

Prevalence and Characterization of Extended-Spectrum Beta-lactamases-Producing Salmonella enterica Isolates in Saragossa, Spain (2001–2008)

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Title: Prevalence and characterization of extended-spectrum-betalactamasesproducing *Salmonella enterica* isolates in Saragossa, Spain (2001-2008)

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ABSTRACT

We analysed the prevalence of resistance to extended-spectrum cephalosporins (ESC) among clinical strains of *Salmonella enterica* collected by the Laboratory of Clinical Microbiology in the University Clinical Hospital Lozano Blesa in the region of Aragon (Spain), for which very few epidemiological information exists. A total of 2,092 strains of *S. enterica* were identified in stool samples from patients with gastroenteritis. Five isolates showed an ESBL phenotype: four isolates of *S. enterica* serotype Virchow harboured the extended-spectrum beta lactamase (ESBL) encoding $bla_{CTX-M-9}$ gene and an isolate of serotype Enteritidis carried a $bla_{CTX-M-1}$ gene that, to the best of our

knowledge, is being described here for the first time in this serotype of *S. enterica*. The five ESC-resistant isolates were also resistant to spectinomycin, streptomycin, kanamycin, sulfonamides, tetracycline, and trimethoprim as well as to nalidixic acid. The ESBL isolate of serotype Enteritidis though remained susceptible to kanamycin and nalidixic acid. A class 1 integron of 1.5 kb was detected for the four serotype Virchow isolates with the gene cassette *dfrA16—aadA2*. The *bla*_{CTX-M-9} gene was carried by a ~300 kb IncHI2 conjugative plasmid in the case of the *S. enterica* serotype Virchow isolates. The *bla*_{CTX-M-1} gene was carried by a ~100 kb IncI1-N conjugative plasmid for the serotype Enteritidis ESC-resistant isolate. All the four ESC-resistant strains of *S. enterica* serotype Virchow clustered together in a *Xba*I-pulsed-field gel electrophoresis, which also revealed a strong similarity between them and some pulsotypes of *S. enterica* serotype Virchow from France.

1 INTRODUCTION

Nontyphoidal salmonellosis is one of the most prevalent food borne bacterial 2 3 infections in Europe and in North America. In the United States, the burden of this infection has been estimated annually to be 1.4 million of cases resulting in 400 deaths 4 ³⁷. In Europe, 181,876 cases were reported in 2005, which meant a ratio of 39/100,000 5 inhabitants ¹¹. Most infections are self-limited and do not require antimicrobial 6 7 treatment. However, severe, life-threatening bacteraemia sometimes occur, particularly 8 in children and immunocompromised hosts and in these cases an antimicrobial therapy is recommended ³⁵. Appropriate drugs for *Salmonella* infections include ampicillin, 9 extended-spectrum cephalosporins (ESC), fluoroquinolones, and trimethoprim-10 sulfamethoxazole. However, rising rates of resistance to ampicillin and trimethoprim-11 sulfamethoxazole have significantly reduced their efficacy and fluoroquinolones are not 12 approved for the use in children. Consequently, ESC have become the current drugs of 13 choice for the treatment for invasive infections in children⁴. The number of cases of 14 15 salmonellosis caused by isolates resistant to these ESC is in continuous increase since the very first case was detected in the early 1980s¹. Nonetheless, they are still rare over 16 the total of *Salmonella* foodborne infections, just reaching a 0.2 % in Europe in 2004 25 . 17 18 Resistance to these drugs is mainly mediated by the bacterial production of beta-19 lactamases that degrade ESC. Two main classes of plasmid beta-lactamases that inactivate ESC have been identified in Salmonella: the Ambler class A extended-20 spectrum beta-lactamases (ESBLs), the most prevalent class in this genus, and the 21 Ambler class C cephamycinases. Most ESBLs belong to three families, TEM, SHV and 22 CTX-M. Over the last decade, CTX-Ms have become the most prevalent family of 23 ESBLs in the genus *Salmonella* in Europe 1 . 24

In Spain, the first ESBL-producing Salmonella enterica isolate was described in
1996 ²⁶ . It was a S. enterica serotype Othmarschen producing TEM-27 causing a
nosocomial outbreak in Madrid. Thereafter, S. enterica isolates producing ESBLs CTX-
M-9, CTX-M-27, TEM-52 or cephamycinase CMY-2 were reported sporadically in

humans or in animals ^{4, 13, 34}. A recent study on randomly selected strains from different
hospitals in Spain identified 27 (0.26 %) human isolates of *S. enterica* producing
ESBLs or cephamycinases between 2001 and 2005 ¹⁶ and in a specific study about *S. enterica* serotype Virchow, 79 out of 504 (15%) isolates recovered from 14 of the 17
provinces in Spain were ESBL producers, 48 of them carrying a *bla*_{CTX-M-9} gene ¹⁸.

