utad Isabel Carvalho - PhD in Veterinary Sciences


Genetic diversity among selected ESBL and
Carbapenem-producing RJebsiella pneumoniae i̊solates from urocultures in aportuguese hospital

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## Antibiotic resistance - A public health problem

ANTIBIOTICS: HANDLE WITH CARE CIN

BEFORE USING ANTIBIOTICS


ANTIBIOTIC RESISTANCE can lead to increased DEATHS. Step into change: THINK TWICE.

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BECAUSE OF MISUSE


BE PART OF THE
Always take the full prescription,
even if you feel better
© Never share or use leftover antibiotics $\boxtimes$ Never buy antibiotics without a prescription

Fig. 1 and 2 - Campaigns related to the two main factors for antibiotic resistance: overuse and misuse of antimicrobials (WHO, 2018)

## Klebsiella pneumoniae

- Major pathogen implicated in nosocomial infections that is known to spread easily;
- Frequently associated with resistance to the highestpriority critically important antimicrobials.

$\checkmark$ Determine the carriage rate of ESBL-producing K. pneumoniae in a hospital in Portugal;
$\checkmark$ Analyze the type of enzymes implicated;
$\checkmark$ Determine the genetic diversity (MLST) among selected carbapenem-and ESBL-producing K. pneumoniae isolates from human urinary infections.
Sampling

General resistance phenotype

- ESBL-production was detected in $26.5 \%$ of the isolates (13/49);
- Most of them carried the gene of CTX-M-15 enzyme ( $\mathrm{n}=10$ );
- It is important to note that all ESBL-positive and negative isolates carried the $K P C_{2 / 3}$ gene and showed carbapenem resistance.


## Resistance phenotype

Table 1 - Resistance phenotype and genotype associated with different sequence types (ST) for selected K. pneumoniae isolates from urocultures in a Portuguese hospital.

| Sample | Date | ESBL ${ }^{\text {b }}$ | Resistance phenotype ${ }^{\text {a }}$ | Resistance genotype | MLST ${ }^{\text {c }}$ |
| :---: | :---: | :---: | :---: | :---: | :---: |
| X2142 | 15/12/2016 | P | AMC, FOX, CTX, CAZ, CHL, CIP, CN, SXT, S, IMP, MRP, ERT | KPC-2/3, SHV-12, TEM | ST147 |
| X2143 | 15/12/2016 | P | AMC, FOX, CTX, CAZ, CIP, CN, SXT, S, TET, IMP, MRP, ERT | CTX-M-15, KPC-2/3, SHV-27, TEM, tetA | ST280 |
| X2157 | 27/04/2017 | P | AMC, FOX, CTX, CAZ, CHF, CIP, CN, SXT, S, IMP, MRP, ERT | CTX-M-15, KPC-2/3, SHV-28, TEM | ST15 |
| X2165 | 25/05/2017 | P | AMC, CTX, CAZ, CIP, CN, SXT, IMP, MRP, ERT | KPC-2/3, SHV-28, TEM | ST15 |
| X2175 | 10/06/2018 | $P$ | AMC, CTX, CAZ, CIP, SXT, S, IMP, MRP, ERT | CTX-M-15, KPC-2/3, SHV-12, TEM | ST15 |
| X2232 | 20/01/2017 | P | AMC, CTX, CAZ, CIP, CN, SXT, S, TET, IMP, MRP, ERT | KPC-2/3, SHV-27, TEM, tetA | ST280 |
| X2168 | 20/05/2018 | N | AMC, CTX, CAZ, CN, SXT, S, IMP, MRP, ERT | KPC-2/3, SHV-11, TEM | ST348 |
| X2173 | 20/05/2018 | N | AMC, FOX, CTX, CAZ, IMP, MRP, ERT | KPC-2/3, SHV-26, TEM | ST34 |

Legend: ${ }^{\text {a }}$ AMC: amoxicillin+clavulanic acid; FOX: cefoxitin; CTX: cefotaxime; CAZ: ceftazidime; CHL: chloramphenicol; CIP: ciprofloxacin; CN: gentamicin; SXT: trimethoprim + sulfamethoxazole; S: streptomycin; TET: tetracycline; IMP: imipenem; MRP: meropenem; ERT: ertapenem;
${ }^{\mathrm{b} P}$ - Positive, N - Negative;
'MLST - MultiLocus Sequence Typing.
$\checkmark$ These findings indicate the genetic diversity among urinary infections isolates in our hospital.
$\checkmark$ The KPC2/3 is the main mechanism of carbapenem resistance in $K$. pneumoniae isolates in the studied period, frequently detected together with CTX-M-15 gene.
$\checkmark$ Three different ST were detected among ESBL-producing $K$. pneumoniae isolates (ST15, ST147 and ST280).

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## Thank you for your attention!


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