

EARS-NET EQA 2023 Österreich

Institut für Hygiene, Mikrobiologie und Tropenmedizin

Ordensklinikum Linz Elisabethinen

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EARS-Net EQA



- EQA (External Quality Assessment) organisiert durch European Antimicrobial Resistance Surveillance Network (EARS-Net)
- EARS-Net Surveillance of AMR (Antimicrobial Resistance) in der EU (siehe AURES für Ö, ECDC)
- Performance und Vergleichbarkeit der Testergebnisse zwischen Laboren und Ländern
 - Verlässlichkeit der Laborergebnisse
 - Qualität
- konkrete Ziele EQA
 - Qualität der Speziesidentifikation
 - Genauigkeit der qualitativen Resistenztestungen

EARS-Net EQA 2023 Austria

- 871 Labore von 30 EU/EEA Ländern teilgenommen
- 37 Labore in Österreich teilgenommen
- 6 Isolate zur Speziesidentifizierung, Resistenztestung
 - *E. coli*, *K. pneumoniae* (2x), *Acinetobacter baumannii*, *E. faecalis*, *E. faecium*
- Technischen Universität Dänemarks (Technical University of Denmark, National Food Institute (DTU Food))



EARS-Net EQA 2023

- phänotypische Empfindlichkeitstestung (DTU FOOD): Boullion-Mikrodilution u/o Agardiffusion
- 3 Referenzlabore: Konsensus/ Bestätigung
 - EUCAST Development Laboratory, Uppsala, Schweden
 - Microbiological Diagnostic Unit Public Health Laboratory, The Doherty Institute, Australia
 - Antimicrobial Resistance Research Center, National Institute of Infectious Diseases, Japan
- Ganzgenomsequenzierung: Resistenzgene, chromosomale Punktmutationen (DTU FOOD) (ResFinder v4.1, AMRFinderPlus and CARD RGI)
- Antibiotika → EARS-Net
- Speziesidentifikation und Empfindlichkeitstestung nach Routinemethoden (automatisierte Systeme, Boullion-Mikrodilution, Agardilution, Agardiffusion, Gradienten-Diffusionstest)
- EUCAST v13.0; R, I, S

Scoring Empfindlichkeitstestung

Bewertung jeder Drug-Bug-Kombinationen

Bewertung Kategorie S/I/R, Zusatzanagbe MHK/HH

→ Grad der Schwierigkeit

– **leicht**

- erwartete MHK ≥ 2 Verdünnungsstufen entfernt vom BP
- außerhalb der ATU
- BP unverändert

– **schwer:**

- ATU
- < 2 Verdünnungsstufen vom BP entfernt
- kürzlich geänderter BP

→ Schwere des Fehlers

- **Very Major Error (VME):** statt R als S/I ausgeben
- **Major Error (ME):** statt S/I als R ausgeben
- **No Error**

Scoring System: Empfindlichkeitstestung

Table 7. Exercise scoring system for reported AST results in the 2023 EARS-Net EQA

| | | Difficulty of result and expected interpretation | | | | | |
|-------------------------|--------------|--|---------|---------|-----------|--------|--------|
| | | Easy | | | Difficult | | |
| | | R | I | S | R | I | S |
| Obtained interpretation | R | 1 | -3 (ME) | -3 (ME) | 4 | 0 (ME) | 0 (ME) |
| | I | -4 (VME) | 1 | -1 | -1 (VME) | 4 | 2 |
| | S | -4 (VME) | -1 | 1 | -1 (VME) | 2 | 4 |
| | Not reported | - | - | - | - | - | - |

Note: R: resistant, I: susceptible, increased exposure, S: susceptible, standard dosing regimen; VME: very major error, ME: major error; - : no data.