34 In 2000, in Aragón, a northwestern region of Spain (1,326,918 inhabitants), 129 35 foodborne outbreaks that affected 2,030 people (including 1,464 in Saragossa), resulting 36 in 103 hospitalizations were reported. S. enterica was found to be the causative agent in 37 62% of the cases. In 2005, a foodborne outbreak was reported with 179 cases of salmonellosis from the whole region (109 occuring in Saragossa), 19 patients needed 38 39 hospitalization. This outbreak was epidemiologically related to the consumption of 40 locally farmed chicken (http://www.aragon.es). Very few studies have been published 41 about the epidemiological situation of S. enterica or about the profile of antimicrobial 42 resistances shown by them, both for the whole region of Aragon and for the Sanitary 43 Area Saragossa 3. The last clinical study showed a continuous increase of isolations of *S. enterica*, from 1994 (118 isolates) to 2000 (287 isolates)²⁹. 44

In this study, we assessed the frequency of different serotypes and the prevalence of ESC resistance among *S. enterica* isolates obtained in Saragossa during an eight-year period (2001-2008). The characterization of the beta-lactamase genes and their genetic support, and class 1 integron cassettes was done on ESC-resistant *S. enterica* isolates.

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51 MATERIALS AND METHODS

52 *Strains*

53 S. enterica isolates were recovered from stool samples at the Laboratory of Clinical Microbiology of the University Hospital H.C.U. "Lozano Blesa" between 2001 54 55 and 2008. The Hospital "Lozano Blesa" is a 900-bed teaching hospital located in 56 Saragossa, the capital city of Aragón. It is the reference hospital of the Sanitary Area Saragossa 3 (268,624 inhabitants in 2005). During the study period, the Laboratory of 57 58 Clinical Microbiology received 59,977 stool samples, and a pathogen was found in 59 roughly 10% of the samples. S. enterica was the main agent with 2,092 isolates (only 60 one isolate per patient per month was considered).

S. enterica strains were identified using the WIDER system (Soria Melguizo,
 Madrid, Spain) ³⁶ and serotyped on the basis of somatic O, and both phase 1 and phase
 2 flagellar antigens by agglutination tests with antisera (Bio-Rad, Marnes la Coquette,
 France) as specified by the White-Kauffmann-Le Minor scheme ¹⁷.

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66 Antimicrobial susceptibility

67 Antimicrobial susceptibility was first carried out for all the isolates using the WIDER system according to the recommendations of the Clinical and Laboratory 68 Standards Institute guidelines⁹. For ESC, the antibiotic concentration range was 0.12 to 69 8 µg/ml for cefotaxime and 0.5 to 16 µg/ml for ceftazidime. All strains of Salmonella 70 71 showing a decreased susceptibility to one or both of these antibiotics, meaning a minimal inhibitory concentration (MIC) $\geq 1 \ \mu g/mL$ but remaining susceptible to 72 cephamycins and to the association with clavulanic acid were selected for further 73 analysis, according with the classical definition of ESBL³¹. 74

ESBL phenotype was detected by the double-disk synergy method ²⁰ and measuring the MIC for ceftriaxone (CRO) ceftazidime (CAZ) and cefotaxime (CTX) with and without clavulanic acid, using the ESBL detection Etest strips (AB Biodisk, Solna, Sweden).

Additional testing was carried out by the disk-diffusion method with 32
 antimicrobial drugs (Bio-Rad), as previously described ³⁸.

