

Table 1: Nelson Marlborough hospital cumulative antibiotic susceptibilities 2022 (antibiogram)

Organism group	No. tested	Antibiotics in common usage												Second line/ restricted antibiotics <sup>1</sup>							
		Penicillin	Amoxicillin	Amoxi+clav	Amoxi+clav cystitis	Flucloxacillin	Cephalexin	Cefuroxime	Erythromycin	Co-trimoxazole	Doxycycline	Ceftriaxone	Trimethoprim <sup>2</sup>	Nitrofurantoin <sup>2</sup>	Clindamycin	Ciprofloxacin	Ceftazidime	Piperacillin-tazo	Meropenem	Gentamicin	Vancomycin
		Numbers denote % susceptible																			
<b>Non-urine isolates</b>																					
<i>Staphylococcus aureus</i>	221	16			96			87	99	98					92						
<i>Strep pyogenes</i> (GAS) and <i>Strep agalactiae</i> (GBS)	50	100						78							86						
<i>Haemophilus influenzae</i> <sup>3</sup>	79	49 <sup>#</sup>	61 <sup>#</sup>							72	100										
<i>Pseudomonas aeruginosa</i>	34														88 <sup>#</sup>	82 <sup>#</sup>	94 <sup>#</sup>	91			
<b>Bacteraemic isolates</b>																					
<i>Escherichia coli</i>	102	66	71			95		83		100					95		98	100	(97) <sup>5</sup>		
<i>Staphylococcus aureus</i> <sup>3</sup>	89	15			96		89	98	99					94						100	
<i>Pseudomonas aeruginosa</i> <sup>3</sup>	16	R	R			R				R				88 <sup>#</sup>	88 <sup>#</sup>	94 <sup>#</sup>	74	NR			
<i>Streptococcus pneumoniae</i> <sup>3</sup>	25	100					91	92	96	100										100	
<i>Streptococcus pneumoniae meningitis breakpoint</i> <sup>3</sup>	25	92								100											
<i>Enterococcus spp</i> <sup>3</sup>	27	67				R				R										100	
<b>Urine isolates</b>																					
<i>E coli</i> (ESBL 2%)	231	65	77	90	94	94				96	80	99		93				100	(97) <sup>5</sup>		
<i>Klebsiella spp</i> (ESBL 7%)	52	0	79	79	77	81				89	87	NR		92					(100) <sup>5</sup>		
<i>Enterococcus spp</i>	51	78											80							100	
<i>Pseudomonas aeruginosa</i> <sup>4</sup>	70													94 <sup>#</sup>	84 <sup>#</sup>	94 <sup>#</sup>	97				

<sup>1</sup> Not recommended for first line use unless recommended by ID/Micro; second line antibiotics are selectively tested on lower numbers of more resistant isolates.  
<sup>2</sup> Recommended for uncomplicated UTI isolates only. <sup>3</sup> Combined 2020, 2021 and 2022 data <sup>4</sup> Combined data 2021 and 2022  
R = always resistant NR = not recommended <sup>#</sup> reported as susceptible increased exposure  
<sup>5</sup> Bracketed "susceptibility" indicates % wild-type (i.e no detectable resistance mechanism) but this drug-bug combination is not recommended unless combined with another effective measure (eg surgical debridement/source control/an additional susceptible antimicrobial).

Table 2: Nelson Marlborough community cumulative antibiotic susceptibilities 2022 (antibiogram)

		Numbers denote % susceptible											
		Antibiotics in common usage											
Organism group		Number tested	Penicillin	Amoxicillin	Amoxi+clav	Amoxi+clav cystitis	Flucloxacillin	Cephalexin	Erythromycin	Co-trimoxazole	Doxycycline	Trimethoprim <sup>1</sup>	Nitrofurantoin <sup>1</sup>
<b>Non urinary sites</b>													
<i>Staphylococcus aureus</i> (all)		1430	16				95	95	90	98	98		
Methicillin-resistant <i>Staph aureus</i> (MRSA, 5%)		72					0	0	80	96	98		
<i>Streptococcus pneumoniae</i>		42	87	93					86	81	95		
<i>Haemophilus influenzae</i>		57	61 <sup>#</sup>	81 <sup>#</sup>						79	100		
<b>Urine isolates</b>													
<i>E coli</i> (all)	ESBL 4%	1915	66	78	90		95				81	98	
<i>Klebsiella pneumoniae</i>	ESBL 4%	158	0	91	93		94				82	NR	
<i>Staphylococcus saprophyticus</i>		76									99	100	
<i>Proteus mirabilis</i>		76	89	97	99		97				78	NR	
<sup>1</sup> Recommended for uncomplicated UTI only		<sup>2</sup> Combined 2021 and 2022 data											
R = always resistant		NR = not recommended											
		<sup>#</sup> reported as susceptible, increased exposure											