

Antimicrobial susceptibility testing of *Klebsiella pneumoniae*

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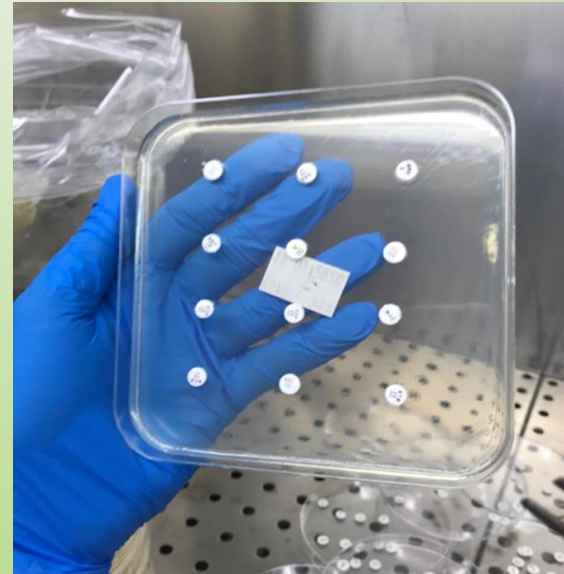
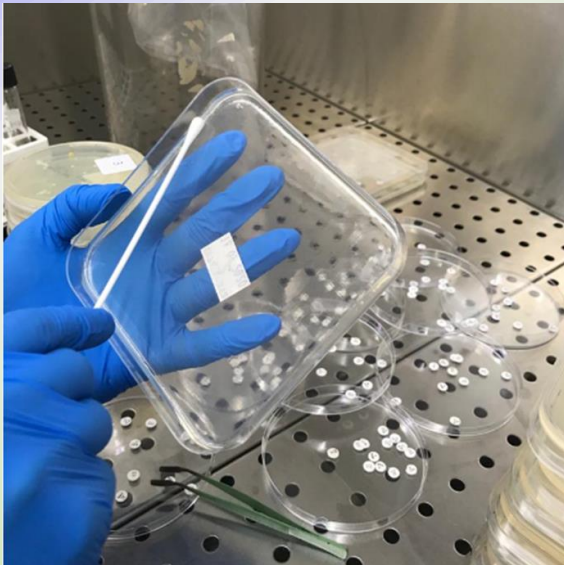
ERFAN Laboratory training course 17-21 October 2022

“Detection and characterization of *Listeria monocytogenes*, *Klebsiella pneumoniae* and *Salmonella* spp.”

