



Antimicrobial resistance among Salmonella Typhi and Paratyphi A isolates – Preliminary results from the Surveillance for Enteric Fever in Asia Project (SEAP)

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11th International Conference on Typhoid & other Invasive Salmonellosis

March 26-28, 2019 Hanoi, Vietnam



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Date, Kashmira (CDC/DDPHSIS/CGH/GID), 3/23/2019

Background

- Typhoid and Paratyphoid A are one of the most common bacteremic illnesses in South Asia
- Growing resistance or reduced susceptibility to antibiotics limit the treatment options
- SEAP is a multi-country prospective surveillance study for enteric fever and antimicrobial resistance (Pakistan, Nepal, Bangladesh)

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Objective

To identify antimicrobial resistance in *Salmonella* Typhi and Paratyphi isolates to different antibiotics

Methods

- Hospital and laboratory based surveillance
 - ✓ Inpatient
 - ✓ Outpatient
 - ✓ Laboratory network
 - ✓ Surgical cases

Study duration and setting

- Duration: September 2015 Jan 2019
- Nepal & Pakistan all age, Bangladesh pediatric population

Eligibility Criteria

Inclusion Criteria

 A patient presenting to an outpatient department with a self-reported history of fever for ≥3 consecutive days and living in the defined catchment area

OR

 A patient admitted to the hospital with a clinical suspicion or a confirmed diagnosis of enteric fever at any time during hospitalization

OR

A patient with blood culture positive for Salmonella Typhi or Paratyphi
 OR

 A patient with "non-traumatic ileal perforations", even in the absence of laboratory confirmation

AND

A patient (or parent/guardian) willing and able to provide informed consent

Exclusion Criteria

 Refusal to provide sample for blood culture or informed consent not provided

Case definitions

- Suspected Case: Illness in a patient presenting to the hospital outpatient clinic or admitted to the hospital with the inclusion criteria or a provisional or discharge diagnosis of enteric fever; negative blood cultures or blood cultures were not obtained.
- Laboratory-confirmed Case: Illness in a patient with isolation of Salmonella Typhi or Paratyphi A, B or C from blood culture.

Antimicrobial susceptibility testing

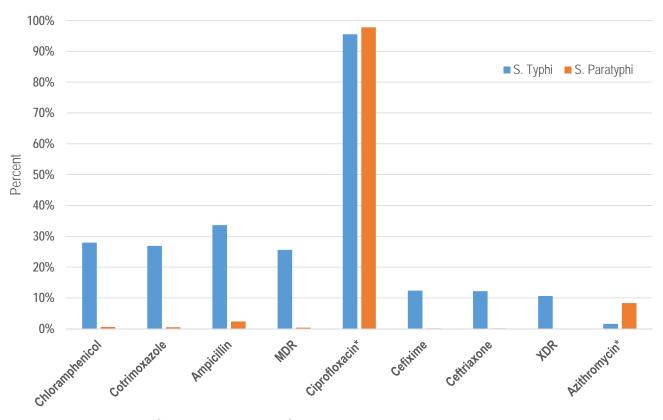
- Identification of *S.* Typhi and Paratyphi
- AST performed through disc diffusion using latest CLSI guidelines
 - ✓ Ampicillin
 - ✓ Chloramphenicol
 - ✓ Co-trimoxazole
 - ✓ Ciprofloxacin
 - ✓ Ceftriaxone
 - ✓ Azithromycin

Definitions

- MDR = resistance to Ampicillin, Co-trimoxazole and chloramphenicol
- XDR = MDR plus resistance to flouroquinolone (ciprofloxacin) and cephalosporin (ceftriaxone)
- Flouroquinolone resistance

Results

Resistance of S. Typhi and Paratyphi isolates, September 2015- January 2019 (n=6,126)

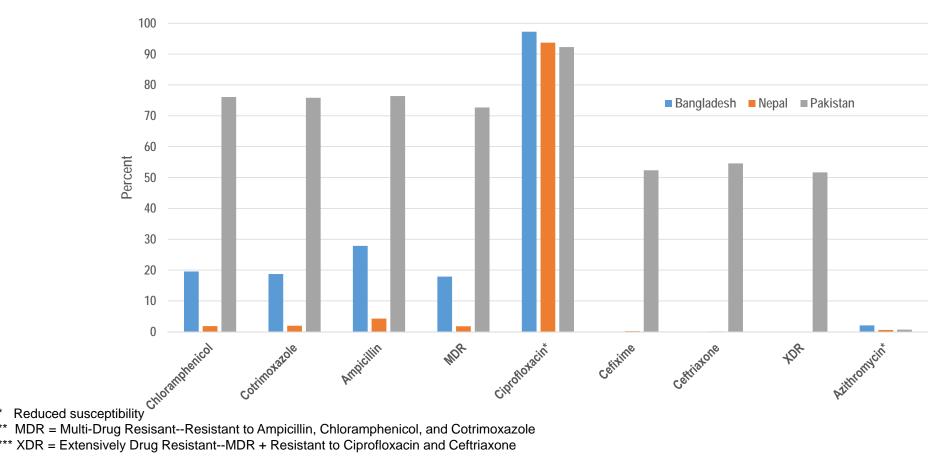


Reduced susceptibility

^{**} MDR = Multi-Drug Resisant--Resistant to Ampicillin, Chloramphenicol, and Cotrimoxazole