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82 *PCR amplification of antimicrobial resistance genes and sequence analysis*

Total DNA was extracted using the InstaGene matrix kit (Bio-Rad) according to the manufacturer's recommendations. The resistance genes, bla_{TEM} , bla_{SHV} , $bla_{\text{OXA-1}}$ group, $bla_{\text{CTX-M}}$, and class 1 integron gene cassettes were amplified by PCR as described previously ³⁸. Also *qnr*, *qepA* and *aac(6')-Ib* genes were investigated when resistance to NAL was observed, as previously described ^{30, 33}.

Sequencing was performed at the "Plateforme de Génotypage des Pathogènes et
Santé Publique, PF8" (Institut Pasteur). The nucleotide sequences and the deduced
protein sequences were analyzed with EditSeq and Megalign software (Dnastar,
Madison, WI). The BLASTN program of NCBI (National Center for Biotechnology
Information, US National Library of Medicine, Bethseda, MD, U.S.A.) was used for
database searches.

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Resistance transfer determination

A resistance transfer experiment was carried out on solid media, using either *Escherichia coli* K-12 BM14 resistant to sodium azide or *E. coli* C1a resistant to nalidixic acid (NAL), as the recipient strain ¹². Transconjugants were selected on Drigalski agar (Bio-Rad) supplemented with CRO (20 μ g/mL) and sodium azide (500 μg/mL) or NAL (64 μg/mL). Three *E. coli* transconjugants were arbitrarily selected for
each experiment.

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103 Plasmid analysis

Plasmid DNA from parental and transconconjugant strains was analyzed by
pulsed field gel electrophoresis (PFGE) after linearization with the S1 nuclease enzyme,
as described previously ¹². PCR-based replicon typing analysis was performed, as
described by Carattoli et al. ⁷. The 18 primer pairs targeting FIA, FIB, FIC, HI1, HI2,
I1-Iγ, L/M, N, P, W, T, A/C, K, B/O, X, Y, F and FII replicons were used in separate
PCR reactions.

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111 *PFGE typing*

112 The genetic diversity of the four S. enterica serotype Virchow isolates resistant to ESC was assessed by PFGE of genomic DNA digested with XbaI (Roche, 113 Mannheim, Germany), as described previously ³⁸. The running conditions and the 114 115 molecular size marker were as described in the standardized PulseNet protocol (http://www.cdc.gov/pulsenet/). BioNumerics 4.0 (Applied Maths, Saint-Martens-116 117 Latem, Belgium) was used for image normalization and construction of similarity 118 matrices. Bands were assigned manually. Clustering was carried out by the unweighted pair-group method with arithmetic averages (UPGMA) based on the Dice similarity 119 120 index, using a 1% optimization parameter and 1% band-position tolerance. The results were compared to PFGE profiles of S. enterica from the French National Reference 121 122 Centre for Salmonella (FNRC-Salm) database.

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125 **RESULTS**

Between 2001 and 2008, 2,092 *S. enterica* isolates were identified (one per patient within a period of 30 days), with a continuous tendency to decrease from 2002 (394 isolates) to 2008 (138 isolates). The distribution of serotypes is presented in TABLE 1. Enteritidis was the predominant serotype, accounting for 52% of all the isolates.

130 The results of susceptibility testing are shown in TABLES 2 AND 3. Of the 2,092 131 isolates, 387 (18.5 %) were susceptible to all antimicrobial agents tested. The most 132 frequent types of resistance observed concerned ampicillin (increasing from 33.5 % in 133 2001 to 59.4 % in 2008), NAL (47.2 % in 2005 but decreasing since then to a 21.7 % in 2008) and trimethoprim/sulfamethoxazole (peaking at 15 % in 2004). Although up to 17 134 isolates had a MIC for ceftriaxone of $\geq 1 \ \mu g/mL$, only five isolates (0.24 %) of 135 136 serotypes Enteritidis (isolate 06-424914) and Virchow (isolates 02-236146, 02-214992, 137 03-1672608 and 04-1831083), showed an ESBL phenotype determined by double-disk diffusion test and ESBL-Etest® (TABLE 3). All five isolates were susceptible to 138 139 cephamycins, association with clavulanic acid and carbapenems. The mechanisms of 140 resistance to beta-lactam antibiotics of these five isolates were investigated and are 141 shown below. The other 12 isolates with a MIC for ceftriaxone of $\geq 1 \ \mu g/mL$ were 142 resistant to cefoxitin and gave a negative double disk synergy test (despite the use of 143 several ESC disks placed at distances of both 15 and 20 mm from the clavulanic acid disk), therefore they were considered as cephamycinase-producing isolates. No further 144 145 molecular characterization of these isolates has been possible, as they were accidentally discarded as no-ESBL-producers. 146

