# ANTIBIOTIC SUSCEPTIBILITY PROFILES

(Compiled January 2019, based on 2018 annual data)

(0)	S					1.	URINE					
pathla	Staphylococcus aureus	Streptococcus pyogenes (Gp A Haemolytic Strep.)	Streptococcus pneumoniae	Moraxella catarrhalis	Haemophilus influenzae	Pseudomonas aeruginosa	E. coli	Klebsiella species	Proteus mirabilis	Enterobacter / Serratia spp.	Enterococcus species	Staphylococcus saprophyticus
Number of Isolates	13982		598		1706	1636	9522	1275	548	406		818
PENICILLIN		S	97 <sub>d</sub>	R	R	R						
FLUCLOXACILLIN	88	S		R	R	R						
AMOXYCILLIN		S	97 <sub>e</sub>	R	77	R	54	R	91	R	S	V g
AMOX / CLAV	88 a	S	97 <sub>e</sub>	S	93	R	89	91	99	R	S	S <sub>g</sub>
CEPHALEXIN	88 a	S		S		R	94	94	99	R	R	Sg
COTRIMOXAZOLE	99		74	S	79	R	75 h	86 h	83 h	91 <sub>h</sub>	R	93 h
ERYTHROMYCIN	88	Sc	84		Rf	R						
CLINDAMYCIN	<b>88</b> b	S c	<b>84</b> b			R						
TETRACYCLINE			84	S	99	R						
GENTAMICIN						96	S	S	S	S		
CIPROFLOXACIN						95	94	95	99	97		
NITROFURANTOIN						R	99	88	R	*i	S	100
TRIMETHOPRIM						R	75	86	83	91	R	93

The percentage of organisms susceptible to an antibiotic is recorded (with the sample size in the first row of the table). (e.g. *Staphylococcus aureus* vs. flucloxacillin 88% susceptible, n = 13982)

S = Not specifically tested but known to be ordinarily susceptible.

R = Organism resistant or antibiotic inappropriate V = Variable susceptibility.

- a. S. aureus susceptible to flucloxacillin can be considered susceptible to amoxycillin-clavulanate and cefaclor. Methicillin resistant Staphylococcus aureus (i.e. MRSA) are resistant to all beta-lactam antibiotics (penicillins, cephalosporins, carbapenems).
- b. Clindamycin susceptibility is extrapolated from the erythromycin result.
- c. Streptococcus pyogenes are universally susceptible to penicillin but resistance to erythromycin/clindamycin is seen, (in an estimated 5% of isolates).
- d. S. pneumoniae susceptible to penicillin can be considered susceptible to amoxycillin, amoxycillin-clavulanate, cefaclor, cefuroxime, ceftotaxime, ceftotaxime, ceftodoxime, imipenem and meropenem. Confirmation of penicillin resistance (reduced susceptibility) in S. pneumoniae requires MIC testing. (Please note this figure includes both penicillin susceptible and intermediately susceptible isolates). S. pneumoniae isolates intermediately susceptible to penicillin are resistant to cefaclor. In 2018 our S. pneumoniae isolates demonstrated the following pattern of susceptibility to penicillin: 64% = Susceptible, 33% = Intermediate, 3% = Resistant. However, of the resistant strains only a few had a penicillin MIC > 4mg/L, and penicillins (amoxycillin) are effective against strains with MIC <= 4mg/L, unless they are causing meningitis.
- e. Amoxycillin and amoxycillin-clavulanate susceptibility is extrapolated from the penicillin result.
- f. Erythromycin is not recommended for treatment of infections thought to be due to H. influenzae.
- g. S. saprophyticus causing urinary tract infections will usually respond to amoxycillin-clavulanate and cephalosporins. (Up to 50% of isolates are resistant to amoxycillin).
- h. Cotrimoxazole susceptibility is extrapolated from the trimethoprim result.
- i. Please note: Serratia spp. are intrinsically resistant. Enterobacter spp. was 76% susceptible in 2018.

#### MOST LIKELY BACTERIAL PATHOGENS IN COMMON CONDITIONS

## 1. RESPIRATORY INFECTIONS

- Pharyngitis *Streptococcus pyogenes* (Gp A Haemolytic Strep.)
- Otitis Media/Sinusitis
  - Streptococcus pneumoniae Haemophilus influenzae Moraxella catarrhalis
- Acute exacerbation of Chronic Bronchitis
  - Streptococcus pnuemoniae Haemophilus influenzae Moraxella catarrhalis
- Community Acquired Pneumonia Streptococcus pnuemoniae
  - Haemophilus influenzae Mycoplasma pnuemoniae Chlamydia pneumoniae Staphylococcus aureus (Legionella sp)

### 2. URINARY TRACT INFECTION

- E. coli
Proteus mirabilis
Other Coliforms (e.g. Klebsiella,
Enterobacter).
Enterococcus sp.
Staphylococcus saprophyticus.

### 3. IMPETIGO / CELLULITIS

- Staphylococcus aureus Streptococcus pyogenes