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School of Medicine, became the first
known person in the United States to

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successfully undergo intravenous
bacteriophage ...

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Antibiotics did not exist and phages were
seen as a potentially promising therapy for
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treatments against plague ...

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Sanford M. Simon and his group
understood that patients dying of
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he says. So his group threw the kitchen sink at the ...

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The approach here is to authorize broader use of clinical evidence, patient registries, and other sources of RWE to satisfy post-

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now On Demand! This premier venue discusses the latest research on microscopic organisms and their interaction with the human body.

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Is space continuous or discrete? Is it smooth, without gaps or discontinuities, or

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granular with a limit on how small a distance can be? What about time? Can time be repeatedly divided into ...

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But a rise in the use of potent antimicrobial essential oils has also led to

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Could Help Treat Liver Fibrosis~~

Antimicrobial prescriptions for suspected

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infection then fell \square from 75% pre-guidelines to 42% post-guidelines. And the median duration of antibiotic therapy was also reduced, by 1.3 days ...

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COVID-19 cases; formal guidelines
reduce rates, studies show~~

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To compare this to George Orwell is laughable, said Harrington, R-Sanford. Maine Public Safety Commissioner Michael Sauschuck has insisted that the center gathers open-source information and is ...

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When a patient comes in with a suspected infectious disease, knowledge is power. Now this knowledge is simplified, comprehensive and easy to find. The Pharmacist's Guide to Antimicrobial Therapy and Stewardship puts all the necessary information in one place, including: Evaluating potentially infected

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patients Identifying the infection's
suspected source and related organisms
Comparing the range of anti-infectives
Knowing the factors that impact treatment
Developing an antimicrobial stewardship
program A step-wise approach walks
logically from overall key concepts to
disease- and drug-specific information.

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Disease states are summarized for easy reference. Tables make it easy to evaluate recommended treatment options. In infectious disease management, when answers are seldom black and white, this guide helps pharmacists make confident decisions.

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The 2012 pocket edition is 20% thinner and lighter in weight than the 2011 edition due to new production methods, making the 2012 pocket edition handier than ever. We have also increased contrast of the text for greatly improved readability! The 42nd edition is available in a wide array of formats: the pocket edition, somewhat

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larger spiral bound edition, and larger library edition in print; Apps for iOS and Android devices; and the Web Edition. The digital editions provide us with a platform to update content regularly as developments warrant. The print editions continue to be our annual -snapshot- of the current state of the field of antimicrobial

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therapy. Highlights of the 42nd edition include the following areas: Resistance to antibacterial agents is increasing at an alarming pace. Materials on management of resistant gram-positive organisms, such as MRSA, and multi-drug resistant gram-negative bacilli, such as E. coli, (Tables 2, 5 and 6 in print) have been extensively

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Updated and expanded. There is increasing clinical application of continuous, or prolonged, infusion of antibacterials for those drugs where optimal efficacy correlates with time above MIC of the target bacteria: cefepime, ceftazidime, doripenem, meropenem, piperacillin-tazobactam. Hepatitis C (HCV) infects

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over 175 million people worldwide. Two new HCV protease inhibitors, boceprevir and telaprevir, were approved in 2011 for treatment of HCV. Many more drugs are in development in early 2012.

Antiretroviral therapy options continue to expand with the approval of new drugs, such as rilpivirine, and new combination

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formulations of ARV drugs such as Complera. A newly approved macrolide, fidaxomicin, is included for treatment of moderate to severe *C. difficile* toxin-mediated diarrhea.

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