

ANSORP NOW

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Dear ANSORP Investigators

Greetings from Seoul !

I hope all ANSORP investigators are doing well and wish you and your family the New Year filled with joy and happiness.



This is the **2013 February issue of ANSORP NOW**. It provides update information and current status of ANSORP activities. "ANSORP NOW" is a monthly newsletter, delivered to all ANSORP investigators by e-mail and website of APFID (www.apfid.org). Please read this ANSORP NOW carefully to update our international collaboration. If you have any ideas, opinions, or issues that can be shared with other ANSORP investigators, please send us e-mails or FAX.

I always appreciate your active participation in the ANSORP activities.

Jae-Hoon Song, MD, PhD
Organizer, ANSORP
Founder & Chairman, APFID

2013
9th International Symposium on Antimicrobial Agents and Resistance (ISAAR 2013)
March 13-15, 2013
Kuala Lumpur Convention Centre
Kuala Lumpur, Malaysia
Containing antimicrobial resistance: a global mission to be achieved
Kuala Lumpur

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Welcome Message from Malaysia.

The Malaysian Society for Infectious Diseases and Chemotherapy is proud and honoured to have been selected as the local host for the 9th ISAAR (International Symposium on Antimicrobial Agents and Resistance). This symposium is one of the most important world meeting on the challenges posed by antimicrobial resistance and we are happy to inform you that we have received confirmation from many of the world's leading experts in this field to speak in Kuala Lumpur in March 2013.

We are confident that all delegates to this meeting will benefit enormously from the plenaries and symposia as well as from the poster sessions. We are confident that like at previous ISAARs the sessions will be of a very high quality and there will be very useful sharing of experiences among all participants.

We wish to welcome all the delegates to KLCC, Kuala Lumpur and hope that you will have an enjoyable stay in Malaysia.

We look forward to seeing everyone in Kuala Lumpur in March 2013.

Publication of ANSORP in February 2013

Association of levofloxacin resistance with mortality in adult patients with invasive pneumococcal diseases: a post hoc analysis of a prospective cohort.

Infection. 2013 Feb;41(1):151-157

Kang CI, Song JH, Kim SH, Chung DR, Peck KR, Thamlikitkul V, Wang H, So TM, Hsueh PR, Yasin RM, Carlos CC, Van PH, Perera J; Asian Network for Surveillance of Resistant Pathogens (ANSORP) Study Group.

ABSTRACT

OBJECTIVES: This study was conducted to identify risk factors for mortality and to evaluate the impact of antimicrobial resistance on outcome in adult patients with invasive pneumococcal disease (IPD).

METHODS: A post hoc analysis of an observational cohort study on community-acquired pneumococcal infections was conducted and a total of 136 adult patients with IPD were analyzed in this study.

RESULTS: Pneumonia was the most common type of infection (n = 84, 61.8 %), followed by primary bacteremia (n = 15, 11.0 %) and meningitis (n = 15, 11.0 %). One hundred and three patients (75.7 %) had concomitant pneumococcal bacteremia. The overall 30-day mortality rate was 26.5 % (36/136), and factors associated with 30-day mortality were corticosteroid use, presentation with septic shock, and development of acute respiratory distress syndrome (ARDS) (all P < 0.05). While penicillin and erythromycin resistance were associated with a lower mortality, an association between levofloxacin resistance and increased mortality was found in the univariate analysis;

however, statistical significance was not reached (P = 0.083). Multivariable analysis showed that presentation with septic shock, corticosteroid use, development of ARDS, and levofloxacin resistance were independent factors associated with 30-day mortality. Of the five patients with IPD caused by levofloxacin-resistant *Streptococcus pneumoniae*, three (60 %) died within 30 days of diagnosis.

CONCLUSIONS: Levofloxacin resistance was associated with increased mortality, along with septic shock, prior use of corticosteroids, and development of ARDS, in adult patients with IPD. Our data suggest that the emergence of levofloxacin resistance among invasive pneumococcal isolates is now becoming a challenge for clinicians managing community-acquired bacterial infections.

If you need PDF version of the papers, please contact ANSORP Project Manager (Dr. So Hyun Kim, shkim@ansorp.org).

Interesting papers

What is the relevance of antimicrobial resistance on the outcome of community-acquired pneumonia caused by *Streptococcus pneumoniae*? (Should macrolide monotherapy be used for mild pneumonia?).

Infect Dis Clin North Am. 2013 Mar;27(1):87-97

Low DE

ABSTRACT

Multidrug-resistant pneumococci continue to increase worldwide. Although there are still questions regarding the relevance of β -lactam resistance, the recommendation for the use of the macrolides as monotherapy for mild community-acquired pneumonia should be revisited in view of high rates of resistance, the association of clinical failures with low-level and high-level resistance, and the lack of clinical data to support their need for empirical therapy for the atypicals.

What is the Role of Antimicrobial Stewardship in Improving Outcomes of Patients with CAP?

Infect Dis Clin North Am. 2013 Mar;27(1):211-228

Nussenblatt V, Avdic E, Cosgrove S

ABSTRACT

Community-acquired pneumonia (CAP) is one of the most common infectious diagnoses encountered in clinical practice and one of the leading causes of death in the United States. Adherence to antibiotic treatment guidelines is inconsistent and the erroneous diagnosis of CAP and misuse of antibiotics is prevalent in both inpatients and outpatients. This review summarizes interventions that may be promoted by antimicrobial stewardship programs to improve outcomes for patients with CAP.

We always appreciate your active contribution to ANSORP activities.

If you have any questions, or issues that can be shared with other ANSORP investigators, please let us know them at any time.