National Center for Emerging and Zoonotic Infectious Diseases



A regional approach to understanding the capacity to detect, respond to and contain carbapenem-resistant organisms

ReLAVRA+ Meeting July 11-13, 2023

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No conflicts of interest to disclose

Overview of multi-regional project

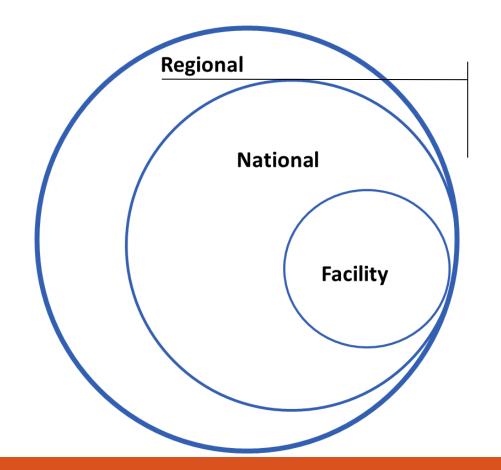
Goal

 To gain a better understanding of regional-, national-, and facility-level capacities and barriers to detect, respond to, and contain carbapenemresistant organisms (CROs)/carbapenemase-producing CROs (CP-CROs) in resource-limited settings in order to advocate for solutions and advance preparedness and response

Objectives

- Synthesize existing epidemiologic data on CROs, focusing on CP-CROs where data are available
- Examine national-level capacities for CRO/CP-CRO detection, response, and containment
- Investigate facility-level capacities for CRO/CP-CRO detection, response, and containment
- Identify national- and facility-level barriers to implementation of recommended CRO/CP-CRO prevention and containment strategies and explore opportunities to mitigate
- Present a call to action and a framework for regional CRO/CP-CRO containment

 Phased, mixed-methods approach to generate data at the regional, national, and facility levels

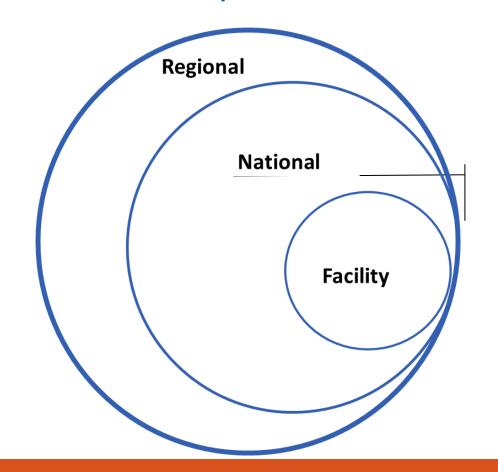


Broad focus, capturing outcome data for all countries in the region for which data exists.

Accomplished via literature and AMR data review.

- Time frame
- Search strategy and terms
- Exclusion/inclusion criteria
- Languages
- Standard data abstraction forms and table shells

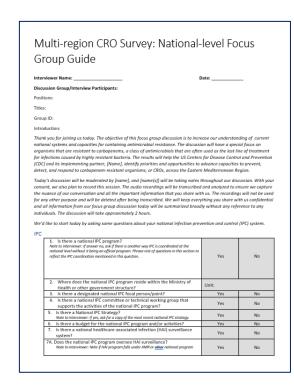
 Phased, mixed-methods approach to generate data at the regional, national, and facility levels



Survey of national capacities in the region.

- Survey and database development
- Country selection
- Participants

 Phased, mixed-methods approach to generate data at the regional, national, and facility levels



Information collected includes:

- National level Infection Prevention and Control programs
- National AMR programs
- National antimicrobial stewardship programs and activities
- Routine reporting of healthcare-associated infections and AMR
- Reporting of alerts and outbreaks
- Impact of COVID-19

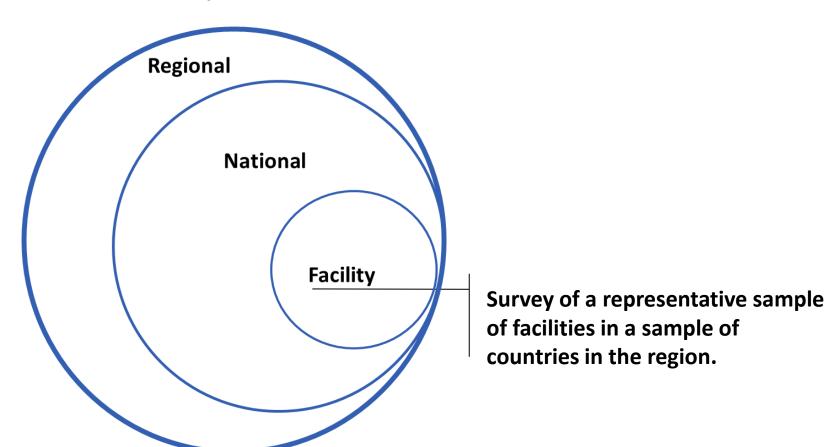
 Phased, mixed-methods approach to generate data at the regional, national, and facility levels



