## THE RHEUMATOID DISEASE FOUNDATION

RT. 4. BOX 137, FRANKLIN, TN 37064 / (615) 646-1030

PERRY A. CHAPDELAINE, SR. Executive Director/Secretary

## Dear Cooperating Physician:

January 24, 1985

One of our donors sent me the address of a tinidazole source in Mexico: *Pharmacia Baja Calle*, Roselia de Sesema, 8 VA Ave. Constitution. No. 1201, Tijuana BC, Mexico; phone 853-777.

Since many patients are accidentally learning of this source for *Tinidex*. I was concerned for its adequacy, and so I sent for a package of tinidazole with slightly in excess of \$12.00 cashier's check. I received enough tinidazole to cover a 6 week treatment, and was surprised to also receive back two American dimes from overpayment.

I asked Jack Uetrecht, M.D., Ph.D., Assistant Prof. Pharmacology and Medicine, Vanderbilt University, to test the pill of different size and color from that sent me by Dr. Paul K. Pybus, of South Africa, and to tell me, other than binders, if they contained the same tinidazole, in the same amount.

Dr. Uetrecht's report is on the reverse of this note.

In addition to research pharmacology, Dr. Uetrecht teaches about metabolites at Vanderbilt University. When I asked about metronidazole's two metabolites: (1-acetic acid-2-methyl-5-nitroimidazole) and (1-[2-hydroxymethyl]-2-hydroxymethyl-5-nitroimidazole) — he pointed out that most of the metronidzole metabolites came about through stomach bacterial/flora action; and that they were often not lasting.

I had previously reasoned that since metronidazole is not effective in vitro against either Acanthameoba or Naegleria, then metabolites of metronidazole had to be the active agents — that perhaps defective enzymes might be responsible for non-response when treating some small percentage.

I asked for references, and he sent the two attached, herewith.

Evidently when you get a patient that has been treated with all the pharmacopoeia, the chances of lack of bacteria flora is very high, and response will be low.

Thought this might explain some things when treating patients.

Cordially,

Perry A. Chapdelaine, Sr.