Phenotypic characterization of AMR

Disk Diffusion Method

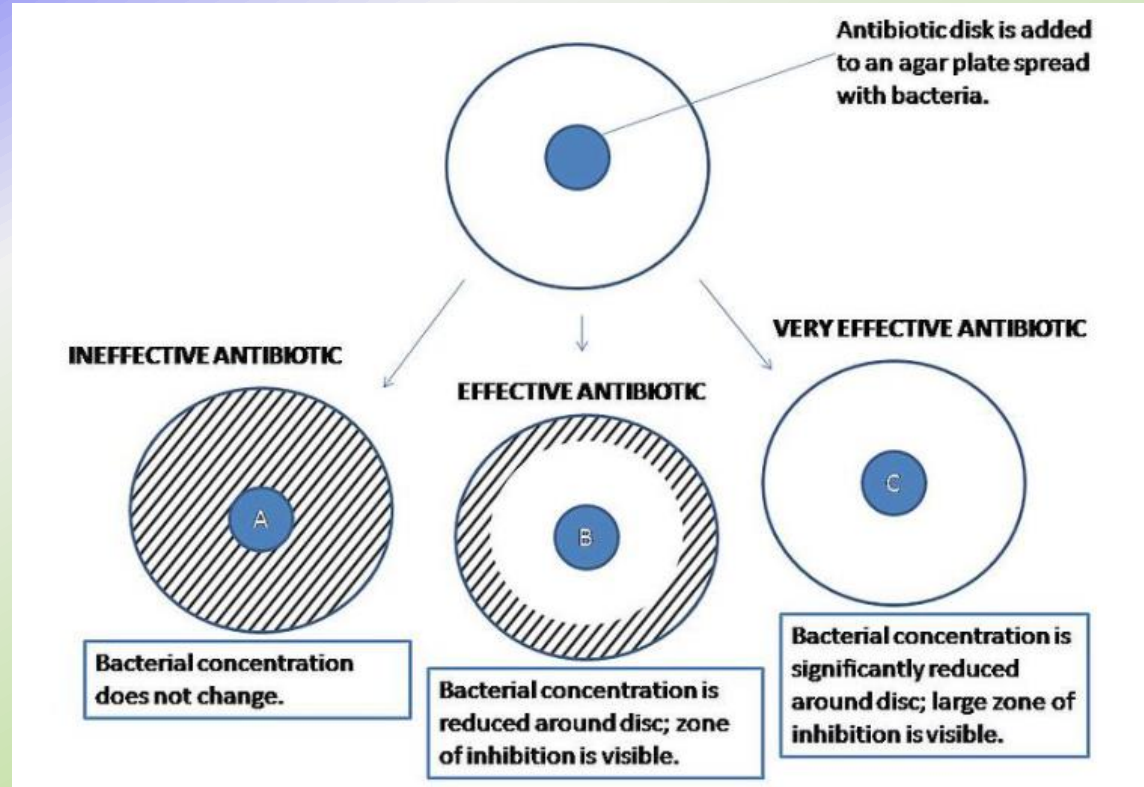
- Bacterial inoculum equivalent to 0.5 Mc Farland standard,
- Streak the suspension on Mueller-Hinton agar (MHA) using a cotton swab;
- Apply disks on agar;
- Incubation at 37 °C for 16-18 h.



Phenotypic characterization of AMR

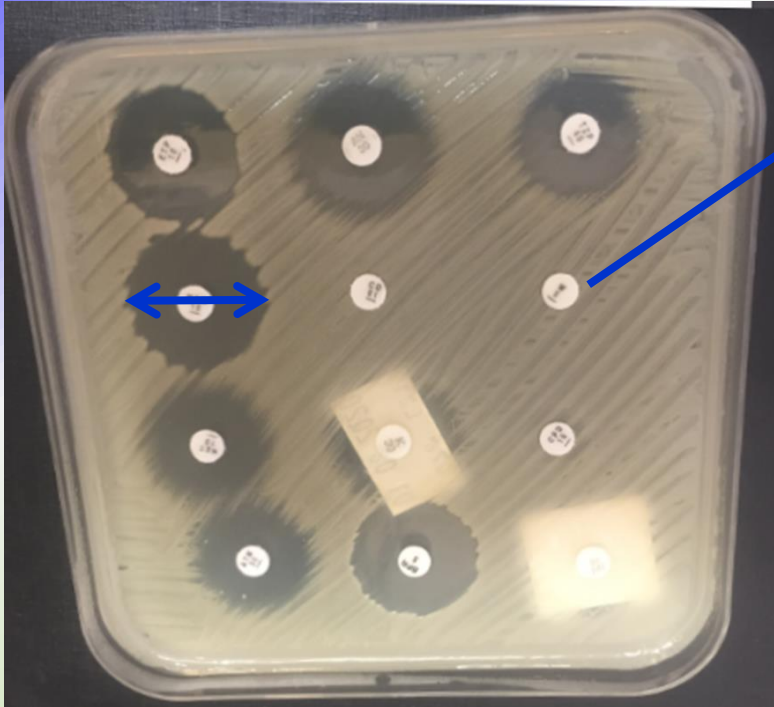
Disk Diffusion Method

After incubation measure each zone diameter of complete inhibition (including the diameter of the disk) with a ruler



Phenotypic characterization of AMR

Disk Diffusion Method



Ineffective antibiotic
The strain is Resistant

Interpret zone diameters
into susceptibility
categories according to
EUCAST breakpoint
tables to define S, I or R
strains

S= Susceptible
I= Intermediate
R= Resistant

Phenotypic characterization of AMR

Disk Diffusion Method

European Committee on Antimicrobial Susceptibility Testing

Breakpoint tables for interpretation of MICs and zone diameters

Version 12.0, valid from 2022-01-01

This document should be cited as "The European Committee on Antimicrobial Susceptibility Testing. Breakpoint tables for interpretation of MICs and zone diameters. Version 12.0, 2022. <http://www.eucast.org>."

