

# Environmental Contamination of Rooms of Patients Harboring Multidrug-Resistant Organisms

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## Background

- Healthcare environment multidrug-resistant organism (MDRO) contamination is an important source of healthcare-associated MDRO transmission.
- We aimed to determine the concordance of MDRO isolate recovery from patient swabs and hospital room environmental surfaces to evaluate the potential benefit of patient decolonization.

## Methods

- MDRO+ patients were identified by positive clinical microbiology results with target MDROs at any cultured site (Figure 1).
- Control patients without a known MDRO infection were sampled from the same ward at the time of sampling MDRO+ patients.
- After rectal and inguinal swabs were collected, high touch room and toileting surface composites were sampled (350mm<sup>2</sup>).
- Patient swabs were plated on MDRO-selective media.
- Sponge sticks were processed in a stomacher, and the resulting homogenate was centrifuged.
- Resuspended pellets were plated on nonselective media to quantify microbial burden and screened with MDRO-selective media.
- Isolates were identified by MALDI-TOF.
- AST was confirmed by Vitek 2

**Multidrug-Resistant Organism** contamination of patient room environmental surfaces is an important reservoir for ongoing transmission. Concordance of clinical, patient and environmental isolates support the premise that effective patient decolonization strategies could reduce healthcare environment contamination.



