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Vancomycin resistance in Enterococcus & Staphylococcus and strategies for treatment & prevention

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TISA was first identified in Japan in 1996, it is also termed GISA (Glycopeptides-intermediate Staphylococcus aureus), and these bacterial strains present a thickening of the cell wall, which is believed to reduce the ability of vancomycin to reach there site of action on the level of cytoplasmic membrane D-ala-D-ala. In the Staphylococcus aureus, high level of vancomycin resistance has been rarely reported. In-vivo and in vitro experiments carried out in the year 1992 showed that from Enterococcus faecalis, the vancomycin resistance genes could be transferred by gene transfer to Staphylococcus aureus, granting high level vancomycin resistance to S.aureus. In the year 2002, a VRSA strain was mainly isolated from a patient in Michigan. The definition of hVISA according to Hiramatsu et al. is a strain of Staphylococcus aureus that gives resistance to vancomycin at a frequency of 10-6 colonies or even higher. Strains of hVISA and VISA do not have resistant genes found in Enterococcus and the proposed mechanisms of resistance include the sequential mutations resulting in a thicker cell wall and the synthesis of excess amounts of D-ala-D-ala residues. VRSA strain acquired the vancomycin resistance gene cluster vanA from VRE. An alternative to Vancomycin should be used, specifically for isolates with a Vancomycin MIC>2 mcg/mL. The method is to treat with at least one agent to which VRSA/ VISA is supposed to be susceptible by in vitro lab testing. The agents that are used include linezolid, daptomycin, Ceftaroline, Telavancin, quinupristin-dalfopristin. Use of appropriate infection control practices (such as wearing gloves before and after contact with infectious body substances and adherence to hand hygiene) by healthcare personnel can reduce the spread of VISA and VRSA. Treatment failure under therapeutic levels of vancomycin prompted us to investigate the resistance profile of hVISA D958 strain isolated from blood culture at SFH in KSA.

Biography

SuleimanAl-Obeid, MD, PhD, wascompleted his residency in Internal Medicine at Damascus University School of Medicine inSyriaand Paris 6university in France. Dr al-Obeiddid his Clinical and microbiological esearchon the mechanism of bacterial resistance in the molecularResearch laboratory at Paris6 university Department of Microbiology, School of Medicine. Dr al-Obeidwas Assistant Professor atDamascus University School of Medicine. He is a member in the French&European society of microbiology. Dr.al-Obeid hasseveral scientific papers and projects either presented or published. He is an internationally recognized expert in many areas of advanced medicine including Internal Medicine, infectious Diseases & ClinicalMicrobiologic Research. He is a regularly sought after and requested lecturer at the majority of major medical schools, health systems, and National Medical Symposiums throughout the United States and Europe. Dr.al-Obeidis reviewer for Several International Journal of Medicine in clinical microbiology and infection control. Recent publications include a paperon the resistance of Heterogeneous vancomycin resistance staphylococcus Aureus & another on the epidemiology of extensive drug resistant Acinetobacterbaumannii. Dr. al-Obeidis recognized by his peers as a Scientific and Medical expert that integrates new protocol in the treatment of multi-drugresistant gram negative bacteria like Acinetobacterbaumanniihghly resistant to the most of antibioticsespecially patients suffering fromacute and chronic ventilator associated pneumoniaeVAP and bacteremiain the ICU. Actually Dr.al-Obeidis hadia Arabia. Dr.al-Obeidis an active member of the infectious disease unite and the Co-chairman of infection control departmentat the Security Forces Hospital in Riyadh Saudi Arabia. Dr.al-Obeidis an active member in the club on microbiology and infectious disease in Riyadh. Dr Obeidhas honored several timeat the security forces hospital for his valuable work. Dr Obeidpresents his latest research at the 54th interscienceconfere

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