The serotype Enteritidis isolate 06-424914 was also resistant to aminoglycosides
(streptomycin, spectinomycin), trimethoprim-sulfamethoxazole, and tetracycline
(TABLE 3). The serotype Virchow isolates 02-236146, 02-214992, 03-1672608, 04-

150 1831083 had a similar susceptibility profile, except an additional resistance to
151 kanamycin and NAL with a decreased susceptibility to ciprofloxacin (MIC of 0.25 to
152 0.5 mg/L).

PCR and sequence analysis detected in the five isolates both the penicillinase $bla_{\text{TEM-1}}$ gene and an ESBL $bla_{\text{CTX-M}}$ gene. Serotype Enteritidis isolate 06-424914 contained the $bla_{\text{CTX-M-1}}$ gene, whereas serotype Virchow isolates contained the $bla_{\text{CTX-}}$ M_{-9} gene. The serotype Virchow isolates also harboured a 1.5 kb class 1 integron containing a *dfrA16-aadA2* gene cassette known to confer resistances to trimethoprim and streptomycin and spectinomycin respectively. No class 1 integrons were found for the Enteritidis isolate.

In serotype Enteritidis isolate 06-424914, the $bla_{CTX-M-1}$ gene was carried by a ≈ 100 kb conjugative IncI1-IncN multireplicon plasmid. Other resistance determinants, affecting streptomycin, spectinomycin, sulfamides, trimethoprim-sulfamethoxazole, and tetracycline were cotransfered to transconjugants with ceftriaxone resistance.

In serotype Virchow isolates, the $bla_{CTX-M-9}$ gene was carried by a ≈ 300 kb conjugative plasmid of replicon IncHI2. The same resistance determinants as listed for the serotype Enteritidis isolate 06-424914, were cotransfered to transconjugants with ceftriaxone resistance. The resistance to NAL was due to a chromosomal mutation on the QRDR region of the *gyrA* leading to a substitution of a serine in position 83 by a phenylalanine, as described previously²².

In this study, all the CTX-M-9-producing *S. enterica* serotype Virchow isolates
clustered together independently to their geographic area of origin, might it be Spain or
France, as it was shown in a database comparison between the isolates from Saragossa
and some pulsotypes of the FNRC-Salm (FIGURE 1).

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175 **DISCUSSION**

Since the first *bla*_{CTX-M} genes were described in the early 1990s, *S. enterica* has 176 been one of the first species of Enterobacteriaceae to be identified harbouring this kind 177 of resistances¹. CTX-M-9 was first reported in Spain in 1996, produced by an *E. coli* 178 179 human isolate and S. enterica serotype Virchow carrying a blactory appeared just a few years later ³⁴. Retrospective studies in the United Kingdom have found strains that 180 were isolated in the 1990s, from patients with a history of travelling abroad ¹⁹. Strains 181 182 isolated from both humans and poultry were reported in France, suggesting an 183 interspecies transfer, which affected several serotypes (Virchow and Enteritidis among them) and different ESBL enzymes (CTX-M-2, TEM-52, CTX-M-9)³⁸. This is 184 supported as well by the latest studies on poultry in Spain⁵. 185

The ESBL gene *bla*_{CTX-M-1} was first reported in Germany in 1996, harboured by 186 an *E. coli* strain² and the first case of *S. enterica* producing CTX-M-1 was a strain of 187 serotype Typhimurium isolated in France²¹. Recent studies found *S. enterica* serotypes 188 Enteritidis, carrying the *bla*_{CTX-M-32} gene, and Litchfield carrying the *bla*_{CTX-M-1} gene in 189 Spain, in relation with conjugative plasmids of IncN and IncI1, respectively ¹⁶. The 190 191 plasmid carrying the *bla*_{CTX-M-1} gene had also a similar size (110 kb) to the plasmid 192 found for the Enteritidis isolate of our study, and both share a similar multi-drug 193 resistance profile and the lack of a class 1 integron. E. coli strains carrying this ESBL gene on a IncI1 plasmid have been reported Italy and France from both humans and 194 animals (poultry and dogs)^{14, 15}. Another study on *E. coli* strains recovered from human 195 samples in France showed that the *bla*_{CTX-M-1} gene was carried by either IncI1 or IncN 196 plasmids²⁴. Multireplicon plasmids do often occur⁶, but an IncI1-N has not been 197 described yet. Previous findings in animals, mainly poultry, of both ESBL bla_{CTX-M-1} 198