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Phenotypic characterization of AMR Disk Diffusion Method

Enterobacteriales* Expert Rules and Intrinsic Resistance Tables

EUCAST Clinical Breakpoint Tables v. 12.0, valid from 2022-01-01

An MIC breakpoint of $S \leq 0.001$ mg/L is an arbitrary, "off scale" breakpoint (corresponding to a zone diameter breakpoint of " $S \geq 50$ mm") which categorises wild-type organisms (organisms without phenotypically detectable resistance mechanisms to the agent) as "Susceptible, increased exposure" (I). For these organism-agent combinations, never report "Susceptible, standard dosing regimen" (S).

MIC determination (broth microdilution according to ISO standard 20776-1 except for mecillinam and fosfomycin where agar dilution is used)
Medium: Mueller-Hinton broth (for cefiderocol, see <https://www.eucast.org/eucastguidancedocuments/>)
Inoculum: 5×10^5 CFU/mL
Incubation: Sealed panels, air, $35 \pm 1^\circ\text{C}$, 18±2h
Reading: Unless otherwise stated, read MICs at the lowest concentration of the agent that completely inhibits visible growth. See "EUCAST Reading Guide for broth microdilution" for further information.
Quality control: *Escherichia coli* ATCC 25922. For agents not covered by this strain and for control of the inhibitor component of beta-lactam inhibitor combinations, see EUCAST QC Tables.

Disk diffusion (EUCAST standardised disk diffusion method)
Medium: Mueller-Hinton agar
Inoculum: McFarland 0.5
Incubation: Air, $35 \pm 1^\circ\text{C}$, 18±2h
Reading: Unless otherwise stated, read zone edges as the point showing no growth viewed from the back of the plate against a dark background illuminated with reflected light. See "EUCAST Reading Guide for disk diffusion" for further information.
Quality control: *Escherichia coli* ATCC 25922. For agents not covered by this strain and for control of the inhibitor component of beta-lactam inhibitor-combination disks, see EUCAST QC Tables.

* Recent taxonomic studies have narrowed the definition of the family Enterobacteriaceae. Some previous members of this family are now included in other families within the Order Enterobacteriales. Breakpoints in this table apply to all members of the Enterobacteriales.

Penicillins ¹	MIC breakpoints (mg/L)			Disk content (µg)	Zone diameter breakpoints (mm)			Notes
	S ≤	R >	ATU		S ≥	R <	ATU	
Benzylpenicillin	-	-			-	-		1. Aminopenicillin breakpoints in <i>Enterobacteriales</i> are based on intravenous administration. For oral administration the breakpoints are relevant for urinary tract infections only. Breakpoints for other infections are under review. 2. For susceptibility testing purposes, the concentration of sulbactam is fixed at 4 mg/L. 3. For susceptibility testing purposes, the concentration of clavulanic acid is fixed at 2 mg/L. 4. For susceptibility testing purposes, the concentration of tazobactam is fixed at 4 mg/L. 5. Agar dilution is the reference method for mecillinam MIC determination. A. Ignore growth that may appear as a thin inner zone on some batches of Mueller-Hinton agars. B. Susceptibility inferred from ampicillin. C. Ignore isolated colonies within the inhibition zone.
Ampicillin¹	8	8		10	14 ^A	14 ^A		
Ampicillin-sulbactam¹	8 ²	8 ²		10-10	14 ^A	14 ^A		
Amoxicillin¹	8	8		-	Note ^B	Note ^B		
Amoxicillin-clavulanic acid⁴	8 ³	8 ³		20-10	19 ^A	19 ^A	19-20	
Amoxicillin-clavulanic acid (uncomplicated UTI only)	32 ³	32 ³		20-10	16 ^A	16 ^A		
Piperacillin	8	8		30	20	20		
Piperacillin-tazobactam	8 ⁴	8 ⁴	16	30-6	20	20	19	
Ticarcillin	8	16		75	23	20		
Ticarcillin-clavulanic acid	8 ³	16 ³		75-10	23	20		
Temocillin (infections originating from the urinary tract), <i>E. coli</i>, <i>Klebsiella</i> spp. (except <i>K. aerogenes</i>) and <i>P. mirabilis</i>	0.001	16		30	50 ^C	17 ^C		
Phenoxymethylpenicillin	-	-			-	-		
Oxacillin	-	-			-	-		
Cloxacillin	-	-			-	-		
Dicloxacillin	-	-			-	-		
Flucloxacillin	-	-			-	-		