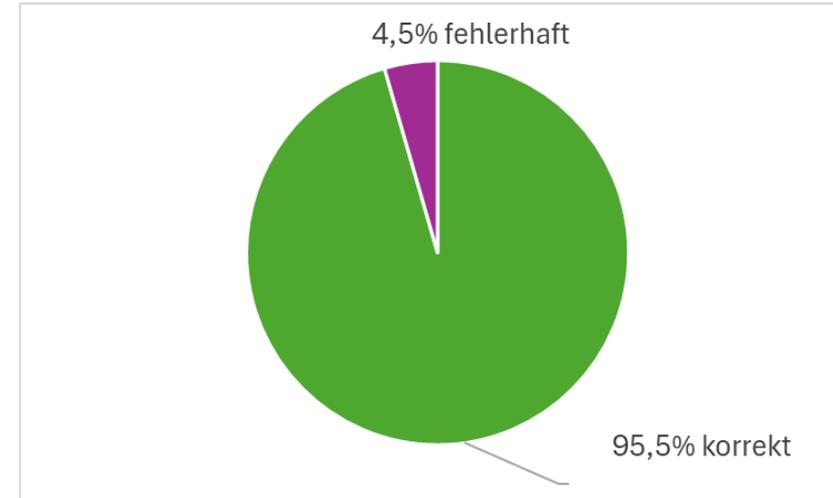
Ergebnisse Speziesdifferenzierung

222/ 222 (100.0%) korrekt

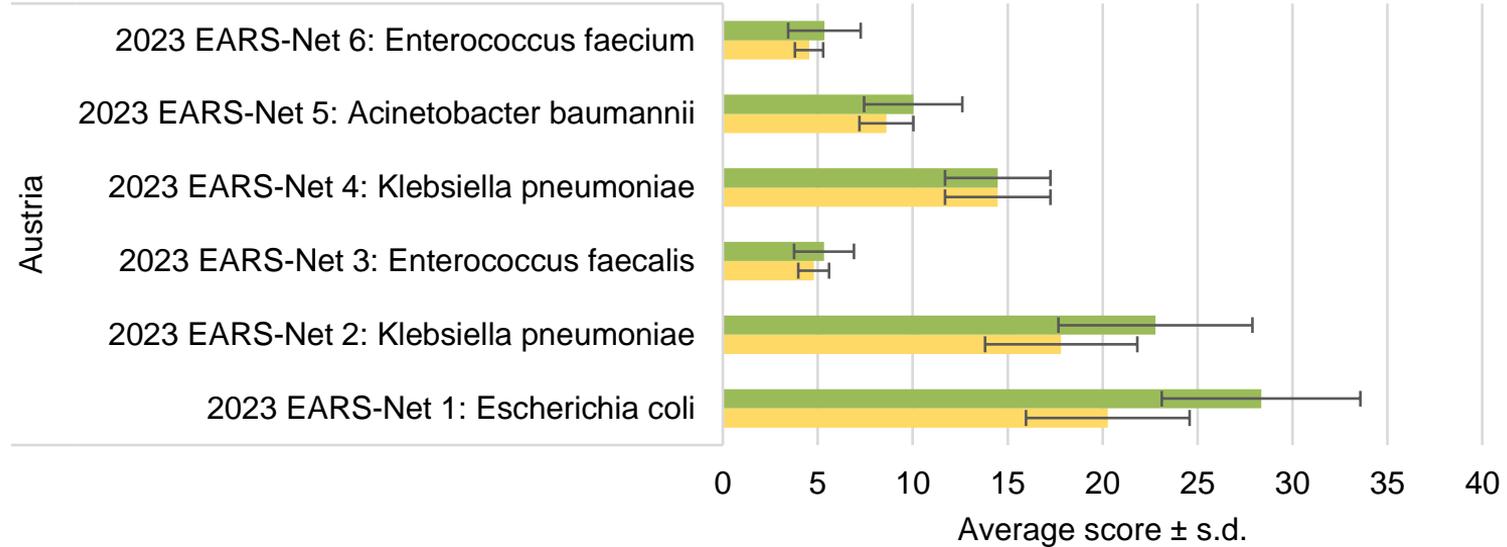
| Austria | Expected species | No. of labs submitting data with interpretation | No. of labs reporting correct species identification | % of labs reporting correct species identification |
|-----------------|--------------------------------|---|--|--|
| Strain ID | | | | |
| 2023 EARS-Net 1 | <i>Escherichia coli</i> | 37 | 37 | 100.0 |
| 2023 EARS-Net 2 | <i>Klebsiella pneumoniae</i> | 37 | 37 | 100.0 |
| 2023 EARS-Net 3 | <i>Enterococcus faecalis</i> | 37 | 37 | 100.0 |
| 2023 EARS-Net 4 | <i>Klebsiella pneumoniae</i> | 37 | 37 | 100.0 |
| 2023 EARS-Net 5 | <i>Acinetobacter baumannii</i> | 37 | 37 | 100.0 |
| 2023 EARS-Net 6 | <i>Enterococcus faecium</i> | 37 | 37 | 100.0 |