National Reference Laboratory information:

- Structure and organization
- Quality and standards
- Testing capacity for multidrug-resistant organisms
- Testing capacity for CRO/CP-CRO
- Reporting and analysis

 Phased, mixed-methods approach to generate data at the regional, national, and facility levels



Regions

- Latin America and the Caribbean
- Middle East and North Africa
- Eastern Europe and Central Asia
- Southeast Asia

CRO project implementation in Latin America and the Caribbean

CRO project in Latin America and the Caribbean

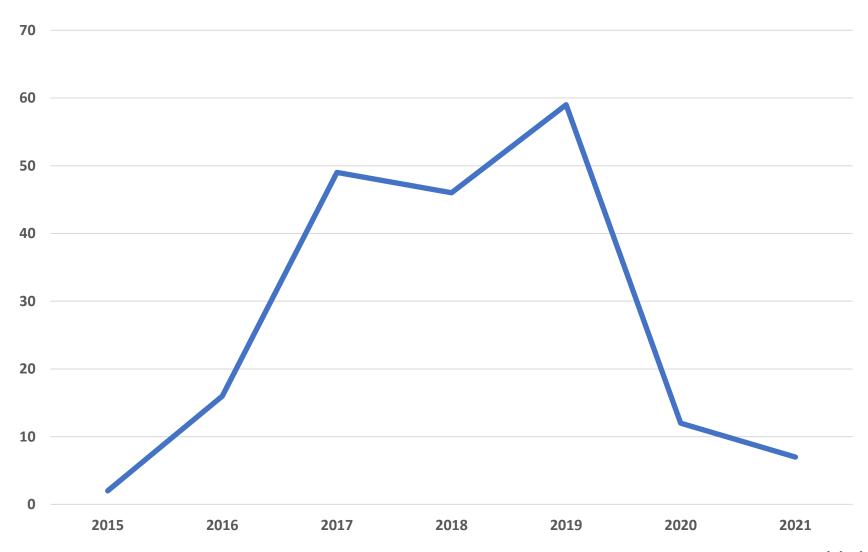
- Implemented by PAHO
- Status of the different phases in the region:
 - Regional level
 - Literature and data review already done
 - National level
 - Currently in process
 - Facility level
 - It will take place in the second half of 2023

Literature review: objective and methodology

Objective:

- To identify articles and cases published in 2015-2021 that discuss carbapenem resistance in *Enterobacterales*, *Acinetobacter baumannii* (AB) and *Pseudomonas aeruginosa* in the Latin American and Caribbean region.
- Review conducted by identifying articles and cases in PubMed, SciELO,
 Lilacs, Embase, Cochrane, Google Scholar databases and other sources.

Number of articles identified in the region, by year



Literature review: main findings

225 CROs/CP-CROs articles identified:

- Most of the articles were from Brazil, Colombia, Argentina and Mexico
- Data from 198 (88%) of the articles was from inpatient units in hospitals
- Carbapenemase production was described in 177 (79%) of the articles
- Most studies used CLSI guidelines and PCR for carbapenemase-specific gene/enzyme detection

Literature review: main findings

The focus of the 225 articles was:

- Enterobacterales: 125 (56%)
- A. baumannii: 44 (20%)
- P. aeruginosa: 27 (12%)
- Combinations of the most critical carbapenem-resistant bacterial families, resistance mechanisms, and global impact of the spread of these pathogens: 29 (13%)

Carbapenemases detected in *A. baumannii,* based on literature from Latin America and Caribbean, 2015-2021

No. CRO isolates	Tested carbape nemase	NDM n (%)	KPC n (%)	OXA n (%)	IMP n (%)	VIM n (%)	Other n (%)	2 or more n (%)
4279	3022 (70)	34 (1)	45 (2)	2791 (92)	21 (1)	2 (0)	1 (0)	128 (4)

Carbapenemases detected in *P. aeruginosa,* based on literature from Latin America and Caribbean, 2015-2021

