and RAPD4, with environmental resource. The major RAPD profile was RAPD1 profile (n=64, 50.4%), which includes 31 (72.1%) MDR isolates with one environmental reservoir. In summary we found three different profiles for MDR strains. Different RAPD profiles suggested the different exogenous or endogenous sources of infection.

**Conclusion:** Our findings highlighted the need for further attention to disinfection inanimate hospital environment to limit transfer of *P. aeruginosa* in this BU; moreover, use of some antimicrobial agents must be restricted.

### PP-017

**The primary investigation of catheter-related infection in severe patients of emergency intensive care unit of Ruijin Hospital**

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**Background:** Infection control is of key importance especially in critically ill patients. We investigated catheter-related infections retrospectively in severe patients in Emergency intensive care unit (EICU) in our hospital in order to adopt effective measures to decrease mortality in severe patients.

**Methods:** The patient’s data (from May, 2008 to January, 2009) were collected retrospectively, including ICU stay, day of catherization (central line, urinary catheter, artificial airway), number of catheter infection and catheter-related bloodstream infection, number of catheter-related urinary system infection, number of hospital-acquired pneumonia (HAP) and ventilator-associated pneumonia (VAP), and microbiological culture results of sputum at different stages, respectively. Catheter-associated infection rate (per 1000 device-days) was calculated according to the National Nosocomial Infections Surveillance (NNIS) System.

**Results:** A total number of 153 severe patients were enrolled in the study and the total hospitalization day was 3023. Catheter-associated infection rate (per 1000 device-days) was 6.89 for central catheter, 8.91 for urinary catheter and 33.11 for artificial airway. The incidence rate of HAP is 21.57%, of which 44.12% was VAP. 84.62% of patients received mechanical ventilation more than 7 days presents VAP. 84.62% of patients received mechanical ventilation more than 7 days presents VAP. The main pathogens of HAP were gram negative bacteria, 81.64% (80/98), followed by gram positive bacteria, 81.64% (18/98), which was mainly composed of MRSA (+) bacteria (77.78%). Non-fermentation gram negative bacilli (NFGNB) were the major component of gram negative bacteria (67.5%).

**Conclusion:** Our rates of catheter-associated infection (per 1000 device-days) are higher than the corresponding NNIS rates in 2008.

### PP-018

**Botryomycosis as a umbilical nodule, as a differential diagnosis for umbilical hernia**

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**Case Description:** A 54 year old obese woman presented with chronic periumbilical pain. An ultrasound showed a nodule in the umbilicus, presumably an umbilical hernia. During surgery an abscess in the aponeurosis, under the umbilicum was identified. Transoperatory frozen section examination showed no cellular displasia. Definitive anatomopathological examination showed bacterial and fibrous tissue, consistent with botryomycosis. Gram positive cocci strains and gram negative bacillus were isolated from the secretion, no bacteria growth was identified in cultures.

**Revision of literature:** Botryomycosis is a rare bacterial chronic infection, mostly seen in skin and cutaneous tissue, but also described in lung, liver, spleen and other viscera. It is more frequently associated to imunosupressed individuals, such as AIDS, alcoholism and diabetes mellitus.

**Poster Presentations S55**

**PP-020**

**A comparative study of therapeutic effects of Zataria Multiflora vaginal cream and metronidazole vaginal gel on bacterial vaginosis**

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**Introduction:** Bacterial vaginosis (BV) is one of most prevalent complications among reproductive aged women. Metronidazole prescription which is considered as the first line treatment of BV