Ergebnisse der Empfindlichkeitstestung

- 74 verschiedene Drug-Bug-Kombinationen
- Maximal Score 98
- 2 360 von 2 738 möglichen Ergebnissen
- 2 254 (95.5%) korrekte Interpretation (Average Score 70.5 ± 13.1)



Empfindlichkeitstestung Ergebnisse



■ Average (+/- s.d.) maximum possible score for results submitted by participating laboratories

■ Average (+/- s.d.) reported score for results submitted by participating laboratories

Methoden

| Austria | Total | | |
|-----------------------|----------------------|--------------------------|--------------------------|
| Method | No. of AST performed | % of total AST performed | % correct interpretation |
| Agar dilution | 10 | 0.4 | 100.0 |
| Automated system | 905 | 38.3 | 96.0 |
| Broth microdilution | 97 | 4.1 | 96.9 |
| Disk/Tablet diffusion | 1,078 | 45.7 | 95.6 |
| Gradient test | 268 | 11.4 | 92.5 |
| Other | 2 | 0.1 | 100.0 |
| Total | 2,360 | 100.0 | 95.5 |



2023 EARS-Net 1: *Escherichia coli*

| Antimicrobial | Expected interpretation | (ARGs and PMs)** |
|---------------------------------|-------------------------|--|
| Amoxicillin | R | <i>bla</i> _{OXA-1} , <i>bla</i> _{CTX-M-15} |
| Ampicillin | R | <i>bla</i> _{OXA-1} , <i>bla</i> _{CTX-M-15} |
| Amoxicillin-clavulanic acid**** | R | <i>bla</i> _{OXA-1} |
| Piperacillin-tazobactam**** | R | <i>bla</i> _{OXA-1} |
| Cefotaxime | R | <i>bla</i> _{CTX-M-15} |
| Ceftazidime | I | <i>bla</i> _{CTX-M-15} |
| Ceftriaxone | R | <i>bla</i> _{CTX-M-15} |
| Cefepime | S | <i>bla</i> _{OXA-1} , <i>bla</i> _{CTX-M-15} |
| Meropenem | S | |
| Ertapenem | S | |
| Imipenem | S | |
| Ciprofloxacin | R | <i>aac</i> (6')-Ib-cr, <i>gyrA</i> S83L, <i>gyrA</i> D87N, <i>parC</i> S80I, <i>parC</i> E84V, <i>parE</i> I529L |
| Levofloxacin | R | <i>aac</i> (6')-Ib-cr, <i>gyrA</i> S83L, <i>gyrA</i> D87N, <i>parC</i> S80I, <i>parC</i> E84V, <i>parE</i> I529L |
| Moxifloxacin | R | <i>aac</i> (6')-Ib-cr, <i>gyrA</i> S83L, <i>gyrA</i> D87N, <i>parC</i> S80I, <i>parC</i> E84V, <i>parE</i> I529L |
| Ofloxacin | R | <i>aac</i> (6')-Ib-cr, <i>gyrA</i> S83L, <i>gyrA</i> D87N, <i>parC</i> S80I, <i>parC</i> E84V, <i>parE</i> I529L |
| Tigecycline | S | |
| Tobramycin | R | <i>aac</i> (6')-Ib-cr |
| Amikacin | S | <i>aac</i> (6')-Ib-cr |
| Gentamicin | S | |
| Colistin | S | |

