

|  |
| --- |
| Antimicrobial resistance among Victorian *Shigella* isolates |
| 1 January to 31 December 2018 |

There were 207 culture-positive cases of shigellosis notified to the Victorian Government Department of Health and Human Services in 2018. Antimicrobial susceptibility data were available for 195 cases, as tested by the Microbiological Diagnostic Unit Public Health Laboratory (MDU PHL). The data were current as at 16 February 2019.

Key risk factors for shigellosis in Victoria include international travel and men who have sex with men (MSM). Risk factor data was available for all 195 cases.

**Table 1: Antimicrobial resistance among *Shigella* isolates by species, 2018**

|  |  |  |  |
| --- | --- | --- | --- |
| Antibiotic(s) | All speciesN = 195\*\*\* (%) | *Shigella flexneri*n = 66 (%) | *Shigella sonnei*n = 119 (%) |
| Ampicillin | 127 (65) | 59 (89) | 62 (52) |
| Azithromycin | 78 (40) | 24 (36) | 54 (45) |
| Cefotaxime | 15 (8) | 2 (3) | 12 (10) |
| Ciprofloxacin\* | 73 (37) | 12 (18) | 60 (15) |
| Co-trimoxazole | 154 (79) | 49 (74) | 99 (83) |
| Ciprofloxacin and Azithromycin | 39 (20) | 2 (3) | 37 (31) |
| Multi Drug Resistant\*\* | 93 (48) | 31 (47) | 61 (51) |

\* Includes both resistant and non-susceptible isolates

\*\* Resistance to three or more of ampicillin, azithromycin, cefotaxime, ciprofloxacin and co-trimoxazole

\*\*\*The 195 *Shigella* isolates comprised *S. sonnei* (119), *S. flexneri* (66), S. boydii (6), *S. dysenteriae* (3) and one *Shigella* genus not speciated.

**Table 2: Antimicrobial resistance among *Shigella* isolates by risk factor, 2018**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Antibiotic(s) | All casesN = 195 (%) | International traveln = 90 (%) | MSMn = 54 (%) | No known risk factorn = 27 (%) | Other1n = 24 (%) |
| Ampicillin | 127 (65) | 38 (51) | 51 (94) | 20 (74) | 18 (75) |
| Azithromycin | 78 (40) | 9 (10) | 45 (83) | 13 (48) | 11 (46) |
| Cefotaxime | 15 (8) | 9 (10) | 2 (4) | 4 (15) | 0 |
| Ciprofloxacin2 | 73 (37) | 32 (36) | 23 (43) | 10 (37) | 8 (33) |
| Co-trimoxazole | 154 (79) | 63 (70) | 50 (93) | 22 (81) | 19 (79) |
| Ciprofloxacin and Azithromycin | 39 (20) | 6 (7) | 23 (43) | 5 (18) | 5 (21) |
| Multi Drug Resistant3 | 93 (48) | 19 (21) | 44 (81) | 18 (67) | 12 (50) |

1Other include contact with an ill case, travel within Australia and mixed travel/MSM

2Includes both resistant and non-susceptible isolates

3Resistance to three or more of ampicillin, azithromycin, cefotaxime, ciprofloxacin and co-trimoxazole

* *Shigella* infections which are resistant to oral antibiotics are common among MSM and returning travellers. Oral therapy should be tailored according to antimicrobial susceptibility testing. Therapy for severe cases of shigellosis should be discussed with an infectious disease specialist.
* If empirical antimicrobial treatment is required for MSM and overseas-acquired disease and susceptibility results are not yet available or if diagnosis was made by PCR testing only, current recommendations for these sources are:
	+ - * + Overseas travel – azithromycin
				+ MSM – parenteral ceftriaxone or similar third generation cephalosporin.

|  |
| --- |
| To receive this publication in an accessible format phone 1300 651 160 using the National Relay Service 13 36 77 if required.Authorised and published by the Victorian Government, 1 Treasury Place, Melbourne.© State of Victoria, Department of Health and Human Services, March 2019. |