and $bla_{\text{CTX-M-9}}$ harboured in IncI or IncHI2 plasmids suggest that poultry might play an important role as a reservoir for these bacteria ^{16, 38}.

The first ESBL S. enterica strains were detected in our laboratory in 2002⁸. 201 During this eight-year prospective study we have found a total of four isolates of 202 203 serotype Virchow harbouring a *bla*_{CTX-M-9} gene and one *S. enterica* serotype Enteritidis 204 with the $bla_{CTX-M-1}$ gene, all of them during the period 2002-2006. ESBL strains were no longer recovered after 2006. Although the final rate of ESBL among the total figures 205 206 was rather low (0.24 %), we call out the fact that those four isolates of serotype 207 Virchow producing a CTX-M-9 occurred in 26.6 % of all isolates of that serotype during the time period of this study. The four strains of serotype Virchow appear to 208 carry the same IncHI2 conjugative plasmid previously described in CTX-M-9 209 producing strains from Spain (in the region of La Rioja, adjacent to Aragon³², in 210 Barcelona¹⁰ and the city of Madrid²⁸). These works describe plasmids of the same size 211 and belonging to the same incompatibility group IncHI2, carrying the same gene 212 cassette dfrA16-aadA2 within the complex class 1 integron In60, altogether with the 213 $bla_{CTX-M-9}$ gene ^{3, 10, 27, 32}. This has finally become one of the most predominant 214 combinations of *S. enterica* serotype and ESBL in Spain and Portugal²³. 215

Clonal transmission of multi-drug-resistance has been proven in isolates from
poultry and humans ^{32, 38}. The PFGE pulsotypes, with more than 96 % of similarity
among the four ESBL Virchow isolates and the phenotype, gene cassettes and plasmids
found suggest that they could be associated to the clonal spread of *S. enterica* serotype
Virchow PT19 previously described in Spain and France ^{18, 38}.

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TABLES AND FIGURE LEGENDS

FIGURE 1. CLONAL RELATEDNESS OF XbaI-PGFE PROFILES OBTAINED FROM S. ENTERICA SERVITYPE VIRCHOW ISOLATES FROM SARAGOSSA AND FRANCE

