

Health PEI ANTIBIOGRAM 2022
(Antibiotic Susceptibility Results of Non-Duplicative Isolates
From All Community And Health Care Settings)

URINE Isolates	Total Number	Nitrofurantoin*	Sulfamethoxazole + Trimethoprim	Fosfomycin	AmpIV/AmoxPO	Amox+Clav.Acid (3 times a day)	Cefuroxime†	Cefixime	Ciprofloxacin	Ceftazidime	Piperacillin+Tazo	Ertapenem	Meropenem	Tobramycin	Vancomycin IV
<i>E. coli</i> ~	1683	99	86	100 (594)	62	90	92 (1038)	93	81^	97	99	100	100	96	
<i>Klebsiella pneumoniae</i>	426	52	96	91		99	90 (277)	97	94	98	99	100	100	99	
<i>Klebsiella oxytoca</i>	104	92	97	88		93	89 (70)	99	96	100	94	100	100	100	
<i>Enterobacter</i> spp.#	128	35	93	87				38	98	84	87	91	100	99	
<i>Proteus mirabilis</i>	211		88	79	94	100	98 (131)	96	99	100	100			91	
<i>Pseudomonas aeruginosa</i>	138								90	93	93		94	100	
<i>Enterococcus faecalis</i>	262	99		95	100	100			67						100
<i>Enterococcus faecium</i>	37														100

^E. coli and Cipro: ER (174) QEH 85%, (188) PCH 85%;

Includes *Klebsiella* (formally *Enterobacter*) *aerogenes*

*Nitrofurantoin activity limited to cystitis. Suitable for use with adequate renal function (CrCl ≥30 mL/min)

~Fosfomycin use is mostly limited to the bladder (cystitis)

†Cefuroxime data from QEH only, isolate tested in parentheses

Shaded boxes = Not routinely reported or recommended Red Boxes = Predictably resistant

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Gram Negative Isolates (Excluding urines)	Total Number	AmpIV/AmoxPO	Amox+Clav.Acid (3 times a day)	Cefuroxime†	Cefixime	Sulfamethoxazole + Trimethoprim	Ciprofloxacin	Cefazolin*	Ceftriaxone	Ceftazidime	Ertapenem	Piperacillin+Tazo	Meropenem	Tobramycin
<i>E. coli</i>	159	54	91	86 (103)	90	91	80	91	93	94	99	99	99	93
<i>Klebsiella</i> spp.	84		98	88 (57)	99	98	94	74	88	98	99	99	100	96
<i>Enterobacter</i> spp.ⁱ	42					88	98		71	81	83	81	93	100
<i>Serratia</i> spp.	28					97	86		97	100	100	100	100	86'
<i>Pseudomonas aeruginosa</i> ^	195						85			96		94	95	99

* not optimal for blood stream infections

†Cefuroxime data from QEH only, isolate tested in parentheses

` For *Serratia* spp., Gentamycin (97% susceptible) is more effective than Tobramycin

ⁱ Includes *Klebsiella* (formally *Enterobacter*) *aerogenes*

Haemophilus influenzae beta-lactamase positive: (27 isolates) 22%

Shaded boxes = Not routinely reported or recommended Red Boxes = Predictably resistant

^ Ceftolozane-Tazobactam available for *Pseudomonas aeruginosa* infections with restrictions. Contact Antimicrobial Stewardship pharmacist or Infectious Diseases for advice

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Gram Positive Cocci	Total Number	AmpIV/AmoxPO	Amox+Clav.Acid (3 times a day)	Cefadroxil, Cephalexin, Cefazolin	Cefuroxime or Ceftriaxone	Doxycycline (Tetracycline)	Sulfamethoxazole + Trimethoprim	Erythromycin	Clindamycin	Vancomycin IV
<i>Staphylococcus aureus</i> [^] (MSSA and MRSA)	1087		87	87	87	97	97	75	78	100
MSSA	951		100	100	100	99	98	77	79	100
MRSA	136					84	92	57	71	100
<i>Staphylococcus lugdenensis</i>	87	98	98	98	98	99	100	93	92	100
<i>Staphylococcus epidermidis</i>	160		48	48	48	81	75		67	99
<i>Enterococcus faecalis</i>	305	100	100			100				100
<i>Enterococcus faecium</i>	55					100				100
Group A <i>Streptococcus</i> (24 months)	74	100	100	100	100			88	89	100
Group B <i>Streptococcus</i>	65	100	100	100	100			64	65	100
<i>Streptococcus pneumoniae</i> [†] (24 months)	36 20	92LD 100HD	92LD 100HD	92	100	67	~88	71	~90	100
MRSA rate 1% of <i>Staphylococcus aureus</i> Blood Cultures 10% of <i>Staph. aureus</i> ER wounds †Low dose (LD) High Dose (HD) in non-central nervous system infections ~2022 Regional data as local data unavailable Shaded boxes = Not routinely reported or recommended Red boxes = Predictably resistant					[^] Daptomycin and Linezolid are available for <i>Staphylococcus aureus</i> infections with restrictions. Contact Antimicrobial Stewardship pharmacist or Infectious Diseases for advice					

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Anaerobic susceptibilities*

Predictably Susceptible:

Amoxicillin+Clavulanic Acid, Piperacillin+Tazobactam, Ertapenem, and Meropenem

Also Predictably Susceptible:

Metronidazole (Except *Actinomyces* or *Propionibacterium* are intrinsically resistant)

Double anaerobic coverage when already on one of above antibiotics is discouraged.

NOT-Predictably Susceptible:

Moxifloxacin, Doxycycline, Cefoxitin or Clindamycin

Note: Most beta-lactamase negative oral anaerobes are susceptible to Amoxicillin.

*Bugs and Drugs (Canada); contact Microbiology Laboratory if testing required

For treatment guidelines and additional information on antimicrobial
susceptibilities see the Health PEI Firstline app

(<https://firstline.org/health-pe/>)