- *bla*_{CTX-M-15} = ESBL
- *aac*(6')-Ib-cr = Aminoglykosid modifizierendes Enzym
- 9/37 haben alle AB getestet
- schwer:
 - PIP/TAZ
 - CAZ
 - FEP
 - AK

EARS-Net 1: *Escherichia coli*

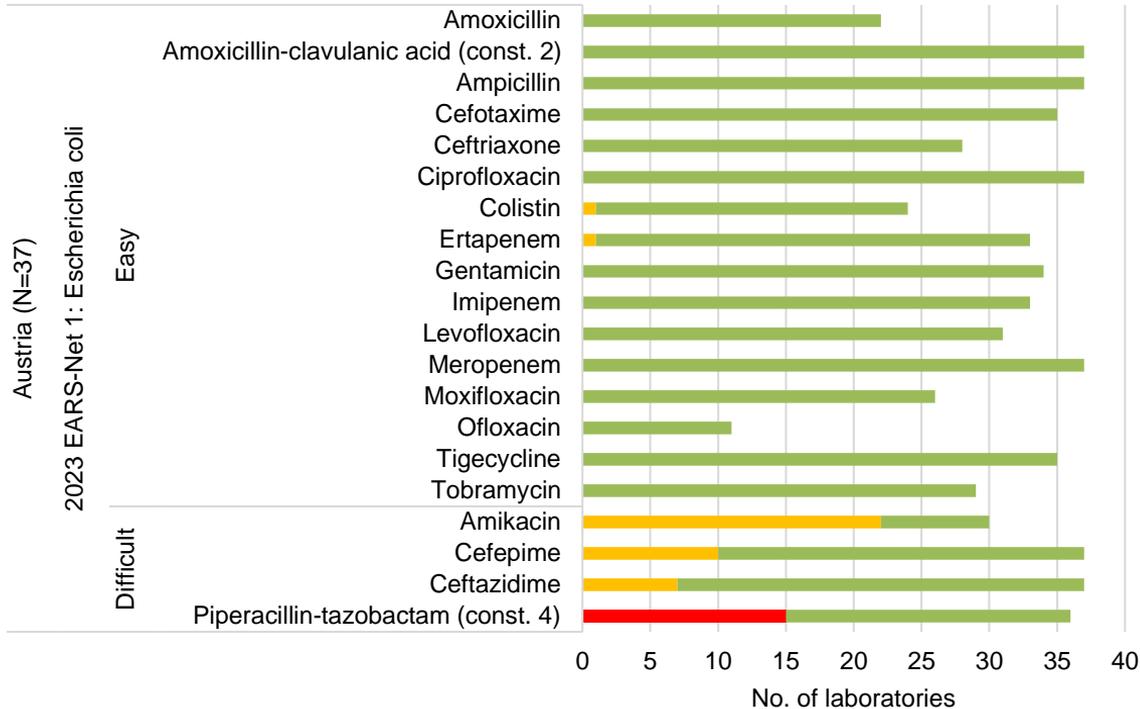
- derselbe Stamm wie 2022
- NEU 2023: 2 Abweichungen im Vgl. zu 2022
 - PIP/TAZ 2023 MHK 16/4 mg/L = R
(2022 MHK= 8/4 mg/L = S)
 - Amikacin 2023 MHK= 8mg/L = S
(2022 MHK = >8 mg/L = R)
- Variabilität des Stammes
- Vergleich 2022 mit 2023 Cefepim:
ME von 20% → 17% ↓
- 27/37 Laboren 2022/2023
mindestens einen VME/ME

EARS-Net 1: *E. coli*



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Schwestern
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■ VME ■ ME ■ No error

91,1% korrekt
6,5% ME
2,4% VME
VME PIP/TAZ

EARS-Net 1: E. coli

- 5/37 alle Ergebnisse richtig
- 3/37 exzellent ($\geq 95\%$)
- 14/37 sehr gut (90%-94%)
- 8/37 gut (85%-89%)
- 5/37 zufriedenstellend (80%- 84%)
- 2/ 37 < 80%

