

POSTER PRESENTATION

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P086: Prospective surveillance from the laboratory of multidrug-resistant bacteria (MDRB) bacteremia

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Introduction

The control of the diffusion of the MDRB in health establishments is a priority.

Objectives

Our work studied the incidence of bacteremia due to MDRB in a hospital environment.

Methods

Microbiological surveillance was led in three departments of a teaching hospital during a period of six months going from April till October 2012 and concerning only blood cultures with diagnostic aim.

Results

During the study period, 123 patients were followed and 30 episodes of bacteremia were described that is 21% of all the blood cultures taken. The average age of the patients was 49 years \pm 18.31 and the sex-ratio 0.66. The majority of the patients (78.6%) were sent by a health care structure, 14.3% came from the place of residence and 7.1% were the object of internal transfer. Thirty six percent of the patients were admitted for a neurological disorder with an average duration of stay of 19.66 days \pm 14.62. Positive blood cultures were attributed to nosocomial infections in 22 cases (75.9%) with an average delay of acquisition of 14.55 days. On the bacteriological plan, the responsible microorganisms were established: Enterobacteriaceae 17 (56.7%) among which 11 (64.7%) producing extended-spectrum beta-lactamases (ESBL), non fermenting Gram-negative bacteria 4 (13.3%), Gram-positive bacteria 9 (30%) among which 4 methicillin-resistant *Staphylococcus aureus* (MRSA). *Klebsiella pneumoniae* was the dominant microorganism 8 (26.7%). The presence of a catheter was identified in 7 cases of bacteremia associated with an

Enterobacteriaceae-producing ESBL. The rate of attack MDRB was 1.54 for 100 admissions and the incidence rate was 1.66 for 1000 patient-days. After bacteremia, the death rate was 61.5%.

Conclusion

The incidence of the MDRB during bacteremia is high in our structure. A program of prevention of the diffusion of the MDRB should be set up, accompanied with a training of nursing staff.

Disclosure of interest

None declared.

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