

THE THERAPY OF ASTHMA



The treatment of asthma resolves itself into a consideration of underlying factors and causes. Often in ASTHMA the underlying cause is not

discoverable or changes from time to time—now irritant dusts, now bacterial infection, etc. The underlying factor is fortunately always the same—bronchospasm.

Thus sometimes causative agents can be removed or mitigated but always the underlying factor—bronchospasm—can be treated, successfully, with FELSOL.

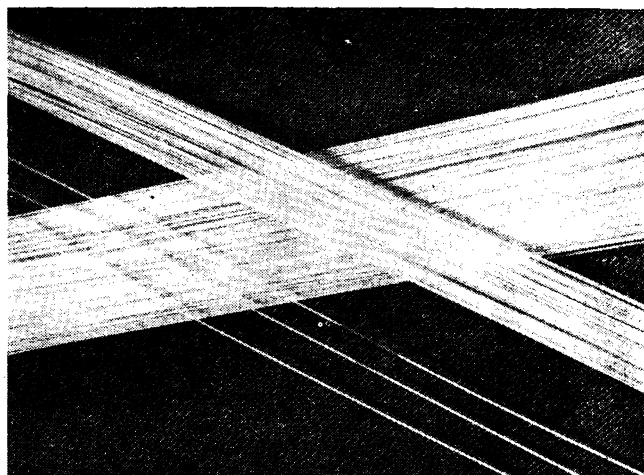
Most cases of Asthma are chronic and demand patience in treatment—persistence with FELSOL will yield the highest possible percentage of successes.

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Phenazone 0.47 Iodopyrine 0.03
Antipyrine Aceto-salicylas 0.40
Caffeine 0.10
Ext. Viscum Album 0.01
Ext. Brachycladli 0.01
Physicians' samples and literature willingly sent on request



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STAPHYLOCOCCI

PENICILLIN and other ANTISEPTICS

The miracle of Penicillin as a means of saving life and combating those Staphylococcal Infections previously so resistant as to be generally fatal, serves to focus attention on the extreme importance of Staphylococci as infecting organisms—an importance which is daily becoming more widely recognised.

Penicillin is not generally available and it is important that other agents highly lethal to Staphylococci should not be overlooked. It is not suggested that these other agents can replace Penicillin in every case for there are conditions for which Penicillin is unique. There are, however, many instances in which other agents than

Penicillin can be employed for the destruction of Staphylococci either therapeutically or as a prophylactic. Such an agent is O-SYL.

O-SYL, unlike many other antiseptic substances, has a lethal action against Staphylococci identical with that for Streptococci. O-SYL is, therefore, par excellence, the antiseptic to remember where staphylococcal infections are in question. Previous announcements have dealt with the several aspects of Staphylococcal Infections less generally recognised by Practising Physicians than by Research Workers. Reprints of such announcements dealing with:—

Staphylococcal Infections of the New Born

Staphylococcal origin of Impetigo

Staphylococcal Food Poisoning

are available on request for members of the Medical Profession.

Proof that O-SYL is non-selective as well as being very highly potent against Staphylococci and Streptococci is found in the following figures:

Index of Phenol Co-Efficient*	
against Staph. aureus	- 3.0
" Haem. Strepts.	- 3.1
" B. typhosum	- 3.7

*Note: Index determined under Rideal-Walker conditions.

O-syl should always be used as directed

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