EARS-Net 1: *E. coli*



| Antimicrobial | Expected interpretation |
|---------------------------------|-------------------------|
| Amoxicillin | R |
| Ampicillin | R |
| Amoxicillin-clavulanic acid**** | R |
| Piperacillin-tazobactam**** | R |
| Cefotaxime | R |
| Ceftazidime | I |
| Ceftriaxone | R |
| Cefepime | S |
| Meropenem | S |
| Ertapenem | S |
| Imipenem | S |
| Ciprofloxacin | R |
| Levofloxacin | R |
| Moxifloxacin | R |
| Ofloxacin | R |
| Tigecycline | S |
| Tobramycin | R |
| Amikacin | S |
| Gentamicin | S |
| Colistin | S |

- VME (PIP/TAZ) 41,7%,
- ME (Amikacin) 73,3%
- ME (Cefepim) 27%
- ME (Cefazidim) 18,9%

Methoden unabhängig

Ursache:

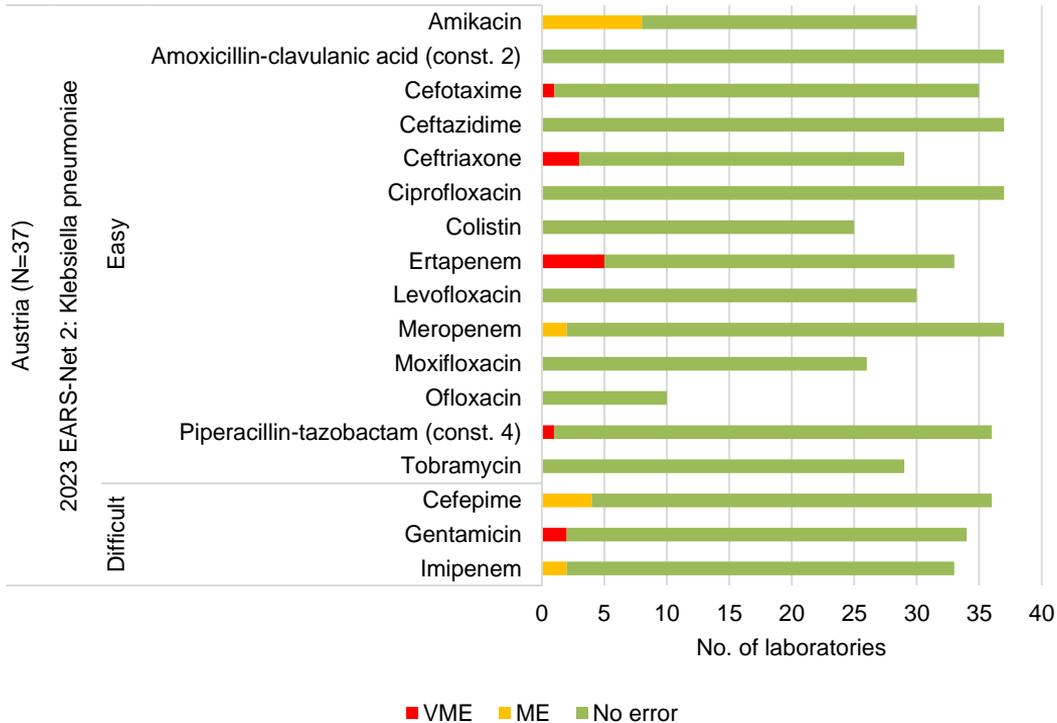
- Methodenvariation
- systematischer oder zufälliger Fehler
- unterschiedl. Expression Resistenzgene

