

عنوان مقاله:

Prevalence of Multidrug-Resistant, Extensively Drug-Resistant and Pandrug-Resistant Uropathogens Isolated From Urinary Tract Infection Cases in Dhaka, Bangladesh

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خلاصه مقاله:

Background: The resistance pattern of uropathogens is increasing very rapidly because of the unsorted, insufficient, and incoherent usage of antibiotics. The aim of this study was to evaluate the prevalence of multidrug-resistant (MDR), extensively drug-resistant (XDR), and pandrug-resistant (PDR) uropathogens which were isolated from the urinary tract infection (UTI) cases in Dhaka, Bangladesh. **Methods:** In this cross-sectional study, a total of 21167 urine samples were collected from January 2016 to December 2018, followed by using conventional methods, as well as Kirby-Bauer disc diffusion method for urine culture and susceptibility, respectively. Finally, SPSS software was utilized to analyze the obtained data. **Results:** From among 21167 urine samples, 2469 (11.66%) cases were bacteriologically positive. In UTI cases, males proportion were higher compared to females (in ≤ 10 and > 60 to ≤ 90 years age groups) and females in the age groups between 10 and 60 and > 90 years suffered more than males ($P < 0.05$). In addition, 172 (7.0%), 1337 (54.2%), and 145 (34.2%) cases were identified as XDR, single drug-resistance (SDR), and nondrug-resistance (NDR), respectively. Although the number of female XDR cases was higher than males, the percentages of male cases were higher compared to female cases in this study. The most predominant drug resistance cases (18.7%) were found in the age group between 21 and 30 years ($P < 0.05$). Eventually, the isolates of *Escherichia coli* were the most prevalent cases that carried XDR (5.4%) and MDR (39.7%). **Conclusions:** In general, it is extremely alarming to increase XDR and MDR uropathogens. This bacterial resistance can be prevented through control measures that limit the spread of resistant bacteria and the regular monitoring of this resistance phenotype of uropathogens, along with the rational use of antimicrobial therapy.

کلمات کلیدی:

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