

O250**Oral Session****New old antibiotics: safety and efficacy****OUTCOME OF PATIENT WITH BACTERAEMIA DUE TO ENTEROBACTERIACEAE TREATED WITH FLUOROQUINOLONES ACCRUING TO MIC (REIPI BACTEREMIA-MIC STUDY)**

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Objetives. There is scarce clinical information to support the establishment of breakpoints for susceptibility. The aim of this preliminary analysis is to report the impact of the MIC (EUCAST criteria) of fluoroquinolones: ciprofloxacin (CIP) and levofloxacin (LEV) in the outcome of patients with bacteraemia due to *Enterobacteriaceae*.

Methods. A multicenter (13 Spanish hospitals) prospective cohort of patients with bacteraemia due to *Enterobacteriaceae* who received initial monotherapy with CIP or LEV was performed. Susceptibility testing was performed by microdilution; isolates were classified according to EUCAST MIC distributions—Isolates with breakpoint MIC and 2 dilutions lower were considered to have 'low MIC'; those with even lower MIC were considered to have 'very low MIC'. Outcome variable were clinical response according to strict objective criteria (including SOFA) at day 2, end of treatment (EOT) with the antibiotic studies (EOT-A), and EOT with all antibiotics (EOT-B). Comparisons of percentages were performed by Fisher's exact test. **Results.** 67 episodes were included (44 treated with CIP and 23 with LEV). 48 episodes were caused by *E. coli* (66,7%). Median age was 75 (IQR 30-93). Median Charlson score was 2 (IQR: 0-8). Severe sepsis or shock occurred in 4 (6.1%). 30-day mortality was 4.4% (3 patients). The outcome data are shown in the table 1. No statistically significant differences were found in the strata studied adjusted by severity of illness or source.

Conclusions.

- Not significant differences for early or late clinical response among patients with very low MIC and those with borderline MICs for FQ, were observed in the strata studied. These data support the breakpoint established by EUCAST.

		Fluorquinolones		
MIC		Very Low (n=40)	Low (n=8)	Resistant (n=15)
Improvement at day 2		35 (87.5%)	8 (100%)	13 (86.7%)
EOT-A	Cured	22 (61.1%)	4 (57.1%)	3 (21.4%)
	Improved	13 (36.1%)	3 (42.9%)	8 (57.1%)
	Failure	1 (2.8%)	0	3 (21.4%)
EOT-B	Cured	26 (65%)	5 (62.5%)	11 (78.6%)
	Improved	14 (35%)	2 (25%)	3 (21.4%)
	Failure	0	1 (12.5%)	0
30-day Mortality		0	2 (25%)*	1 (6.3%)

Table1. Crude outcome data according to EUCAST MIC. Data are percentages. * (p<0.05)