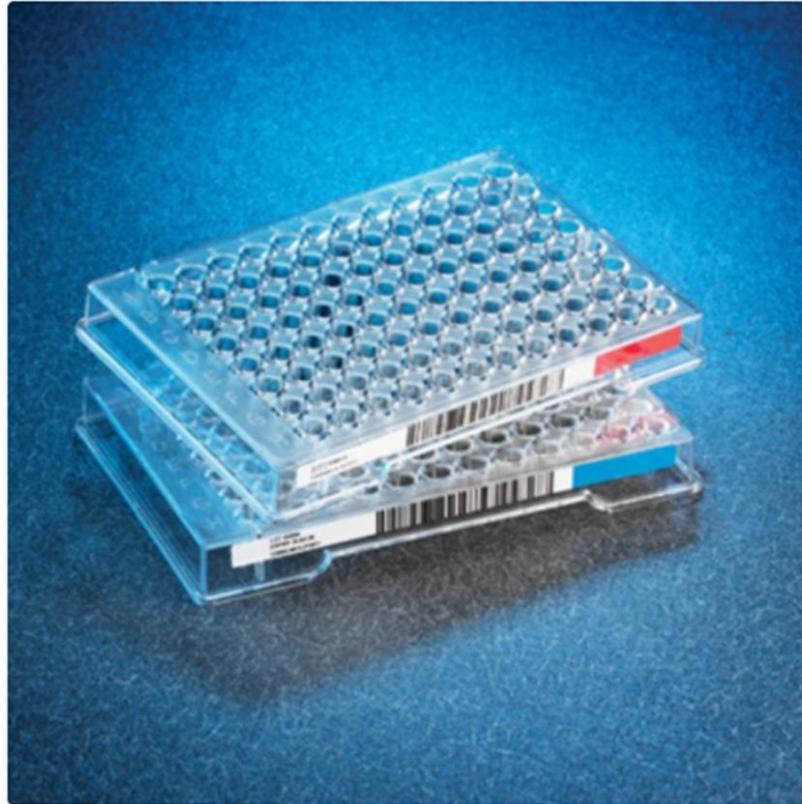
AST Broth Microdilution



- 3-5 colonies picked and suspended in 5 ml of **demineralized water** (Sensititre) to reach a final turbidity equal to 0.5 McFarland Standard
- 10 µl of inoculum was added to a tube containing **Cation Adjusted Mueller–Hinton Broth CAMHB** (Sensititre)
- 50 µl of CAMHB was dispensed to a U-bottom 96-well microtiter **GN3F plate** containing the dried serially diluted antimicrobials.

