Antimicrobial Susceptibility of a Worldwide Collection of Stenotrophomonas maltophilia Tested Against Tigecycline andAgents Used for S. maltophilia Infections

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ABSTRACT
Background: Treatment of S. maltophilia (SM) infections represents a significant challenge due to high levels of intrinsic antimicrobial resistance (R), difficulties in susceptibility (S) testing, and the paucity of treatment options. Consequently, methods to determine optimal therapy.

Methods: 1,586 unique clinical SM strains were collected from 119 medical centers worldwide (2003-2009) and submitted for Tigecycline (TIG) and agents most commonly used to treat SM infections. MICs were determined by CLSI guidelines and interpretative criteria. TIG breakpoints established by the USA-FDA for Enterobacteriaceae were applied for comparison purposes.

Results: Isolates were mainly from bloodstream (51%) and pneumonia (37%). TIG activity was consistent across all regions evaluated with 94.5-95.3% susceptible. In general, ceftazidime (32.6-51.0% susceptible) but its activity was more restricted when tested against isolates from other geographic regions (78.0-83.7% susceptible). Overall, tigecycline showed a greater activity against SM isolates from Latin America (91.3%) but its activity was not assessed when tested against isolates from other geographic regions (78.0-83.7% susceptible). CONCLUSIONS: Tigecycline was the most active compound tested against S. maltophilia isolates from the Asia-Pacific and Latin America (91.3% susceptible) but its activity was not assessed when tested against isolates from other geographic regions.