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Yoo D<sup>1</sup>, Han J<sup>2</sup>, Song M H<sup>3</sup>, Chun J Y<sup>3</sup>, Choo M<sup>3</sup>

**1.** Eulji University School of Medicine, **2.** Pusan National University Yangsan Hospital, **3.** University of Ulsan College of Medicine, Asan Medical Center

# RISK FACTORS FOR RECURRENT URINARY TRACT INFECTION IN PATIENTS WITH EXTENDED SPECTRUM BETA-LACTAMASE-PRODUCING BACTERIA

#### Hypothesis / aims of study

The prevalence of ESBL-producing bacteria is gradually on the rise<sup>1,2</sup>. But there are few reports about risk factors for recurrent urinary tract infection (UTI)<sup>3</sup> of ESBL-producing bacteria. This study examined the antibiotics sensitivities of organism and risk factors for recurrent extended-spectrum β-lactamase (ESBL) infection in patients with UTI in the tertiary hospital.

## Study design, materials and methods

A total of 88 patients ≥ 19 years who were diagnosed with UTI with ESBL group in department of urology from January 2000 to September 2011 were enrolled. Risk factors were assessed based on age, gender, infectious organism, co-morbidities. Cases were identified through hospital infection control department which deals with ESBL surveillance records. According to the number of infection patients were divided into two groups: a single infection group and recurrent infection group. Factors suspected to be risk factors for the recurrent infection by ESBL-producing bacteria were analyzed by Mann-Whitney U-test and Fisher's exact test.

#### Results

Among total 88 patients with ESBL infection, 68 had a single infection and 20 had recurrent infection. Patients' mean age was  $60.7\pm13.1$  (19-88) years. Bacteria were resistant (including intermediate and resistant) to carbapenem (2.3%), amikacin (22.4%), ciprofloxacin (85.3%), levofloxacin (91.1%), moxifloxacin (90%), gentamicin (75%), piperacillin/tazobactam (15.8%), peperacillin (94.4%) and tremethoprim-sulfamexazole (74.7%). There were no differences in the baseline characteristics between two groups (Table 1).

#### Interpretation of results

Baseline characteristics and comorbidities were not associated with recurrent urinary tract infection by ESBL producing bacteria.

#### Concluding message

There were no associated factors with recurrent urinary tract infection by ESBL producing bacteria.

Table 1. Comparison of baseline characteristics and comorbidities between non-recurrent and recurrent urinary tract infection group with ESBL.

<u> </u>	Non-relapse (n=68)	Relapse (n=20)	<i>p</i> -value
Mean age (yr)	44.8	43.6	0.850
Sex (%)			0.691
Male	26	9	
Female	39	11	
Bacteria (%)			0.514
E.coli	54	15	
K.pneumonia	11	5	
Diagnostic cause (%)			0.675
No symptom	26	8	
Acute cystitis	19	8	
Acute pyelonephritis	1	0	
Urinary tract infection	2	0	
Operation site	2	0	
Symptom (%)			0.847
No	28	8	
Yes	38	12	
WBC count (%)			0.625
Normal	51	15	
Abnormal	17	5	
(<4,000 or >10,000)			
History of ICU admission (%)			0.622
No	61	18	
Yes	4	2	
Previous Ertapenem use (%)			0.848
No	61	19	
Yes	4	1	
General comorbidity (%)			
Cardiac disease	17.6	15.0	0.541
Malignant disease	35.3	45.0	0.297
Immune suppressed disease	16.2	10.0	0.390

Pulmonary disease	7.4	0	0.266
Trauma	13.2	5.0	0.283
Urological comorbidity (n)			
Neurogenic bladder	20.6	15.0	0.229
Benign prostatic hyperplasia	19.1	15.0	0.385
Urinary tract stone	7.4	5.0	0.247
Urinary tract intervention	63.2	80.0	0.187
Urinary tract malignanct	22.1	40.0	0.064
Recurrent UTI	16.2	10.0	0.243

# References

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