FAECAL CARRIAGE OF MULTI-DRUG RESISTANCE MICROORGANISMS IN HEALTHY INFANTS

E. González Rio¹, P.M. Rodríguez De Bethencourt Sanjuan¹, E. De Frutos Porras¹, A. Ruiz Garcia¹, M.M. Bueno Campaña¹, J.F.Valverde Canovas², C. Campelo Gutierrez², A. Delgado Iribarren Garcia Campero², G.M. Botija Arcos¹. ¹Paediatric, Hospital Universitario Fundación Alcorcón, Madrid, Spain. ²Microbiology, Hospital Universitario Fundación Alcorcón, Madrid, Spain.

BACKGROUND There is an alarming increase of multi-drug resistance microorganisms (MDRM) in our environment. Different studies have analyzed the MDRM prevalence on healthy children, obtaining heterogeneous results depending on the regional area and the age. The aim of our study is to analyze prevalence of MDRM faecal colonization and evaluate associated risk factors in infants up to 12 months old

METHODS Prospective follow-up study. A cohort of healthy newborn children

RESULTS 178 patientes recruited (51.4% female)

Gestational age	39,7 weeks (IC25-75p: 38,71-40,14)
Newborn weight	3171 gr. (IC25-75: 2912-3446)
Duration of membrane's rupture	8,5 hours (IC25-75: 1,5-11,1)

Vaginal deliveries	88%
Maternal Group B streptococcus colonization	12.6%
Perinatal antibiotics	15%
Hospital's admission	13.1%

	Sample analyzed	Number of children colonized by MDRM
1° month of age	174	1 (0.6%)
6° month of age	157	12 (7.6%)

There were no significant differences in analyzed's variables.
Prevalence of MDRM in children whose mothers were colonized by Group B streptococcus at birth (**19% vs 5.9%, p=0.06**)

CONCLUSIONS MDRM faecal colonization in healthy children in our hospital (pending of complete sample) seems to be high, similar to those reported in developed countries, underlining the importance of this population as MDRM's reservoir