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ePoster Viewing

Multifaceted approaches to reduce MDR Gram-negative infections

## STENOTROPHOMONAS MALTOPHILIA INFECTIONS AND CONTROLS IN INTENSIVE CARE UNIT

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**Objectives:** *S. maltophilia* known as opportunistic pathogen but now a days it is an emerging nosocomial pathogen. *S. maltophilia*, a potentially dangerous pathogen specifically for the patients with prolonged hospitalization, malignancy, immune suppression and injury of the mucocutaneous barriers. In this study, we report the identification of the *S. maltophilia* infections in the intensive care unit (ICU) and how we take precaution for these infections. **Methods:** There are total 24 beds in two separate ICU's in the Near East University Hospital which reside in the Turkish Republic of North Cyprus. In microbiology laboratory, we used the Phoenix 100 (Becton, Dickinson and Company, USA) automatic system for the identification and susceptibility test. In last three days, six *S. maltophilia* strains were isolated from ICU's patients, therefore we started a surveillance study for a possible hospital infection outbreak. Immediately, we followed a procedure containing isolation and infection control precautions. We took the control culture in the medical device which the ICU's patients used for the respiratory apparatus. We used the 5% sheep blood agar and EMB agar for the culture. Incubation in 37 °C in 24-48 hours. We used the Phoenix 100 system for the identification. **Results:** In one month period, we analysed 30 *S. maltophilia* infections in ICU's unit. All of strains were isolated by the patients' aspirate samples. The susceptibility to trimethoprim-sulfamethoxazole (TMP-SXT), Ceftazidime, Levofloxacin were 5 (16.6%), 20 (66.6%) and 1 (3.3%) respectively. We thought that this infection source may be caused by the medical device or the hospital water source. We found that *S. maltophilia* grew in the water sources of the nebulizer system. **Conclusion:** Immediately, we cautioned the nurse and hospital workers to disinfect respiratory water sources in the period of range by the hospital infection committee. After this caution, we could not isolate any *S. maltophilia* strains in ICU's.