

R2680

Abstract (publication only)

**Burkholderia cepacia complex in adult cystic fibrosis patients: species, sensibility and other microorganisms associated**

A. Correa\*, B. Buendia, A. Somodevilla, M. Espínola, C. Cisneros, R. Gómez-Punter, R. Girón (Madrid, ES)

**Objectives:** The Burkholderia cepacia complex (Bcc) species are important opportunistic pathogens with intrinsic antibiotic resistance. They cause devastating infections in patients with cystic fibrosis (CF) and other vulnerable individuals. The aim of this study was to describe the distribution of species, Bcc antimicrobial susceptibility profiles and its relation with other microorganisms isolated in sputum sample isolated from adult CF patients examined in a cystic fibrosis unit at Hospital Universitario de La Princesa (Madrid). **Methods:** From March 2009 to June 2011, all sputum samples from CF patients were cultivated following standard procedures for these samples. Bcc was isolated in the BCSA (B cepacia selective agar) medium. The identification and susceptibility was performed by Walk away (SIEMENS). The determination of the species status of B. cepacia complex strains was carried in a reference laboratory (Carlos III, Majadahonda) by sequencing ribosomal 16S. The susceptibility break points considered were according to the Clinical Laboratory Estandar Institute guideless (CLSI). **Results:** Bcc was isolated from 8 out of 70 patients (11,4%), one of them Bcc was eradicated. 62,5% were women and 37,5% were men. The average age was 26 years old and pulmonary function expressed in FEV1 in average was 64,6%. Four patients (50%) had B. cenocepacia, one patient had B. cepacia, other one had B. multivorans, other one had B. vietnamiensis, other one had B. stabilis and other one patient had B. contaminans. One of them had two different species (cenocepacia and contaminans). 40% of Bcc was susceptible to ceftazidime, 20% to levofloxacin, 87,5% to meropenem and 72,5% to cotrimoxazol. Three patients who were colonized by Bcc were also colonized by Staphylococcus aureus. **Conclusions:** We found a high rate of patients colonized by Bcc. The B. cenocepacia was the most prevalent among the Bcc isolated in CF adult patients. Meropenem and cotrimoxazol showed the best activity and levofloxacin was the less active one against our strains. In this study, we concluded that there is a certain grade of co-colonization by Bcc and S. aureus.