AST Broth Microdilution

U-bottom
96-well
microtiter
GN3F plate



Sensititre™ Gram Negative MIC Plate

Incubation of
plates at 37°C
for 20-24 hours

AST Broth Microdilution

SENSITITRE™ GRAM NEGATIVE PLATE FORMAT

Plate Code: **GN3F**

	1	2	3	4	5	6	7	8	9	10	11	12
A	AMI 64	A/S2 32/16	FAZ 32	CEP 16	ETP 16	GEN 16	P/T4 128/4	SXT 4/76	TAZ 32	TGC 8	AXO 64	TET 16
B	AMI 32	A/S2 16/8	FAZ 16	CEP 8	ETP 8	GEN 8	P/T4 64/4	SXT 2/38	TAZ 16	TGC 4	AXO 32	TET 8
C	AMI 16	A/S2 8/4	FAZ 8	CEP 4	ETP 4	GEN 4	P/T4 32/4	SXT 1/19	TAZ 8	TGC 2	AXO 16	TET 4
D	AMI 8	A/S2 4/2	FAZ 4	CEP 2	ETP 2	GEN 2	P/T4 16/4	SXT 0.5/9.5	TAZ 4	TGC 1	AXO 8	TET 2
E	AMP 32	AZT 32	FEP 32	MERO 8	FUR 32	CIP 4	FOX 32	POD 16	TAZ 2	TIM2 64/2	AXO 4	TET 1
F	AMP 16	AZT 16	FEP 16	MERO 4	FUR 16	CIP 2	FOX 16	POD 8	TAZ 1	TIM2 32/2	AXO 2	TET 0.5
G	AMP 8	AZT 8	FEP 8	MERO 2	FUR 8	CIP 1	FOX 8	POD 4	TOB 8	TIM2 16/2	AXO 1	NEG CON
H	AMP 4	AZT 4	FEP 4	MERO 1	FUR 4	CIP 0.5	FOX 4	POD 2	TOB 4	POS CON	POS CON	POS CON

ANTIMICROBICS

AMI	Amikacin
AMP	Ampicillin
A/S2	Ampicillin/subactam 2:1 ratio
AZT	Aztreonam
FAZ	Cefazolin
FEP	Cefepime
CEP	Cephalothin
MERO	Meropenem
ETP	Ertapenem
FUR	Cefuroxime
GEN	Gentamicin
CIP	Ciprofloxacin
P/T4	Piperacillin / tazobactam constant 4
FOX	Cefoxitin
SXT	Trimethoprim / sulfamethoxazole
POD	Cefpodoxime
TAZ	Ceftazidime
TOB	Tobramycin
TGC	Tigecycline
TIM2	Ticarcillin / clavulanic acid constant 2
AXO	Ceftriaxone
TET	Tetracycline
NEG	Negative Control
POS	Positive Control

AST Broth Microdilution



The minimal inhibitory concentration (MIC) values were read using the Sensititre OptiRead Automated Fluorometric Plate Reading System

AST Broth Microdilution

Rapporto multi-isolato

Campione : 15700/1
Specimen Date/Time : 30/08/2019 08:50:41
Materiale : QUALSIASI FONTE-LUOGO
Isolato : 1
Organismo : *Klebsiella pneumoniae*

