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实验研究

神经重症监护室下呼吸道感染患者痰分离病原菌及其耐药性监测

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摘要:

目的了解某院神经重症监护室(NICU)医院下呼吸道感染病原菌分布及其耐药情况,为临床抗感染治疗提供依据。 方法按照统一标准采集该NICU 2005年10月—2008年12月间下呼吸道感染患者的痰标本,进行细菌培养、鉴定及 药敏试验。结果共分离病原菌567株,其中革兰阴性(G-)杆菌359株(63.32%),革兰阳性(G+)球菌99株 (17.46%),真菌109株(19.22%)。多重耐药菌多见,肠杆菌科中的大肠埃希菌与肺炎克雷伯菌产超广谱B 内酰胺酶株检出率分别为73.68%(28/38)、62.30%(38/61);非发酵菌中多重耐药鲍曼不动杆菌分离率逐年 增高,呈现严重流行态势,2008年耐碳青霉烯鲍曼不动杆菌占43%。金黄色葡萄球菌中,耐甲氧西林株达87.10% ▶加入引用管理器 (81/93),均对万古霉素和替考拉宁敏感。结论该NICU下呼吸道感染病原菌以G-杆菌为主,细菌耐药现象严 重, 需加强细菌流行病学监测, 合理应用抗菌药物, 以减少耐药。

关键词: 神经系统疾病: 重症监护室: 医院感染: 病原菌: 抗药性 微生物: 下呼吸道感染

Pathogens from patients with lower respiratory tract infection in neurological intensive care unit and surveillance on antimicrobial

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Abstract:

ObjectiveTo investigate the distribution and antimicrobial resistance of clinical isolates from patients with lower respiratory tract (LRT) infection in neurological intensive care unit (NICU), so as to provide the basis for clinical treatment. Methods Sputum samples of patients with LRT infection in NICU from October, 2005 to December, 2008 were collected according to the standard criteria for routine bacterial culture, identification and antimicrobial susceptibility test. ResultsA total of 567 pathogenic strains were isolated from 168 patients, 359 (63.32%) of which were gram negative bacilli, 99(17.46%) were gram positive cocci, and 109 (19.22%) were fungi. Multi drug resistant (MDR) bacteria were common, 73.68% (28/38) of Escherichia coli and 62.30% (38/61) of Klebsiella pneumonia were extended spectrum g lactamase producing strains respectively; carbapenem resistant rate of Acinetobacter baumannii was 43% in 2008, 87.10% (81/93) of Staphylococcus aureus were methici Ilin resistant strain, all were sensitive to teicoplanin and vancomycin. ConclusionGram negative bacteria are the most common pathogens in patients with LRT infection in this NICU, drug resistance is severe, surveillance on antimicrobial resistance should be enhanced and rational use of antimicrobial agents should be advocated to reduced drug resistance.

Keywords: neurosystem diseases intensive care unit nosocomial infection pathogen drug resistance, microbial lower respiratory tract infection

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