

National Trends in Infections caused by *Pseudomonas aeruginosa* and Carbapenem-resistant *Pseudomonas aeruginosa*, 2017 - 2020

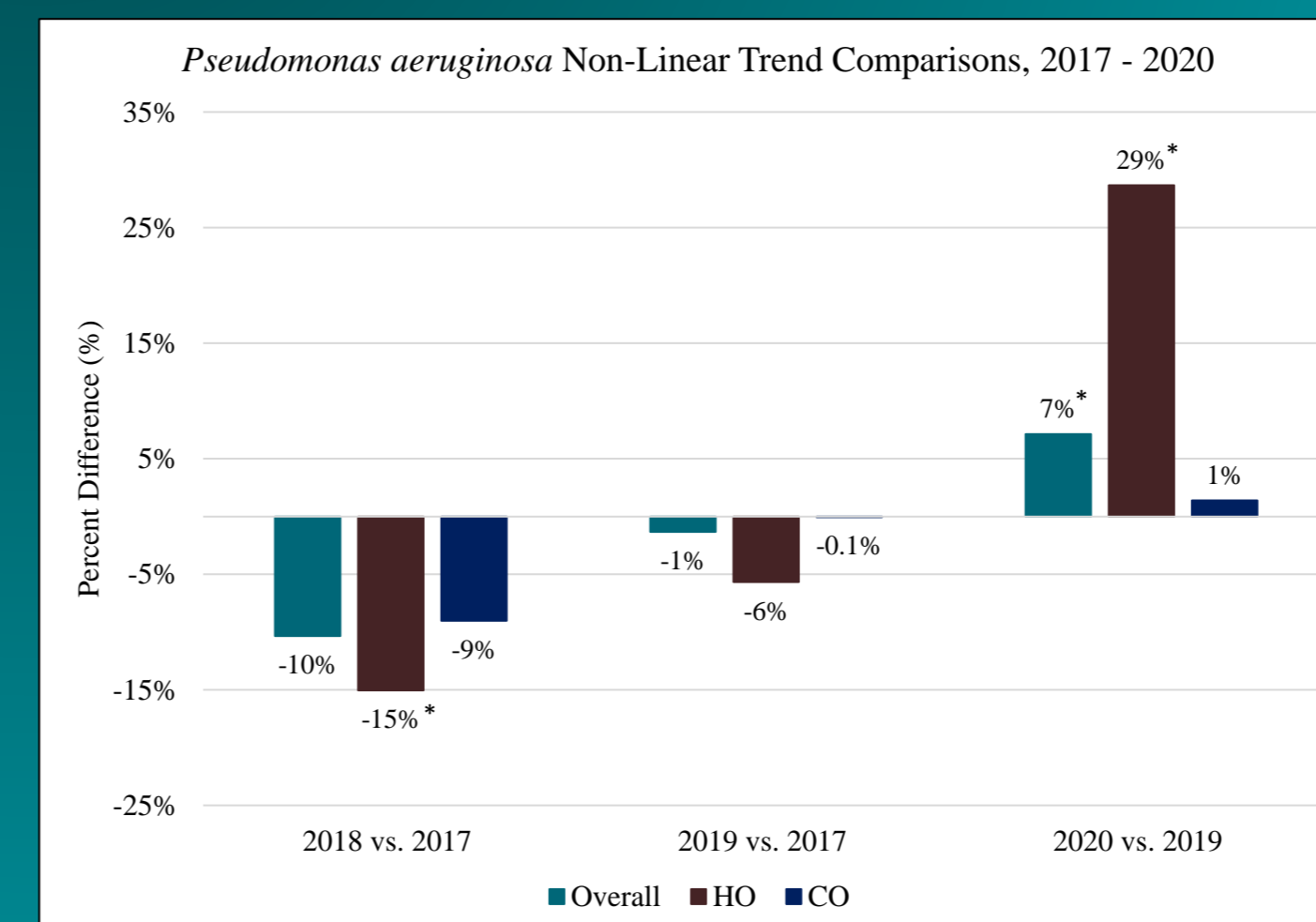
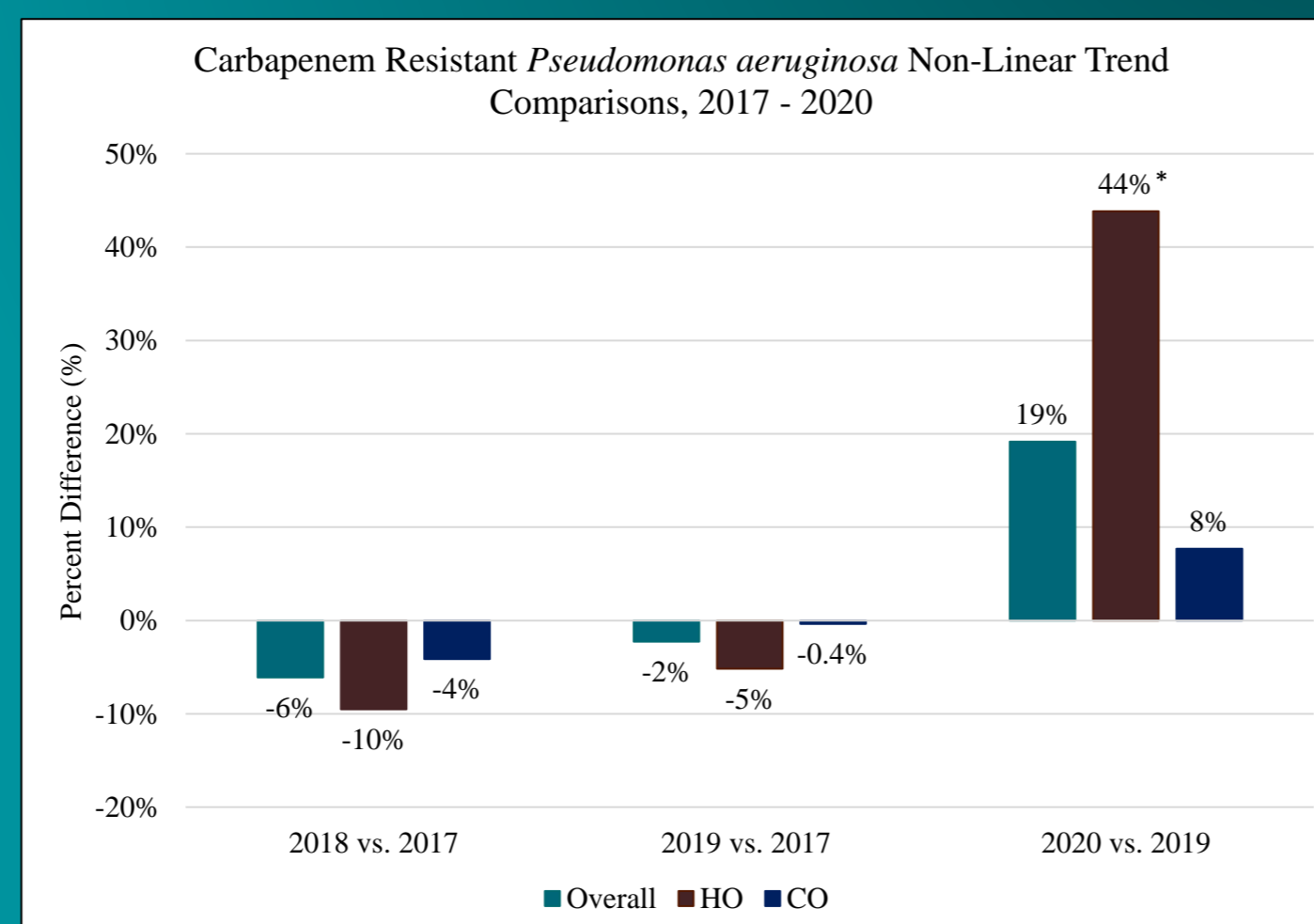
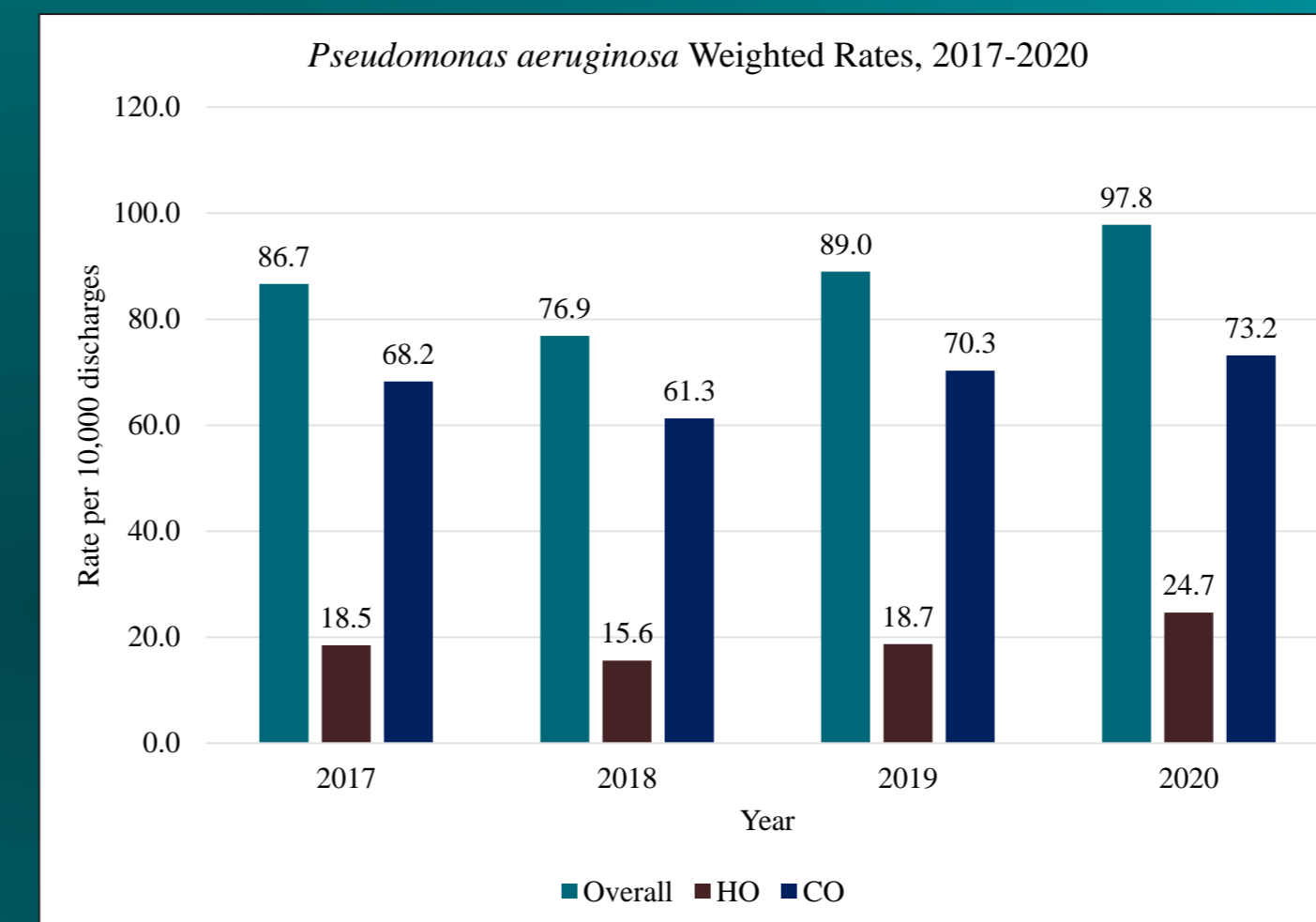