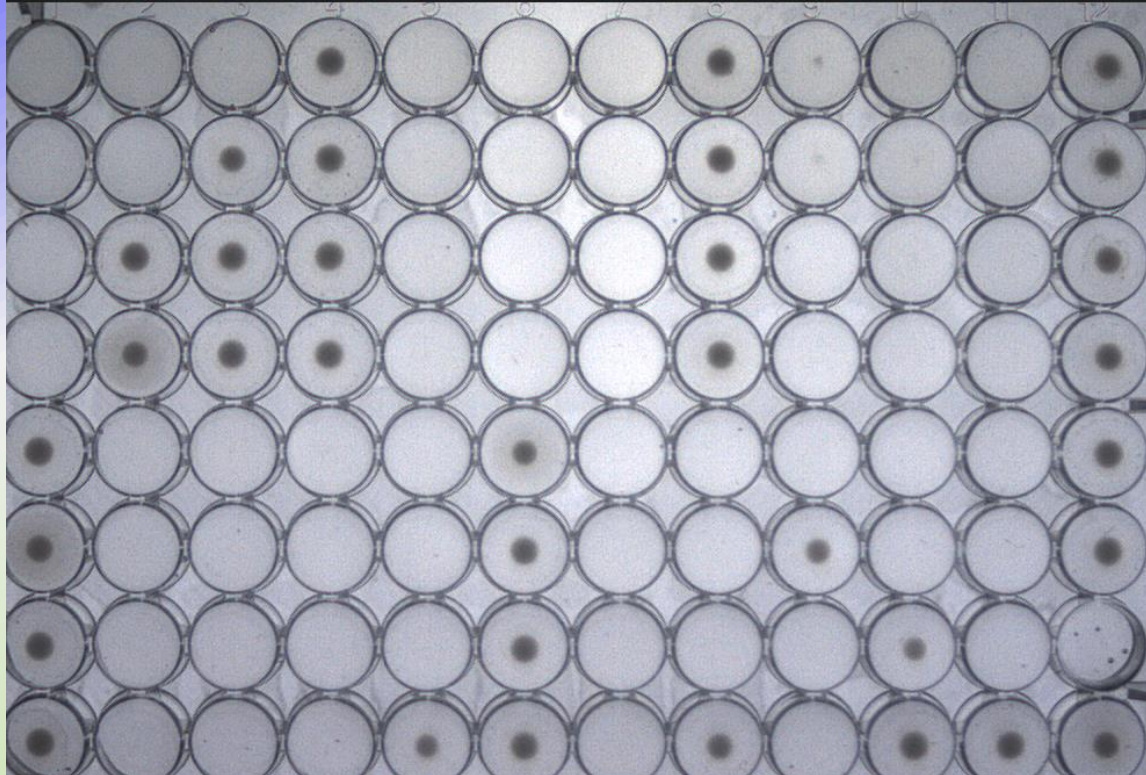
Antimicrobico

Amoxicillin/Clavulanic Acid	2	S
Ampicillin	32	R
Azithromycin	8	NI
Cefoxitin	8	S
Ceftiofur	1	NI
Ceftriaxone	<= 0.25	S
Chloramphenicol	8	S
Ciprofloxacin	0.03	S
Gentamicin	0.5	S
Nalidixic Acid	2	NI
Streptomycin	4	NI
Sulfisoxazole	32	NI
Tetracycline	<= 4	S
Trimethoprim/Sulfamethoxazole	<= 0.12	S

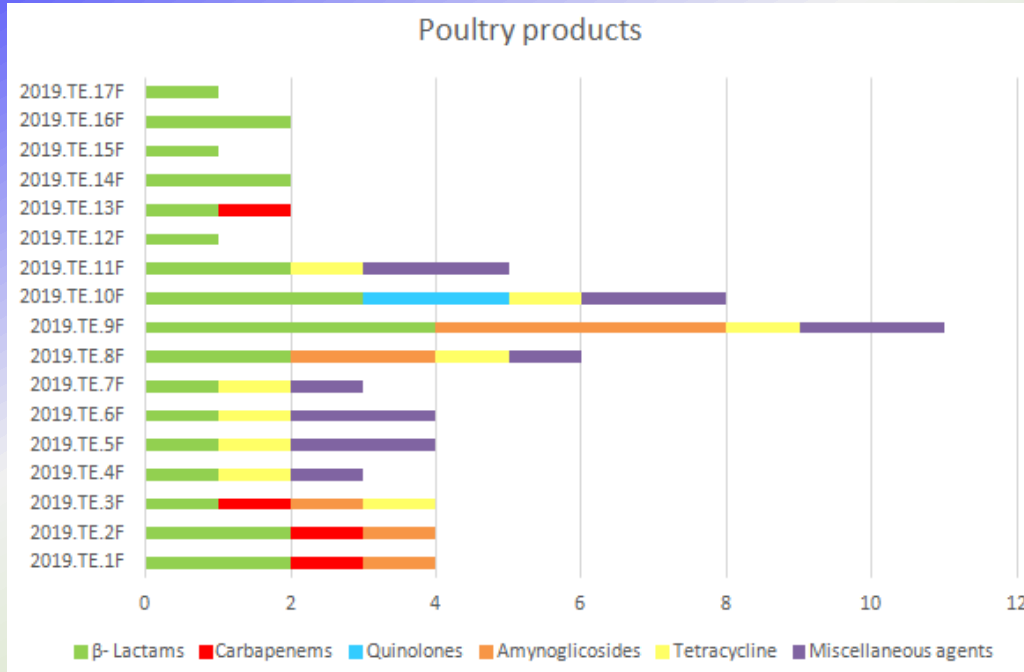
We could obtain an accurate minimum inhibitory concentration (MIC) based on the actual growth of the organism.

