

## عنوان مقاله:

Comparison of Antimicrobial Resistance Pattern in Hospital Versus Community-acquired Infections in Pediatric Patients

## محل انتشار:

مجله علمی پژوهشی دانشگاه علوم پزشکی زنجان, دوره 27, شماره 123 (سال: 1398)

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# خلاصه مقاله:

Background & Objective: Nosocomial infection is one of the most daunting challenges to the global health care system. The current study aimed to compare the antimicrobial resistance pattern in hospital versus communityacquired infections in pediatric patients in Besat Hospital, Hamadan, Iran. Materials & Methods: The current study was carried out on all patients with a hospital-acquired infection (HAI) who were hospitalized in Besat Hospital, Hamadan, Iran, for FA hours. Moreover, patients with community-acquired infections (who had an infection before hospitalization) were also included in the current study. E-test and Kirby-Bauer disk diffusion test were utilized to determine antimicrobial susceptibility patterns according to the report test/CLSI M100/SYY guidelines. Antibiotic resistance patterns in both patients with hospital and community-acquired infections were separately recorded. Subsequently, the obtained data were analyzed by SPSS 19. Results: A number of FT and PA patients showed HAI and CAI, respectively. The most common HAI and CAI were blood-stream infection and urinary tract infection (UTI) with a prevalence of ۶۹.۸%, and ۷۳.۵%, respectively. The most frequent organisms isolated from CA and HA-infections were E. coli and Staphylococcus aureus with a prevalence of \$Y.9%, and  $\mathcal{W}$ . 1%, respectively. The highest level of resistance in Gramnegative bacteria was observed against cotrimoxazole and ceftriaxone. Furthermore, the highest resistance in Grampositive organisms was against clindamycin. The prevalence rates of MRSA isolates in HAI and CAI were reported as FF.Y% and FF.9%, respectively. Conclusion: The obtained results indicated the high resistance to several antibiotics that can be used as promising choices in the treatment of both CA and HA-infections. It is recommended that region-.specific monitoring studies be carried out in order to assist the clinician to select the accurate empirical therapy

**کلمات کلیدی:** Community-acquired infection, Drug resistance, Nosocomial infection, Pediatric

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