

Staph sepsis increases mortality in preterm infants

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"Practices should provide equal focus on prevention and management of both MRSA and MSSA infections among VLBW infants."

More information: <u>Abstract</u> <u>Full Text (subscription or payment may be required)</u>

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(HealthDay) -- Only about 1 percent of very low birth weight (VLBW) infants develop methicillinresistant *Staphylococcus aureus* (MRSA) infections, and the morbidity and mortality are similar to that seen in infants with methicillinsusceptible *S. aureus* (MSSA) infections, according to a study published online March 12 in *Pediatrics*.

Andi L. Shane, M.D., M.P.H., from the Emory University School of Medicine in Atlanta, and colleagues analyzed data on morbidity and mortality for 8,444 VLBW infants (birth weight, 401 to 1,500 g), of whom 316 (3.7 percent) had *S. aureus* bacteremia and/or meningitis.

The researchers found that 88 of the 316 cases (28 percent) were MRSA and 228 cases (72 percent) were MSSA, with no overlap. The two groups were similar in terms of morbidities such as the need for mechanical ventilation, diagnosis of respiratory distress syndrome, and necrotizing enterocolitis. Nearly all (99 percent) of MRSA infections occurred >72 hours after birth. Mortality was high but similar in the resistant and susceptible groups (26 versus 24 percent).

"Few VLBW infants had *S. aureus* bacteremia and/or meningitis. The 1 percent with MRSA had morbidity and mortality rates similar to infants with MSSA," Shane and colleagues conclude.



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