate (85%). There were no significant side effects with both the drugs.

REFERENCES

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