

Editorial Comment

In this article, Guy W. Amsden, PharmD, emphasizes that we must recognize the dissimilarities between the macrolides (erythromycin and clarithromycin) and the azalides (azithromycin), a macrolide subclass, in terms of pharmacokinetics, pharmacodynamics, microbiology, drug interactions, safety, and cost. This review puts these differences in the proper perspective for effective use of these drugs.

Research has shown significant differences in tissue half-life, in vivo potency, and intracellular:extracellular volume distributions of these antibiotics. Although in vitro activity is an important predictor of in vivo effectiveness, prescribing physicians must also be aware of differences in concentration at the site of infection and duration of action above minimal inhibitory concentrations.

The reader should consider the safety, effectiveness, and cost differences with regard to individual pathogens, sexually transmitted diseases, and drug interactions of these drugs. A case in point: physicians should not prescribe the macrolides and terfenadine in patients with preexisting cardiac abnormalities or electrolyte disorders.

This review article will enable clinicians to use these drugs appropriately, safely, and economically.

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