

P2783 Correlation between broth microdilution and disk diffusion methods results when testing ceftaroline against methicillin-resistant *Staphylococcus aureus* using the 5 microgram ceftaroline disk

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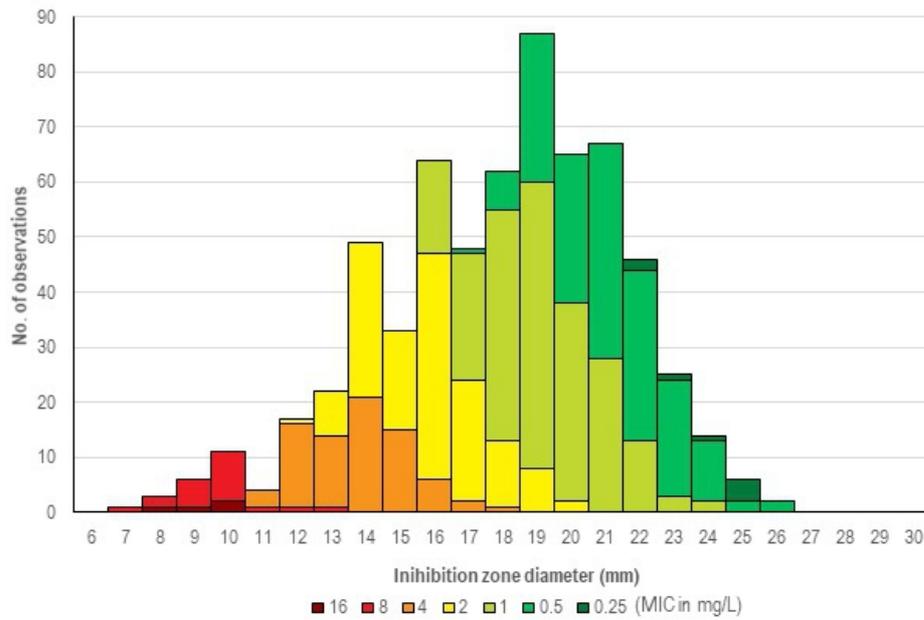
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Background: Discrepancy rates between MIC and disk zones vary according to the percentage of isolates with MIC values within +/-1 doubling dilution of the breakpoints. Although the prevalence of methicillin-resistant *S. aureus* (MRSA) isolates that are ceftaroline-nonsusceptible (MIC ≥ 2 mg/L) is generally low, it may vary substantially by geographic region. We evaluated the disk-MIC correlation when testing ceftaroline against a challenge collection of MRSA.

Materials/methods: We evaluated 158 MRSA isolates, including 106 randomly selected isolates and 52 isolates with decreased susceptibility to ceftaroline (MIC, 1–16 mg/L). Isolates were tested by CLSI broth microdilution method, and disk diffusion (DD) was performed with 5- μ g disks and Mueller-Hinton agar from 2 manufacturers each; thus, there were 4 DD results for each MIC result. EUCAST breakpoints were applied. Optimal DD breakpoints were determined by the error-rate bounded method. Selected isolates (n=51) were characterized by whole genome sequencing.

Results: When applying 2018 (v8.1) EUCAST MIC breakpoints for indications other than pneumonia (≤ 1 / > 2 mg/L for susceptible/resistant), the DD breakpoints that provided the lowest error rates were ≥ 17 / < 14 mm (susceptible/resistant), with very major (VM; false susceptible) errors of 0.0% for $\geq 1+2$ and 0.7% for 1 ± 1 (overall VM error rate of 0.5%), no major (false-resistance), and minor error rates of 0.0% for $\geq 1+2$, 25.9% for 1 ± 1 , and 0.0% for $\leq 1-2$ (17.7% overall). Errors rates for the 2018 EUCAST DD breakpoints of ≥ 20 / < 17 mm (susceptible/resistant) were no VM errors, major error rates of 0.0% for $\geq 1+2$, and 3.9% for 1 ± 1 (2.7% overall), and minor error rates of 0.0% for $\geq 1+2$, 50.5% for 1 ± 1 , and 19.9% for $\leq 1-2$ (40.0% overall). No mutation in the SCCmec was observed in 5 of 15 isolates with ceftaroline MIC results of 2 mg/L, whereas 3 of 11 isolates with ceftaroline MIC results of 1 mg/L exhibited mutations in the penicillin-binding domain (PBD; 1 isolate) or in the non-PBD (2 isolates).

Conclusions: Elevated discrepancy rates were observed between DD and BMD, with a clear tendency of isolates that were intermediate by BMD being categorized as resistant by DD. DD breakpoints should be moved 3 mm downward to provide the lowest inter-method error rates.



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