^{***} XDR = Extensively Drug Resistant--MDR + Resistant to Ciprofloxacin and Ceftriaxone

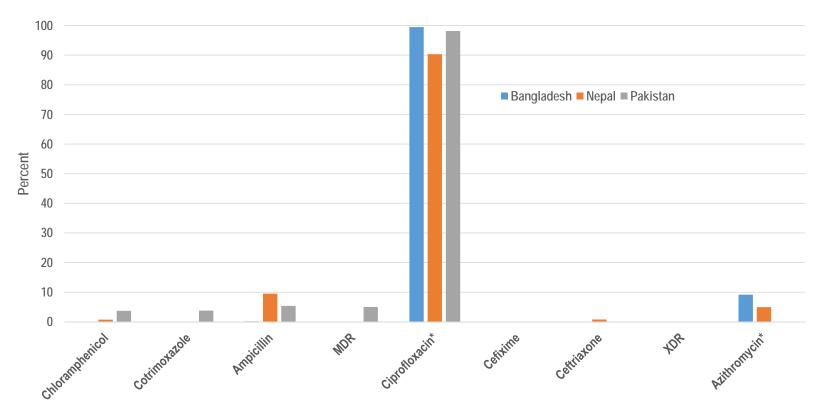
Resistance of S. Typhi isolates by country, September 2015-January 2019 (n=6,126)



^{**} MDR = Multi-Drug Resisant--Resistant to Ampicillin, Chloramphenicol, and Cotrimoxazole

^{***} XDR = Extensively Drug Resistant--MDR + Resistant to Ciprofloxacin and Ceftriaxone

Resistance of S. Paratyphi isolates by country, September 2015-January 2019 (n=855)

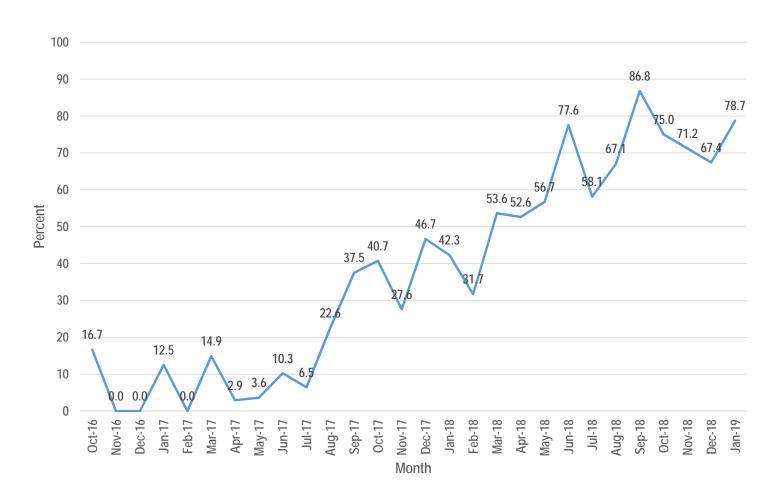


^{*} Reduced susceptibility

^{**} MDR = Multi-Drug Resisant--Resistant to Ampicillin, Chloramphenicol, and Cotrimoxazole

^{***} XDR = Extensively Drug Resistant--MDR + Resistant to Ciprofloxacin and Ceftriaxone

Trend of ceftriaxone resistance *S.*Typhi isolates in Pakistan, 2017 – January 2019 (n=1,252)



Conclusion

- Reduced susceptibility to fluoroquinolone among S. Typhi and
 Paratyphi A in all three countries
- Resistance to ampicillin, cotrimoxazole and chloramphenicol is relatively lower in Nepal and Bangladesh as compared to Pakistan
- Ceftriaxone resistance is rapidly increasing in Pakistan
- Emergence of reduced susceptibility to azithromycin in Bangladesh

Acknowledgements

Site Pls

- Jason Andrews, Stanford University
- Farah Qamar, Aga Khan university
- Samir Saha, CHRF

Collaborators

- Ashraf Memon from KGH
- Khalid from KGH
- Nasir Saddal from NICH
- Saqib Qazi from AKUH
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Bill & Melinda Gates foundation

Partner Hospitals in Pakistan, Nepal and Bangladesh

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Thank You

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CLSI cut-off points for AMR

| S# | Drug Name | Sensitive | Intermediate | Resistant |
|----|-------------------------------------|-----------|--------------|-----------|
| | | | | |
| 1 | Ceftriaxone | ≥ 23 | 20 to 22 | ≤ 19 |
| 2 | Cefixime | ≥ 19 | 16 to 18 | ≤15 |
| 3 | Ciprofloxacin | ≥31 | 21 to 30 | ≤ 20 |
| 4 | Ampicillin | ≥ 17 | 14 to 16 | ≤13 |
| 5 | Chloramphenicol | ≥ 18 | 13 to 17 | ≤ 12 |
| 6 | Cotrimoxazole | ≥ 16 | 11 to 15 | ≤ 10 |
| 7 | Azithromycin | ≥ 13 | N/A | ≤ 12 |
| 8 | Imipenem (If Ceftriaxone Resistant) | ≥23 | 20-22 | ≤ 19 |

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