No. CRO isolates	Tested carbape nemase	NDM n (%)	KPC n (%)	OXA n (%)	IMP n (%)	VIM n (%)	Other n (%)	2 or more n (%)
920	316 (34)	0 (0)	67 (21)	1 (0)	39 (12)	153 (48)	79 (25)	37 (12)

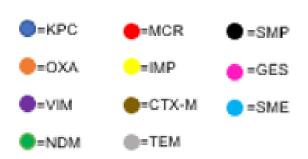
Carbapenemases detected in *K. pneumoniae*, based on literature from Latin America and Caribbean, 2015-2021

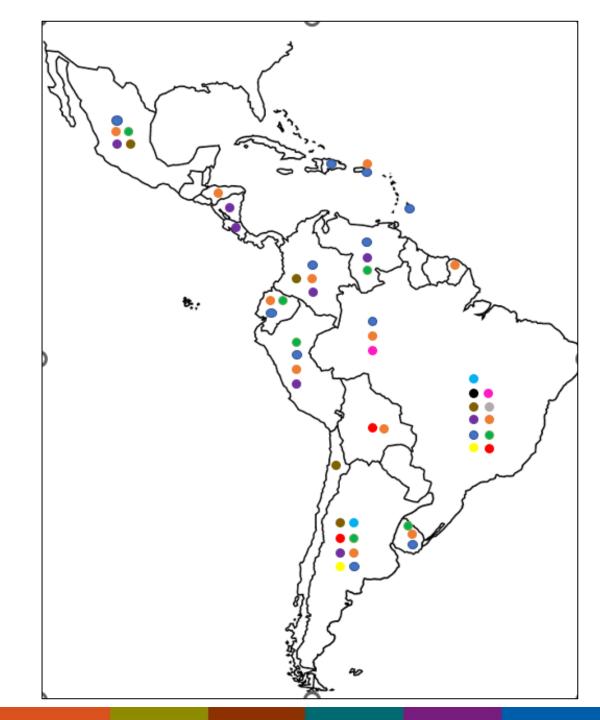
No. CRO isolates	Tested carbape nemase	NDM n (%)	KPC n (%)	OXA n (%)	IMP n (%)	VIM n (%)	Other n (%)	2 or more n (%)
3231	1431 (44)	176 (12)	1152 (81)	0	0	0	66 (5)	38 (3)

Carbapenemases detected in *E. coli*, based on literature from Latin America and Caribbean, 2015-2021

No. CRO isolates	Tested carbape nemase	NDM n (%)	KPC n (%)	OXA n (%)	IMP n (%)	VIM n (%)	Other n (%)	2 or more n (%)
2298	1031 (45)	104 (10)	673 (63)	2 (0)	0	0	163 (16)	89 (9)

Carbapenemases reported in the articles by countries in the region, 2015-2021





National level assessments in the Latin American and Caribbean region

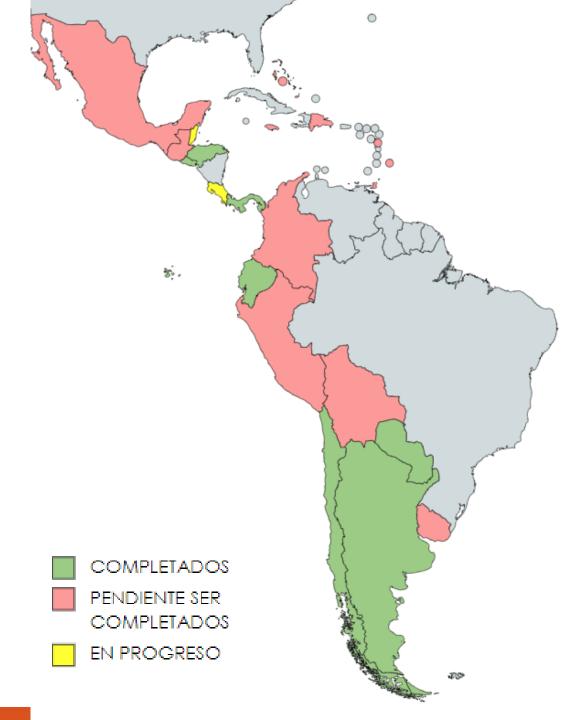
Formal memorandum and invitation sent to countries

Virtual interviews are scheduled with the designated personnel from the Ministry of Health in each country

Data entered in a REDCap database

Status of national level assessments in the region

	Number of countries
Completed	7
In progress	2
Pending to be completed	12



Next steps

- Selecting countries for facility level CRO assessments
- Conducting facility assessments
- Analyzing data
- Developing final documents

The findings and conclusions in this presentation are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.