Te Whatu Ora Health New Zealand

Waitematā

Organism (No. tested [#])	Penicillin	Ceftriaxone	Amoxycillin	Flucloxacillin ¹	Erythromycin	Clindamycin	Mupirocin	Fusidic Acid	Rifampicin	Tetracycline	Cotrimoxazole	Gentamicin ²	Nitrofurantoin *	Ciprofloxacin	Trimethoprim *	Doxycycline
Staphylococcus aureus methicillin susceptible (1373)	15			S	90	79	99	93	100	97	98	97	99	93	98	97
Staphylococcus aureus methicillin resistant (278)	R			R	83	88	100	67	98	93	99	94		80		98
Staphylococcus epidermidis (163)				39	52	70		48	96	86	62	72		75		87
Staphylococcus lugdunensis (68)	38			78	94	94		88	100	92	99	90		100		100
coagulase neg. staphylococci other than S.epidermidis, S. lugdunensis & S.saprophyticus (244)				51	66	76		56	97	88	78	78				96
Staphylococcus saprophyticus ³ (60)													100	100	95	
Streptococcus pneumoniae (50 blood cultures & 1 Aspirate)					98					94	45					
Meningitis	49 ⁴	100 ⁶														
Infections other than meningitis	100 ⁵	100 ⁷														
Streptococcus pyogenes (Group A) (45)	S				93	96				71	98					
Streptococcus agalactiae (Group B) (68)	S				75	78				32	100					
Enterococcus faecium ⁸ (159)			4										17			
Enterococcus faecalis ⁸ (413)			100										100			

Treatment Loa

Waitematā

- S = usually or always susceptible
- R = usually or always resistant
- # All organisms were not tested against all antibiotics

01 January - 31 December 2022

* Tested against urinary isolates only. Nitrofurantoin should not be used for complicated urinary tract infections. Trimethoprim should not be used for complicated urinary tract infections.

Cumulative Antimicrobial Susceptibility Report

Gram Positive Organisms % Susceptible (S/I)

- 1 Flucloxacillin resistant staphylococci are resistant to all beta-lactam antibiotics (penicillins, beta-lactam/beta-lactamase inhibitor combinations, cephems and carbapenems).
- 2 Gentamicin monotherapy should not be used to treat gram positive infections.
- 3 The majority of strains of S.saprophyticus are treatable with penicillin.
- 4 For patients with meningitis, 51% of isolates were resistant to parenteral penicillin (MIC > 0.06mg/L).
- 5 For patients with infections other than meningitis, 49% of isolates were susceptible and 51% were susceptible increased exposure to parenteral penicillin. No isolates were resistant to parenteral penicillin (MIC > 2mg/L).
- 6 For patients with meningitis, no isolates were resisatnt to ceftriaxone (MIC > 0.5mg/L).
- 7 For patients with infections other than meningitis, 100% of isolates were susceptible, 0% were susceptible increased exposure, 0% were resistant to ceftriaxone.
- 8 Enterococci are not tested routinely against cephalosporins, cotrimoxazole, clindamycin and gentamicin (except for synergy with penicillin) and should be regarded as resistant.