When comparing MIC results against the latest clinical breakpoints from EUCAST and CLSI, we can define the susceptibility profile of strains and to track emerging resistance.

AST Broth Microdilution



Kp Phenotypic resistance: some results

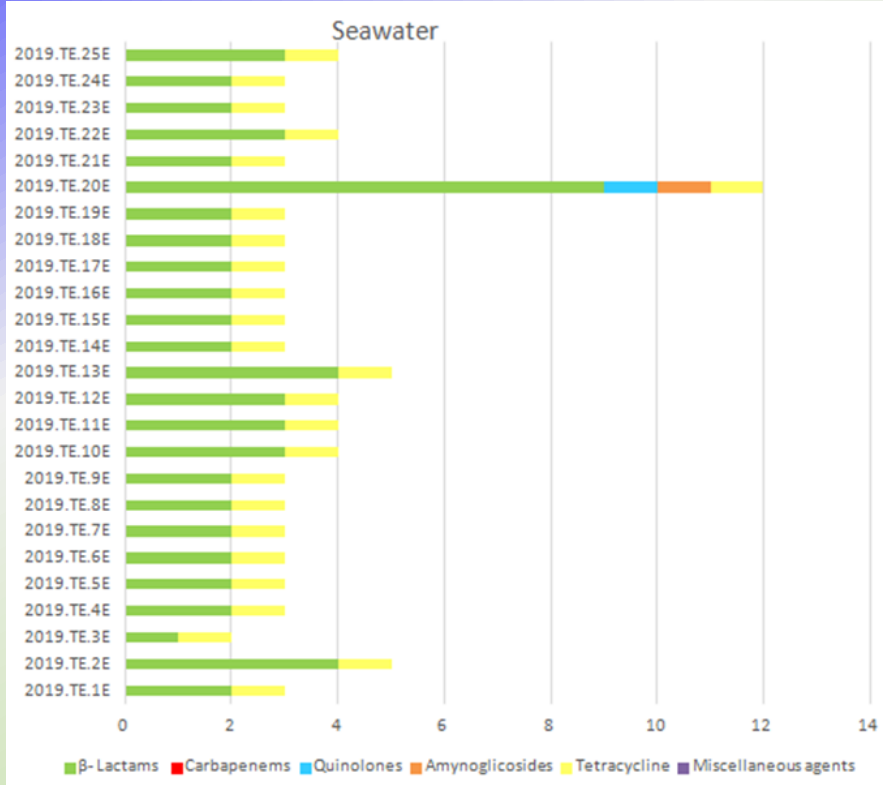


- 9 strains out of 17 (52.9 %) are MDR showing resistant to 3 or more classes of antimicrobials.

- 10 strains out of 17 resistant to β-lactams (58.8%) e 5 strains out of 17 (29.4%) resistant to aminoglycosides.

