Colonization of Libyan civil war casualties with multidrug-resistant bacteria

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Abstract

In November 2011 51 Libyan war casualties were admitted to the Major Incident Hospital in Utrecht and from there were transferred to 26 other Dutch hospitals. Cultures and clinical data were collected to establish the prevalence of multidrug-resistant (MDR) bacteria in this patient group and to identify the associated risk factors. The prevalence of MDR bacteria was 59% (30/51 patients); extended spectrum β-lactamase-producing enterobacteriaceae were most common (26/51 patients: 51%). The major risk factor for carriage of MDR bacteria was the presence of open wounds at admission to the Major Incident Hospital.

Molecular epidemiology of methicillin-resistant Staphylococcus aureus in Switzerland: sampling only invasive isolates does not allow a representative description of the local diversity of clones

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Abstract

We conducted a molecular study of MRSA isolated in Swiss hospitals, including the first five consecutive isolates recovered from blood cultures and the first ten isolates recovered from other sites in newly identified carriers. Among 73 MRSA isolates, 44 different double locus sequence typing (DLST) types and 32 spa types were observed. Most isolates belonged to the NewYork/Japan, the UK-EMRSA-15, the South German and the Berlin clones. In a country with a low to moderate MRSA incidence, inclusion of non-invasive isolates allowed a more accurate description of the diversity.