EARS-Net 2 *Klebsiella pneumoniae*

| Antimicrobial | Expected interpretation | (ARGs and PMs)** |
|--------------------------------|-------------------------|--|
| Amikacin | S | aac(6')-Ia |
| Amoxicillin-clavulanic acid*** | R | <i>bla</i> _{VEB-1} , <i>bla</i> _{SHV-11} |
| Cefepime | I | <i>bla</i> _{VEB-1} , <i>bla</i> _{SHV-11} |
| Cefotaxime | R | <i>bla</i> _{VEB-1} , <i>bla</i> _{SHV-11} |
| Ceftazidime | R | <i>bla</i> _{VEB-1} , <i>bla</i> _{SHV-11} |
| Ceftriaxone | R | <i>bla</i> _{SHV-11} |
| Ciprofloxacin | S | |
| Colistin | S | |
| Ertapenem | R | |
| Gentamicin | R | ant(2'')-Ia |
| Imipenem | S | |
| Levofloxacin | S | |
| Meropenem | S | |
| Moxifloxacin | S | |
| Ofloxacin | S | |
| Piperacillin-tazobactam*** | R | <i>bla</i> _{VEB-1} , <i>bla</i> _{SHV-11} , <i>bla</i> _{OXA-10} |
| Tobramycin | R | aac(6')-Ia, ant(2'')-Ia |

- *bla*_{VEB-1} ESBL
- *bla*_{SHV-11} Broad Spectrum
- ant(2'')-Ia, aac(6')Ia = Aminoglykosid modifizierende Enzyme
- additional: ompK36 A217S, ompK37 I70M, ompK37 I128M potentially associated with carbapenem resistance
- 8/37 alle Antibiotika ausgetestet

EARS-Net 2 *Klebsiella pneumoniae*



94,8% korrekt
3% (16) ME
2,2% (12) VME für

- Cefotaxim
- Ceftriaxon
- Ertapenem
- Gentamicin
- PIP/Taz

EARS-Net 2 *K. pneumoniae*

- 16/37 alle Ergebnisse richtig
- 14/37 sehr gut (90%-94%)
- 5/37 gut (85%-89%)
- 1/37 zufriedenstellend (80%- 84%)
- 1/37 < 80%

EARS-Net 2 *K. pneumoniae*

VME

- Ertapenem (15,2%): autom., Agardiff., Gradient.
- Ceftriaxon (10,3%): Agardiff., Gradiententest
- Cefotaxim (2,9%): Gradiententest
- PIP/TAZ (2,8%): autom.

VME: Gentamicin (5,9%): Agardiffusion

ME: Amikacin (26,7%): autom., Agardiff., Gradient.

→ **leicht:** systematischer, zufälliger Fehler, unterschiedl. Expression der Resistenzgene

→ **schwer:** Methodenvariation, systematischer, zufälliger Fehler

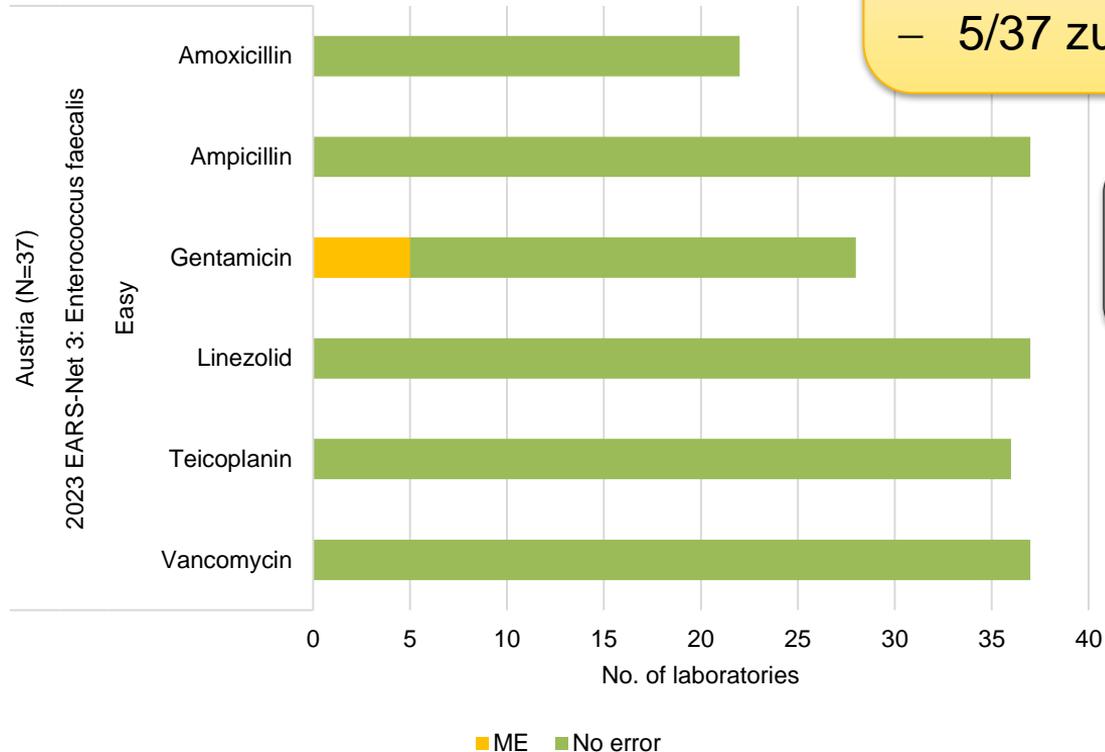
→ **leicht:** systematischer, zufälliger Fehler

