

**P2574 Differences in infection control and diagnostic measures in France, Germany and Switzerland to control and detect MDRO: first results from the RH(E)IN-CARE network**

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**Background:** Multidrug-resistant organisms (MDRO) are a recognized public health threat. Increasing MDRO rates teach us that single-centre interventions are likely to fail in the long term as patients are commonly transferred between institutions. A transnational approach targeting larger regions is needed to plan overarching interventions. Differences in epidemiology, healthcare systems, socio-cultural context or infection control (IC) and diagnostic measures may hamper such efforts and need to be addressed. We created the RH(E)IN-CARE network in the tristate area between France (Strasbourg), Switzerland (Basel) and Germany (Freiburg) to develop consensus documents about IC and diagnostic measures. Here, we aim to describe differences in diagnostic and IC measures for detection and control of MDRO.

**Materials/methods:** In 2018, we systematically assessed diagnostic algorithms and IC measures implemented for detection and control of different MDROs at three tertiary academic care centers (University Hospital Freiburg, Hôpitaux Universitaires de Strasbourg and University Hospital Basel) serving the German-French-Swiss border region.

**Results:** All three centers have established a culture-based, rather than a nucleic acid amplification-based approach for detection of MDROs (i.e. vancomycin-resistant Enterococci [VRE], methicillin-resistant *S. aureus* [MRSA], ESBL Enterobacteriaceae [ESBL], carbapenemase-producing and carbapenem-resistant Gram-negatives [CPGN]). The French and the Swiss center both collect VRE, MRSA, ESBL and CPGN strains for further typing, while the German center no longer collects VRE and ESBLs. IC measures differed across all centers. In terms of isolation, MRSA and CPR-GN are isolated everywhere, whereas VRE and ESBL are isolated in Strasbourg and Basel only (Table).

**Conclusions:** In contrast to France and Switzerland, Germany does not use very strict IC measures to control VRE and valuable epidemiological insight might be lost due to missing ESBL surveillance. These findings point to important challenges regarding future aims to standardize IC measures across borders.

**Table**

	<b>Screening (high-risk patients on admission)</b>	<b>Contact isolation precautions</b>						
	VRE	MRSA	ESBL	CPGN	VRE	MRSA	ESBL	CPGN
<b>Strasbourg, France</b>	No*	No*	No*	No**	Yes	Yes	Yes	Yes
<b>Freiburg, Germany</b>	No	Yes	No	Yes	No	Yes	No	Yes
<b>Basel, Switzerland</b>	Yes	Yes	Yes	Yes	Yes	Yes	Yes***	Yes

\*only in ICU

\*\*only if contact with abroad health system

\*\*\*except for ESBL-*E. coli*

