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摘要:

目的了解昆明市第一人民医院产超广谱 β -内酰胺酶(ESBLs)大肠埃希菌的检出及耐药情况。方法对该院2006年1—12月临床分离的293株大肠埃希菌,用表型确证试验检测ESBLs,K-B琼脂纸片扩散法做药物敏感试验。结果293株大肠埃希菌中,检出产ESBLs菌168株(57.34%)。各类标本中,产ESBLs率以痰标本分离株(64.71%)最高,其次为血液(62.50%)和脓液标本(57.14%);各科室中,产ESBLs率以重症监护室(ICU)分离株(65.22%)最高,其次为内分泌科(65.00%)和肿瘤科(63.33%)。除亚胺培南和阿米卡星外,产ESBLs菌对其他14种常用抗菌药物的耐药率均明显高于非产ESBLs菌(均P<0.01);产ESBLs菌株不仅对青霉素、头孢菌素、氨曲南等抗生素广泛耐药,同时对喹诺酮类、氨基糖苷类、磺胺类等多种抗菌药物耐药,仅对亚胺培南、阿米卡星的耐药率<5%(分别为0.00%、3.30%)。结论昆明市第一人民医院临床分离大肠埃希菌产ESBLs率较高;产ESBLs菌株对临床常用多种抗菌药物严重耐药,可经验选用的药物十分有限。临床医生应根据病原菌药敏结果合理选用抗菌药物,以提高治疗效果。

关键词: 大肠埃希菌 超广谱 β -内酰胺酶 抗药性 微生物 抗菌药物 合理用药

Antimicrobial resistance of ESBLs producing Escherichia coli FREE

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Abstract:

Objective To investigate the antimicrobial resistance of extended spectrum β -lactamases(ESBLs) of *Escherichia coli* (*E. coli*) isolated from the First People's Hospital of Kunming. **Methods** 293 strains of *E. coli* were isolated between January and December, 2006, ESBLs of *E. coli* were confirmed by phenotype confirmatory test, antimicrobial susceptibility were detected by Kirby-Bauer method. **Results** 168 of 293 (57.34%) strains of *E. coli* were ESBLs producing strains. The main specimens isolated ESBLs producing strains was sputum (64.71%), the next were blood (62.50%) and pus (57.14%); Among departments, intensive care unit had the highest isolation rate of ESBLs producing *E. coli*(65.22%), the next were department of endocrinology(65.00%) and oncology(63.33%). Except imipenem and amikacin, the resistant rates of ESBLs producing strains against the other 14 antimicrobial agents were significantly higher than non ESBLs producing strains (all P<0.01); ESBLs producing strains were resistant to penicillins,cephalosporins, aztreonam, quinolones, aminoglycosides and sulfonamides, the resistant rate to imipenem and amikacin was both <5%, which was 0.00% and 3.30% respectively. **Conclusion** The prevalence of ESBLs is high among clinical *E. coli* isolates in the First People's Hospital of Kunming; ESBLs producing strains are highly resistant to multiple antimicrobial agents, clinicians should choose antimicrobial agents rationally.

Keywords: *Escherichia coli* extended spectrum β -lactamases; drug resistance, microbial antimicrobial agents rational use of drug

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