

Antistaphylococcal antibiotics and chemotherapeutics

Staphylococcal infections are most often skin purulent processes that heal on their own or after surgical intervention. The choice of antibiotic is ultimately guided by the sensitivity of the staphylococcus. The basic drug is **oxacillin**. If oxacillin is contraindicated, **vancomycin**, **lincomycin**, or **1st generation cephalosporins** are recommended.

Antistaphylococcal ATBs include:

- **Glycopeptide ATBs** - vancomycin;
- **Lincosamides** - lincomycin, clindamycin;
- **Penicillins resistant to staphylococcal penicillinase** - oxacillin, methicillin;
- **Cephalosporins 1st generation** - cephalexin, cefazolin; **2nd generation** - cefuroxime, cefaclor

Lincomycin has bacteriostatic to bactericidal effects; its derivative clindamycin has the same effects.
Vancomycin has bactericidal effects.

 There are strains of *Staphylococcus aureus* that are **methicillin-resistant** (MRSA) and **vancomycin-resistant** (VRSA). Such bacteria then cause severe nosocomial infections and increase morbidity and mortality in hospitalised patients.

Links

Related articles

- Antibiotics
- Resistance of clinically important bacteria to the ATB of choice

Source

- BENEŠ, Jiří. *Studijní materiály* [online]. [cit. 2010]. <<http://jirben.wz.cz>>.

Literature

- HAVLÍK, Jiří, et al. *Infektologie: učebnice pro lékařské fakulty*. 2. edition. Praha : Avicenum, 1990. 393 pp. ISBN 80-201-0062-8.
- BENEŠ, Jiří, et al. *Infekční lékařství*. 1. edition. Galén, 2009. 651 pp. ISBN 978-80-7262-644-1
- LINCOVÁ, Dagmar – FARGHALI, Hassan, et al. *Základní a aplikovaná farmakologie*. 2. edition. Praha : Galén, 2007. 672 pp. ISBN 978-80-7262-373-0..