FGE-Xbal	PFC	E-Xba	al						
	9 9	8 8	898999	8 8 9	9.9	90 0 0 0			
8 8	120	98	83344	- 30	1 18 11	2 8 8 8 6 2 8 9 9 6	STRAIN	RESISTANCE TYPE	bla GENE
			1 1 1	1.11.1	1	10.0	03 2809	Susceptible	
[1	111	1 11 1	1 1	C	05 8242	AmCroSuTeTmNal	CTX-M-2
	1.10		1.11	1 88 1	1.1	12 511	03 6745	SuTeTmNal	
		.1	111	1 11 1	1-11	11 1 1	02 4291	Nal	
	1	1	1 11	1 111 1		410 1 1	02 4596	Nal	
		1	111	1 11 1		188 1 1	02 7169	S	
		1	1 11	1 11 1		1. 1 1	03 2057	SSpSuTeTmNal	
	130		1 11	1 11 1		REII	03 3101	Susceptible	
		10	111	1.111	Local.	BI LAN	03 3111	AmSuTeTmNal	
1	1	1	111	-1 11 1	1 1-	H4 1 1.	03 3728	Susceptible	
		1	111	1 11 1	1	111111	03 3832	AmCroSuTeTmNal	CTX-M-2
		1	111	1 111 1	1 1	RED D-	03 5106	AmCSuTeTm	
			1.11			11.1 1	03 5454	Nal	
			111	1 11 1		1111	03 5779	Susceptible	
		1	111	1 11 1	1.1.	1113 5	03 7226	Susceptible	
			1 11	1 11 1	1 10	1 1 1	05 1106	AmCazSSpKGCSuTeTmN	al SHV-12
	152	1		1 11 1	1. 17		04 4335	AmCroSuTeTmNal	CTX-M-2
	- 18		111				04 4468	AmCroSuTeTmNal	CTX-M-2
			111	1 11 1		業業11 11.	04 5817	AmCroSuTeTmNal	CTX-M-2
		1	1.11	1 1 1	10010	NR 1 4	02 5421	Nal	
	1		1.11	1 1 1	1	HAL II	03 2419	Nal	
3		1.	4-10	1- 111 1	1000	ALC & P	02 5159	Susceptible	
_	- 12		111	1 11 1	1 1	HILL	02 7346	Susceptible	
	r 🔤		1 11	1 11 1	1 11	· ##11 313.	02 214992	AmCroSSpKSuTeTmNal	CTX-M-9
			111	1 11 1	1 11	B411 12.1	03 1672608	AmCroSSpKSuTeTmNal	CTX-M-9
		1	111	1111	1 11	8313 N.I.	04 183083	AmCroSSpKSuTeTmNal	CTX-M-9
i r	. 18		111	1 11 1		· · · · · · · · · · · · · · · · · · ·	07 2762	AmCroSSpKSuTeTmNal	CTX-M-9
	- 1		1.11			1111	03 973	AmCroSSpKSuTmTe	CTX-M-9
	- 10		111	1 11 1	1 1		04 3838	AmCro	CTX-M-2
L	1	1	11 1	1 84 1	8 18		02 236146	AmCroSSpKSuTeTmNal	CTX-M-9
	(1	1.8		8.8.12			03 1324	Nal	
8		21	111	1 11 1		- I B. W. Contract	03 7962	AmSSpKTGSuTmNal	
e r	1.10	1	111	1 11 1	1 1	相称 相 。	05 4181	AmCazNal	TEM-52
	- 18	1	111	111 1		1010 6	03 7925	Susceptible	
	-				10011		02 7113	Nal	
	- 53	1	111	1 11 1	100	111	07 3700	AmCazSNal	TEM-52
		1		1 11 1		11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	02 5710	Nal	
_	3	1			1233	1111日 1	07 4662	AmCroNal	CTX-M-3
	-			1 111	1 11 1	The Holor	02 4748	КТе	
			1010	-			02 7237	AmSCSuTeTm	
	1	1			111	11.1	03 8871	S	
	- 12	1		4 4 1 1	1		06 8083	AmCaz	TEM-52
	- H					al les tra	03 2152	Susceptible	
	- 1		and the second second	111 .1	3 13 1	THE P	03 6088	Susceptible	

FIGURE 1. The two first numbers indicate the year of isolation of the strain. The strains from Saragossa are outlined in bold and with asterisks (*). The remaining strains belong to the database of the French National Reference Centre for *Salmonella*. Am: amoxicillin, Cro: ceftriaxone, Caz: ceftazidime, S: streptomycin, Sp: spectinomycin, K: kanamycin, G: gentamicin, Su: sulfonamide, Te: tetracycline, Tm: trimethoprim, Nal: nalidixic acid.

Enborar		1.e.e. LoL			ori, or interio	, Berune i	iii i Liuo	B 2001 200	,0
C. I. Il sund mark	2001	2002	2003	2004	2005	2006	2007	2008	total
Salmonellaserotypes	(n=304)	(n= 394)	(n=334)	(n= 346)	(n=197)	(n=207)	(n=172)	(n=138)	(n=2092)
O:9 (formerly D1 group)	183	233	219	197	97	83	59	32	1103
Enteritidis	181	233	216	195	97	81	57	28	1088
Others	2	0	3	2	0	2	2	4	15
O:4 (formerly B group)	72	115	67	89	61	72	65	72	613
Typhimurium	68	107	66	89	58	68	59	67	582
Others	4	8	1	0	3	4	6	5	31
O:6,7 (formerly C1 group)	13	22	21	14	18	11	9	9	117
Virchow	0	3	3	2	3	1	1	2	15
Others	13	19	18	12	15	10	8	7	102
O:6,8 (formerly C2 group)	21	17	5	8	17	13	4	11	96
Other groups	15	7	22	38	2	23	33	12	152
Non typable	0	0	0	0	2	5	2	2	11