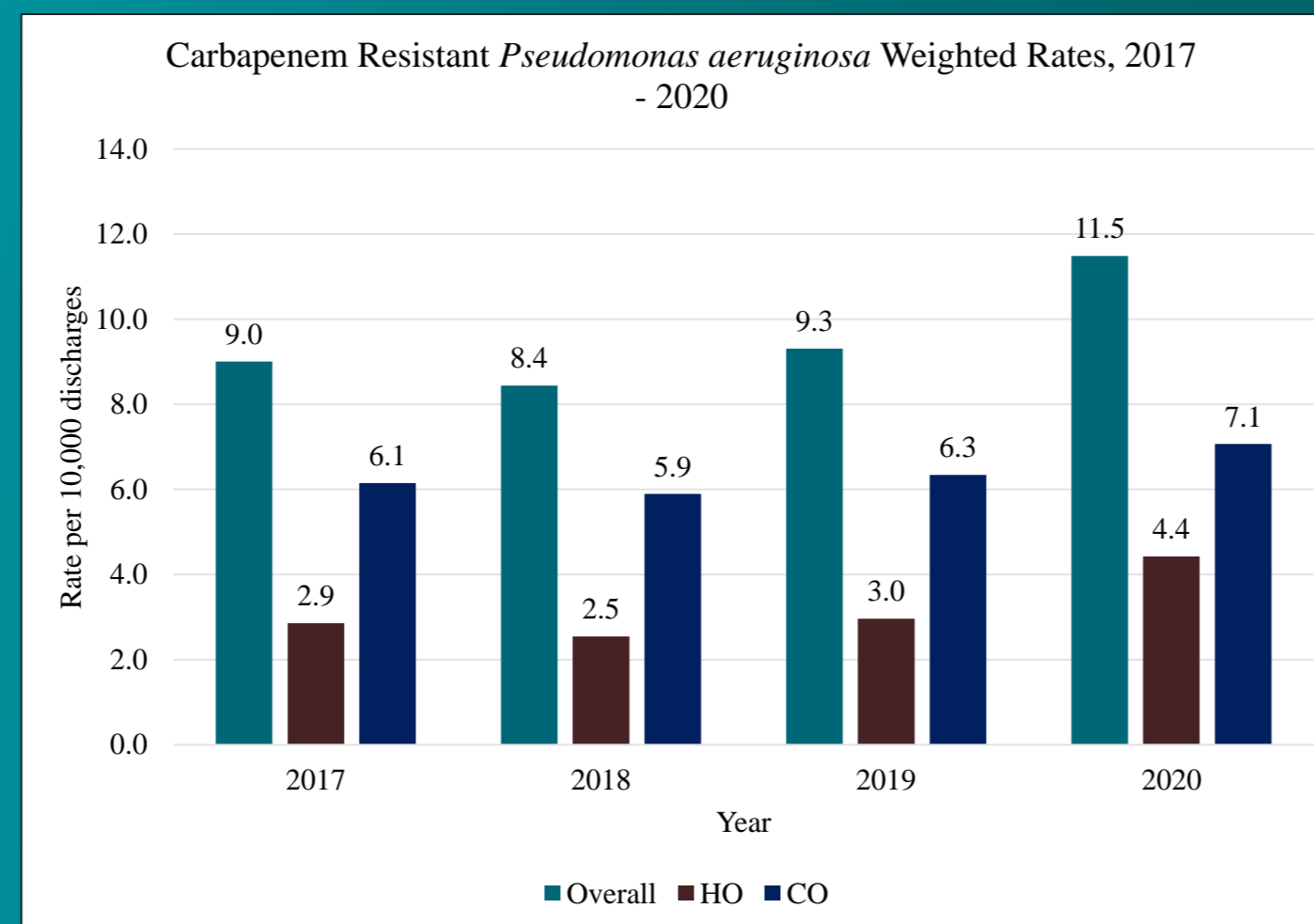
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BACKGROUND & METHODS

