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Antimicrobial susceptibility among aerobic bacteria Intensive Care Unit of a tertiary regional hospital in Tobago.

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Abstract: Background: There are variations in the epidemiology, antimicrobial susceptibility patterns of infections in the intensive care health care facility to another, hospital to hospital, and country to country undertaken to determine and document the frequency of occurrence and their antibiotic susceptibility pattern from clinical specimens received at a tertiary regional hospital in Trinidad and Tobago.

Materials & methods: Microbial isolates from patients admitted to the Williams Medical Sciences Complex over a 4-year period were investigated.

systems and Standard microbiological methods including BACTEC Dickinson Microbiology Systems), MicroScan Walk Away 96 SI (modified Kirby Bauer disc diffusion and Etest were used. Clinical patients admitted to the ICU during the study period were processed and 638 positive cultures were recovered from 638 positive cultures.

Results: The most frequent pathogens were recovered from respiratory tract infections while the *Enterobacteriaceae* groups of organisms were the most frequent. Except for *Acinetobacter* species that exhibit a consistent multiple drug resistance, all the pathogens showed variable susceptibility to the readily available antibiotics in the country. A 4.2% incidence rate of ESBL producers was encountered among *Pseudomonas pneumoniae* and *E. coli* isolates from the unit. Methicillin-resistant *S. aureus* is on the decline in this unit, but we observed the emergence of genetically resistant methicillin-resistant *S. aureus*.

Conclusions: Although *Enterobacteriaceae* and *Pseudomonas aeruginosa* are the most frequent isolates, there are still sufficient treatment options for these organisms in the unit. Continuous surveillance and monitoring for resistant pathogens in the unit should still be paramount especially with the establishment of the National Oncology Center and National Organ Transplant Center. There is an equal need for further studies on the determination of antibiotic resistance in this unit.

Key words: [ICU](#), [Trinidad & Tobago](#), [Enterobacteriaceae](#), [Pseudomonas aeruginosa](#), [MRSA](#)

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