Figure 1: Environmental Sample Processing Scheme

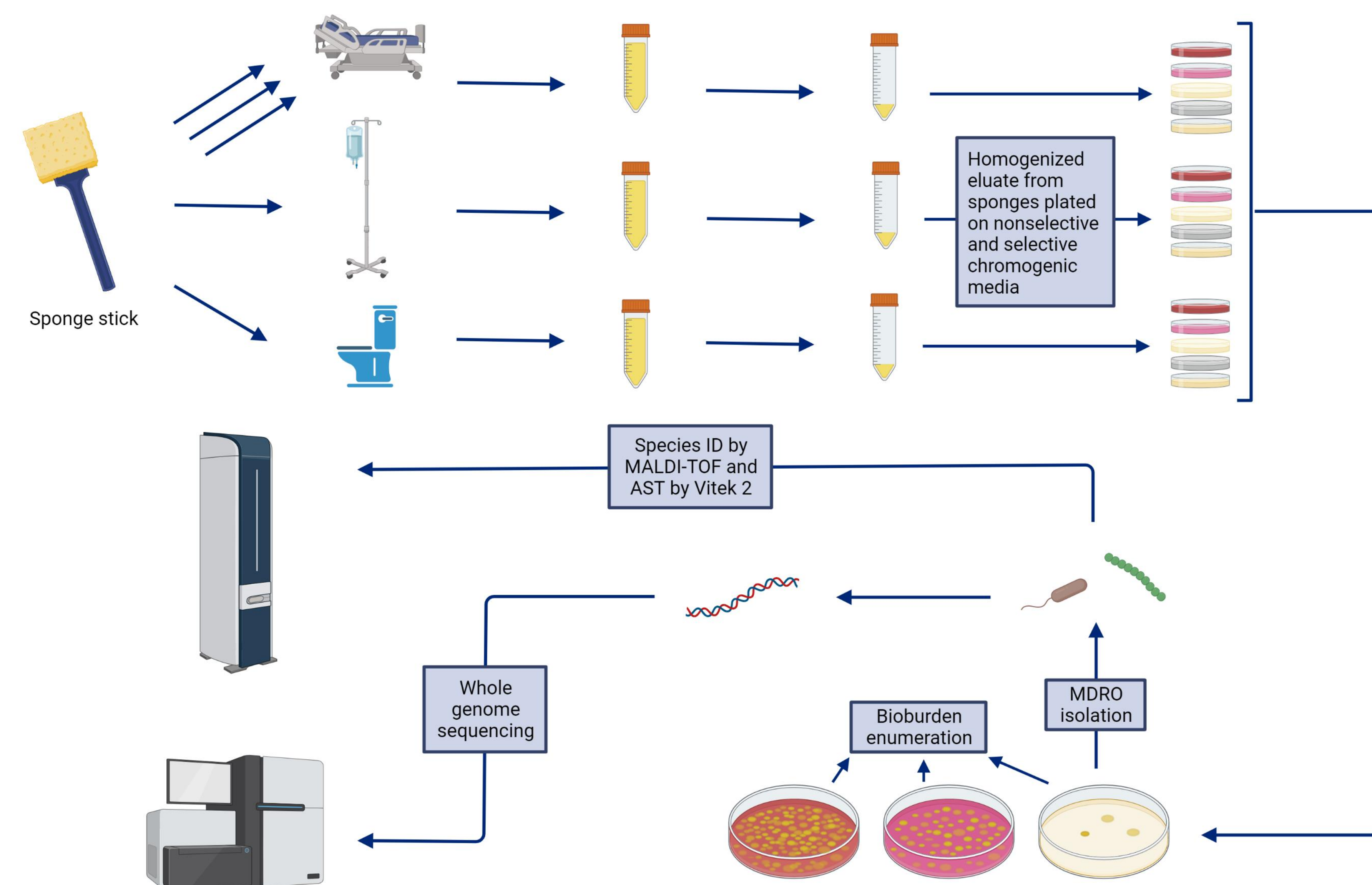


Table 1: MDROs Isolated from Patient and Composite Swabs

Patient	Clinical MDRO detected	Patient Swab <sup>1</sup>			Environmental Composite Qualitative Results <sup>2</sup>			Environmental Composite MDRO Bioburden
		P1	P2	P3	C1	C2	C3	
1	ESCRE	ND	ND	ND	NG	NG	NG	n/a
2	CRAB	CRAB VRE CRPA ESBL	CRAB VRE	CRAB VRE	CRAB (225 cfu/mL) VRE (30 cfu/mL)	CRAB (1 cfu/mL)	NG	CRAB (83 cfu//350mm <sup>2</sup> ) VRE (111 cfu//350mm <sup>2</sup> )
3	CRPA	NG	CRPA	ND	NG	NG	NG	n/a
4	ESCRE	ESCRE	ESCRE	ND	NG	NG	ESCRE (1 cfu/mL)	ESCRE (1 cfu//350mm <sup>2</sup> )
5	VRE	VRE	NG	VRE	VRE (2 cfu/mL)	VRE (25 cfu/mL)	NG	VRE (106.8 cfu//350mm <sup>2</sup> )
6	CRE	CRE VRE	CRE ESBL	ND	NG	NG	NG	n/a
7	ESCRE	ESCRE CRE VRE	ESCRE CRE	ND	ESCRE (10 cfu/mL)	NG	NG	ESCRE (42 CFU/350mm <sup>2</sup> )
8	VRE	VRE	VRE	ND	VRE (1 cfu/mL)	NG	NG	VRE (1 CFU/350mm <sup>2</sup> )
10	VRE	ND	VRE	ND	NG	NG	NG	n/a
12	ESCRE	ESCRE	VRE	ND	NG	NG	NG	n/a
14	ESCRE	ESCRE	NG	ND	NG	NG	NG	n/a
16	ESCRE	ND	ND	ND	NG	NG	NG	n/a

Patient	Patient Swab <sup>1</sup>	Patient Swab <sup>1</sup>			Environmental Composite Qualitative Results <sup>2</sup>			Environmental Composite MDRO Bioburden
		P1	P2	P3	C1	C2	C3	
9	Control	NG	VRE	ND	NG	NG	NG	n/a
11	Control	NG	NG	ND	NG	NG	NG	n/a
13	Control	ESCRE	NG	ND	NG	NG	NG	n/a
15	Control	ESCRE CRPA	NG	ND	ESCRE (1 cfu/mL)	NG	NG	ESCRE (1 CFU/350mm <sup>2</sup> )
17	Control	NG	NG	ND	NG	ESCRE VRE	NG	ESCRE (1 CFU/350mm <sup>2</sup> ) VRE (CFU/350mm <sup>2</sup> )

Abbreviation: CRAB: carbapenem-resistant *Acinetobacter baumannii*; CRPA: carbapenem-resistant *Pseudomonas aeruginosa*; ESCRE: extended spectrum cephalosporin-resistant *Enterobacteriaceae*; VRE: vancomycin-resistant *Enterococcus*; ND: not done; NG: no growth; N/A: not applicable

<sup>1</sup>Patient Swab P1: peri-rectal; P2: wound or tracheostomy; P3: inguinal

<sup>2</sup>Environmental Swab C1: TV remote, telephone, call button and bed rails; Composite 2: room door handle, IV pole and overbed table; Composite 3: toileting surfaces

## Results

- Twelve patients were identified with target MDRO clinical cultures. Among these, 10/12 (83%) had a concordant MDRO recovered from patient swabs.
- Concordant MDROs were isolated in surface composites of 5/12 (42%) patients.
- Among five sampled controls, 60% were MDRO colonized, 20% had concordant surface results.
- Further NGS analysis is ongoing.