EARS-Net 3: *Enterococcus faecalis*

| Antimicrobial | Expected interpretation | (ARGs and PMs)** |
|----------------------------|-------------------------|------------------|
| Amoxicillin | S | |
| Ampicillin | S | |
| Gentamicin (test for HLAR) | S | |
| Linezolid | R | optrA |
| Teicoplanin | S | |
| Vancomycin | S | |

- 19/37 alle 6 Antibiotika getestet
- optrA (Plasmid)
- alle Substanzen Schwierigkeitsgrad „leicht“

EARS-Net 3: *E. faecalis*



- 97,5 % korrekt
- 2,5% ME
- 32/37 korrekt (100%)
- 5/37 zufriedenstellend (80%- 84%)

ME: Gentamicin (17,5%):
Methodenunabhängig

- systematischer, zufälliger Fehler
- Fehlinterpretation: HLAR negativ = S (s. EQA Protokoll)

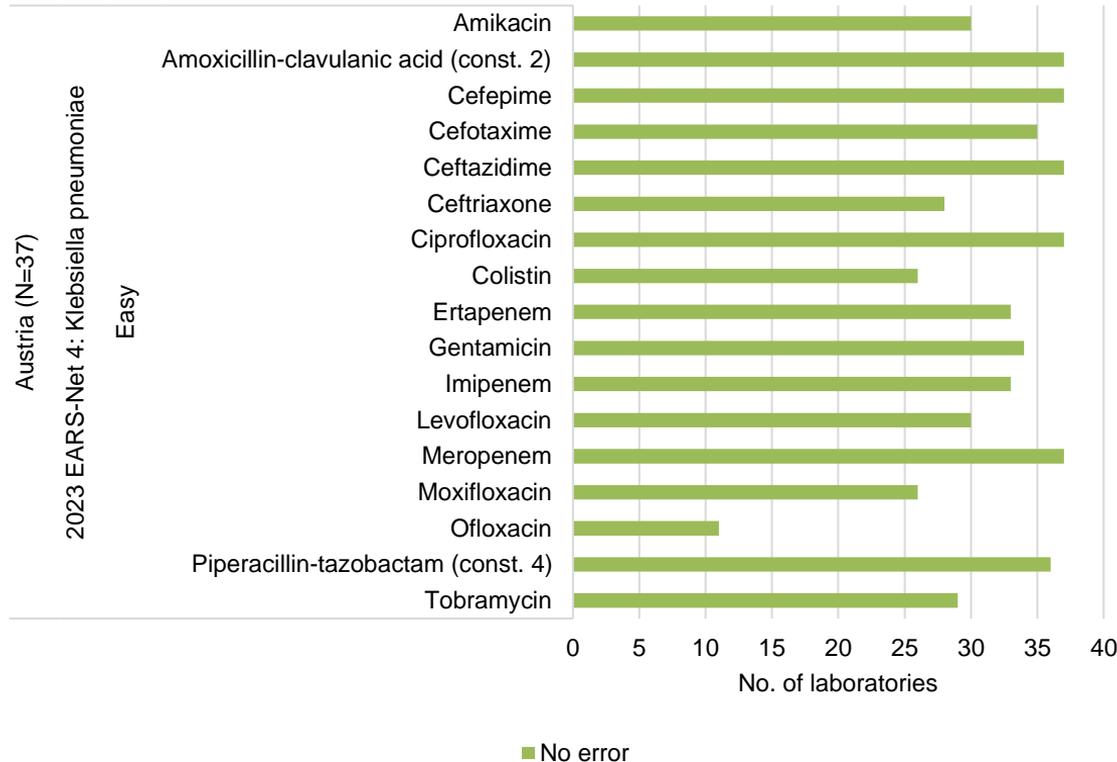


EARS-Net 4: *Klebsiella pneumoniae*

| Antimicrobial | Expected interpretation | (ARGs and PMs)** |
|--------------------------------|-------------------------|--|
| Amikacin | R | rmtB |
| Amoxicillin-clavulanic acid*** | R | <i>bla</i> _{NDM-5} , <i>bla</i> _{OXA-1} , <i>bla</i> _{OXA-181} , <i>bla</i> _{SHV-1} |
| Cefepime | R | <i>bla</i> _{NDM-5} , <i>bla</i> _{OXA-1} , <i>bla</i> _{OXA-181} , <i>bla</i> _{SHV-1} , <i>bla</i> _{CTX-M-15} |
| Cefotaxime | R | <i>bla</i> _{NDM-5} , <i>bla</i> _{SHV-1} , <i>bla</i> _{CTX-M-15} |