Pseudomonas aeruginosa is an opportunistic pathogen commonly found in the environment, including water and plumbing, which may serve as a reservoir of spread. We examined *P. aeruginosa* and carbapenem resistant *P. aeruginosa* (CRPA) rates and trends in recent years.

- 2017-2020 data obtained from hospital cohort in the PINC – AI Healthcare Database
- Identified a cohort of inpatients with any clinical culture yielding an isolate of *P. aeruginosa* with accompanying susceptibility testing results
- CRPA was defined as any isolate with at least 1 resistant result to imipenem, meropenem, or doripenem
- Community-onset (CO) was defined as when the culture was obtained immediately preceding admission or within the first 3 days of hospitalization
- Hospital-onset (HO) was defined as when the culture was obtained on day 4 or later
- We used monthly hospital level data to control for
 - hospital characteristics
 - month of discharge
 - proportion of patients in specific age groups
 - and proportion of male patients
- We developed weights using a raking procedure to match the American Hospital Association distribution for acute care hospitals to produce national estimates
- Weighted multivariable logistic regression models were used to estimate national trends in rates per 10,000 discharges

Rates of *P. aeruginosa* and Carbapenem-resistant *P. aeruginosa* increased in 2020, largely driven by increases in hospital-onset infections.



*Indicates statistical significance at the P<0.05 level

RESULTS & CONCLUSIONS

P. aeruginosa

- HO rates increased 29% in 2020 compared with 2019 (p<.0001)
- From 2019 – 2020, overall adjusted rates increased 7% (p=0.037)

CRPA

- HO rates increased 44% in 2020 compared with 2019 (p=0.001)
- Increases from 2019 to 2020 in overall adjusted rates were not significant

We observed an increase in the overall rate of *P. aeruginosa* in 2020 compared with 2019, driven by an increase in HO *P. aeruginosa* rates. HO CRPA rates also increased. These increases were consistent with reports of increases in other HO antibiotic resistant infections during 2020. Further evaluation of drivers of increasing HO *P. aeruginosa* infections is warranted, including exploration of the hypothesis that pandemic-associated changes in water use and management, such as intermittent closure and reopening of hospital units, may have increased exposure to water harboring *P. aeruginosa*.

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