 TABLE 1. DISTRIBUTION OF SALMONELLA ENTERICA SEROTYPES IN THE CLINICAL MICROBIOLOGY

 LABORATORY OF H.C.U. LOZANO BLESA IN ARAGON, SPAIN, DURING THE PERIOD 2001-2008

_	% of isolates resistant												
Antibiotics	2001 (n=304)	2002 (n=394)	2003 (n=334)	2004 (n=346)	2005 (n=197)	2006 (n=207)	2007 (n=172)	2008 (n=138)	(n=2092)				
Ampicillin	33.5	38.8	24.0	35.2	43.8	36.2	34.8	59.4	36.3				
Cefotaxime	0	0.2	0.9	0.3	1	1.9	1.1	2.9	0.8				
Gentamicin	4.3	4	1.2	1.7	1	1.9	1.7	10.8	3				
Nalidixic acid	28.6	27	31	31	47.2	33.3	30.8	21.7	31				
Ciprofloxacin	0.3	0.7	0.2	0.3	0	0.9	0	0.7	0.4				
Co-trimoxazole	7.8	12.6	7.8	15	12	10.6	12.7	5	10.8				

TABLE 2. PERCENTAGE OF RESISTANCE TO SPECIFIC ANTIBIOTICS IN S. ENTERICA IN ARAGÓN, SPAIN FROM 2001 TO 2008

TABLE 3. CHARACTERISTICS OF THE S. ENTERICA STRAINS AND THE TRANSCONJUGANTS IN THIS STUDY

strain	serotype	year	coresistance phenotyp	e ESBL	CTX	CTL	CAZ	CZL	CPM	CPL	CRO	CIP	Inc	plasmid size
02-236146	Virchow	2002	SSpKSuTeTmNal	CTX-M-9	>16	0.047	< 0.5	0.19	1	0.064	15	28	HI2	290 kb
236146-TC	2		SSpKSuT eT m	CTX-M-9	2	0.032	<0.5	0.094	0.5	0.064	17	35	HI2	290 kb
02-214992	Virchow	2002	SSpKSuT eT mNal	CTX-M-9	>16	0.064	< 0.5	0.25	2	0.064	16	26	HI2	320 kb
214992-TC	1		SSpKSuT eT m	CTX-M-9	2	0.032	<0.5	0.125	0.38	< 0.064	20	35	HI2	320 kb
03-1672608	3 Virchow	2003	SSpKSuTeT mNal	CTX-M-9	16	0.047	0.75	0.19	1	< 0.064	16	26	HI2	320 kb
1672608-TC	2		SSpKSuT eT m	CTX-M-9	2	0.032	< 0.5	0.125	0.38	< 0.064	16	35	HI2	320 kb
04-1831083	Virchow	2004	SSpKSuT eT mNal	CTX-M-9	16	0.047	0.75	0.125	1	0.064	16	26	HI2	320 kb
1831083-TC	2		SSpKSuT eT m	CTX-M-9	12	0.032	0.5	0.125	0.5	< 0.064	16	35	HI2	320 kb
06-424914	Enteritidi	s 2006	SSp SuT eT m	CTX-M-1	>16	0.032	1.5	0.19	3	< 0.064	15	35	I1-N	100 kb
424914-TC	1		SSp SuT eT m	CTX-M-1	>16	0.023	1	0.094	2	< 0.064	15	35	I1-N	145 kb

TC: E. coli transconjugant; S: streptomycin; Sp: spectinomycin; K: kanamycin; Su: sulfonamides; Te: tetracyclin; Tm: trimethoprim; Nal: nal CTX: cefotaxime; CTL: cefotaxime/clavulanic acid; CAZ: ceftazidime; CZL: ceftazidime/clavulanic acid; CPM: cefepime; CPL: cefepime/clavulanic CRO: ceftriaxone; CIP: ciprofloxacin. Inc: plasmid incompatibility group. All measurements are E-test MICs (µg/ml) expecpt for CRO and CI: when figures represent diameters on disk diffusion test (mm).