

ANSORP NOW

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Dear ANSORP Investigators

Greetings from Seoul !

I hope all ANSORP investigators are doing well.

This is the **2013 October 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.

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Chatham House Conference on AMR : Incentivizing Change towards a Global Solution

The Chatham House Conference, "Antimicrobial Resistance - Incentivizing Change towards a Global Solution" was held on October 3-4 in London under the Chatham House Rule to enable as open a debate as possible.

This conference explored the global problem of antimicrobial resistance (AMR), outline its scale and impacts, and present ideas on what governments, health practitioners, businesses and the international community can do to deal with it. Sessions examined the change in policies, behaviors and incentives needed, including: strategies to overcome the problem of AMR worldwide, how resistant infections may be controlled, how AMR may be affected by the use of antibiotics in food and agriculture, policies and commercial incentives needed to stimulate drug development and discovery, and how to foster a global commitment to tackling the AMR problem (http://www.chathamhouse.org/antimicrobial_resistance).

Dr. So Hyun Kim, ANSORP Project Manager, attended the conference to share information on AMR.



Publication of APFID in October 2013

Capsular gene sequences and genotypes of "serotype 6E" *Streptococcus pneumoniae* isolates

J Clin Microbiol. 2013 Oct;51(10):3395-9

Ko KS, Baek JY, Song JH.

ABSTRACT

To characterize *Streptococcus pneumoniae* "serotype 6E," complete cps loci were sequenced. The capsular genes of "serotype 6E" isolates differed much from those of serotypes 6A and 6B. We identified 10 additional "serotype 6E" isolates, which are not confined to a restricted geographic locality. Most of these "serotype 6E" isolates belonged to sequence type 90 and its single-locus variants. The homogeneity of their genetic background and cps loci suggests a recent origin of the "serotype 6E" isolates.

Interesting papers

Epidemiology of bloodstream infection due to *Acinetobacter baumannii* and the impact of drug resistance to both carbapenems and ampicillin/sulbactam on clinical outcomes

Antimicrob Agents Chemother. 2013 Oct 7. [Epub ahead of print]

Chopra T, Marchaim D, Awali RA, Krishna A, Johnson P, Tansek R, Chaudary K, Lephart P, Slim J, Hothi J, Ahmed H, Pogue J, Zhao JJ, Kaye KS.

ABSTRACT

Acinetobacter baumannii (AB) has become a leading cause of bloodstream infections (BSI) in healthcare settings. Although the incidence of infection with carbapenem-ampicillin/sulbactam resistant (CASR) AB has increased, there is scarcity of studies which investigate BSI caused by CASR-AB. A retrospective cohort study was conducted on adult patients with BSI due to AB and who were admitted to the Detroit Medical Center between January 2006 and April 2009. Medical records were queried for patient's demographics, antimicrobial exposures, comorbidities, hospital stay, and clinical outcomes. Bivariate analyses and logistic regression were employed in the study. 274 patients with BSI due to AB were included in the study: 68 (25%) due to CASR-AB and 206 (75%) due to non-CASR-AB. In multivariate analysis, factors associated with BSI due to CASR-AB included admission with a rapidly fatal condition (OR=2.83, 95% CI [1.27 - 6.32], p-value=0.01), and prior use of antimicrobials (OR=2.83, 95% CI [1.18 - 6.78], p-value=0.02). In-hospital mortality rates for BSI due to CASR-AB were significantly higher than those for non-CASR-AB induced BSI (43% versus 20 %; OR= 3.0, 95% CI [1.60 - 5.23], p-value <0.001). However, after adjusting for potential confounders, the association between BSI due to CASR-AB and increased risk of in-hospital mortality was not significant (OR=1.15, 95% CI= [0.51 - 2.63], p-value= 0.74). This study demonstrated that CASR-AB had a distinct epidemiology compared to more susceptible AB strains; however, clinical outcomes were similar for both groups. Admission with a rapidly fatal condition was an independent predictor for both CASR-AB and in-hospital mortality.

Correlations of antibiotic use and carbapenem resistance in enterobacteriaceae.

Antimicrob Agents Chemother. 2013 Oct;57(10):5131-3.

McLaughlin M, Advincola MR, Malczynski M, Qi C, Bolon M, Scheetz MH.

ABSTRACT

Epidemiological studies have shown a link between carbapenem use and resistance; however, the clinical relationship between antibiotic consumption and the epidemiology of carbapenem-intermediate or -resistant Enterobacteriaceae (CIRE) remains unclear. This study sought to analyze temporal antibiotic consumption trends for relationships with incident CIRE. In total, 310,892 days of therapy and 55 deduplicated CIRE were analyzed. When conservative corrections were applied for multiple comparisons, carbapenem class use and piperacillin-tazobactam use retained significant positive and negative relationships with the incidence of CIRE, respectively.

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

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.