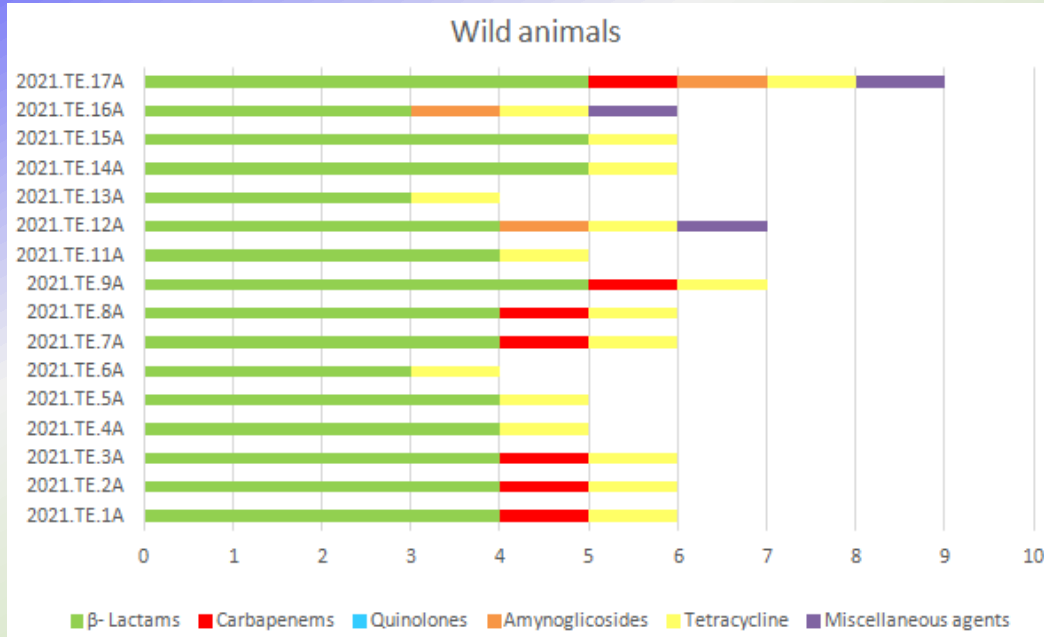
- 9 strains resistant to TET
- 5 strains resistant to TMP
- 4 strains resistant to MEM

Kp Phenotypic resistance: some results



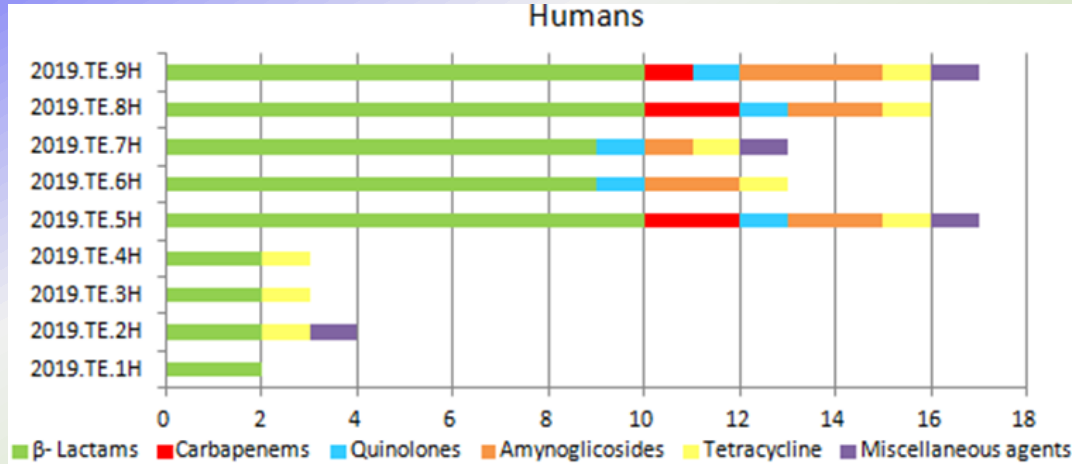
- Just one MDR strain
- All resistant to TET and beta-Lactams

Kp Phenotypic resistance: some results



- Nine MDR strain
- All resistant to TET and β -Lactams
- Seven strains resistant to carbapenem ETP or MERO.

Kp Phenotypic resistance: some results



Most of the strains were resistant to all classes of antimicrobials

THANK YOU FOR
YOUR ATTENTION!

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