expression, logical thinking, confidence, and anticipation of questions the examiners are likely to ask. In short, it offers the candidate the art of passing examinations. It is an ideal opportunity to learn simple basic medicine and essential knowledge.

**CONCLUSIONS**

It is appreciated that much, perhaps most, that has been written in this article may well be common knowledge, but it seemed to the author that his observations might be helpful to those taking over house physician and registrar posts, and might possibly stimulate thought in others. However, some of the considerations may appear so overwhelming as to be regarded as impracticable. They are certainly not meant to burden the registrar. On the contrary they offer opportunities for a full participation in as many activities as his energy and enthusiasm permit. It is hoped that this review will clarify to some extent what is expected of a registrar, so that he can offer the best service and at the same time derive the most benefit.

I should like to thank Prof. E. B. Adams for reading the manuscript.

**REFERENCES**


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**CLINICAL TRIAL OF A NEW OINTMENT**

T. HEYL, M.MED. (DERM.), Karl Bremer Hospital and the University of Stellenbosch

Several excellent antibiotic-cum-steroid ointments are available today. To these have been added Kanfortrex* containing hydrocortisone 1-0%, kanamycin 0-5% and amphomycin 0-5% in an oil-in-water base. This product for Kanfortrex (Pty.) Ltd. provide an unusually broad spectrum. Amphomycin is mainly active against Gram-positive organisms, including staphylococci and streptococci and is stable in aqueous solution. It is bactericidally active against many Gram-positive, Gram-negative and acid-fast organisms, but relatively inactive against streptococci, pneumococci, pseudomonas and anaerobic organisms. It is ineffective against yeasts and fungi.1 Manifestations of primary irritation or allergic sensitivity to kanamycin are 'singularly' absent.2 The drug is remarkably stable and readily soluble.

Amphomycin is mainly active against Gram-positive organisms, including staphylococci and streptococci and has an antibacterial spectrum similar to bacitracin, but is stable in aqueous solution. It is not irritating and has a low sensitizing potential.3

These antibiotics, therefore, complement each other to provide an unusually broad spectrum.

**TABLE I. RESULTS OF TREATMENT IN 85 PATIENTS**

<table>
<thead>
<tr>
<th>Response</th>
<th>Infective eczema</th>
<th>Atopic eczema</th>
<th>Num. eczema</th>
<th>Stasis eczema</th>
<th>Housewife's hands</th>
<th>Contact dermatitis</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Good</td>
<td>35</td>
<td>6</td>
<td>15</td>
<td>6</td>
<td>3</td>
<td>5</td>
<td>70</td>
</tr>
<tr>
<td>Failure</td>
<td>2</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td></td>
<td></td>
<td>5</td>
</tr>
<tr>
<td>Indifferent</td>
<td>2</td>
<td>3</td>
<td>1</td>
<td>2</td>
<td>2</td>
<td></td>
<td>10</td>
</tr>
<tr>
<td>Total</td>
<td>39</td>
<td>11</td>
<td>16</td>
<td>7</td>
<td>5</td>
<td>7</td>
<td>85</td>
</tr>
</tbody>
</table>

*Brand name, supplied by Bristol Laboratories South Africa (Pty.) Ltd.

**MATERIAL AND METHODS**

Patients were instructed to use the ointment sparingly and to rub it well into the skin two or three times daily. Eighty-five patients were treated, all suffering from some type of eczema, as can be seen from Table I. This also illustrated our results, indicated as good, indifferent or a failure.

**RESULTS**

Out of 85 patients treated, 70 were completely satisfied with the treatment; in 10 the results were considered indeterminate and only in 5 was treatment judged to have failed.

The number of patients with atopic eczema, housewife's hands and contact dermatitis was small, totalling only 23. It seems significant to observe that 7 of the 10 patients with indifferent results came from this small group. On the other hand, only 3 patients with indeterminate results, and 2 in whom the treatment failed were encountered in the 62 patients where infection played some pathogenic role.

**CONCLUSIONS**

The combination of kanamycin and amphomycin with hydrocortisone in an oil-in-water type of ointment base proves to be a satisfying, effective and very useful topical remedy for infective and secondarily infected eczema. No incidence of primary irritation or allergic sensitivity was encountered.

I wish to thank Dr. J. Marshall, who permitted this work to be done in his department, and Dr. R. L. M. Kotze, Medical Superintendent of the Karl Bremer Hospital, for permission to publish.

**REFERENCES**