| Ceftazidime | R | <i>bla</i> _{NDM-5} , <i>bla</i> _{SHV-1} , <i>bla</i> _{CTX-M-15} |
| Ceftriaxone | R | <i>bla</i> _{SHV-1} , <i>bla</i> _{CTX-M-15} |
| Ciprofloxacin | R | <i>qnrS1</i> , <i>gyrA</i> D87N, <i>gyrA</i> S83F, <i>parC</i> E84K |
| Colistin | R | mgrB W20R |
| Ertapenem | R | <i>bla</i> _{NDM-5} , <i>bla</i> _{OXA-181} |
| Gentamicin | R | rmtB |
| Imipenem | R | <i>bla</i> _{NDM-5} , <i>bla</i> _{OXA-181} |
| Levofloxacin | R | <i>qnrS1</i> , <i>gyrA</i> D87N, <i>gyrA</i> S83F, <i>parC</i> E84K |
| Meropenem | R | <i>bla</i> _{NDM-5} , <i>bla</i> _{OXA-181} |
| Moxifloxacin | R | <i>qnrS1</i> , <i>gyrA</i> D87N, <i>gyrA</i> S83F, <i>parC</i> E84K |
| Ofloxacin | R | <i>qnrS1</i> , <i>gyrA</i> D87N, <i>gyrA</i> S83F, <i>parC</i> E84K |
| Piperacillin-tazobactam*** | R | <i>bla</i> _{NDM-5} , <i>bla</i> _{OXA-1} , <i>bla</i> _{OXA-181} , <i>bla</i> _{SHV-1} , <i>bla</i> _{CTX-M-15} |
| Tobramycin | R | rmtB |

- *bla*_{NDM-5} (MBL, Amb. B)
- *bla*_{OXA-181} (OXA-48- like, Amb. D)
- *bla*_{CTX-M-15} = ESBL
- mgrB W20R = Colistin R (chromosomal)
- Schwierigkeit: leicht

EARS-Net 4: *Klebsiella pneumoniae*



100% korrekt
keine VME
keine ME

EARS-Net 5: *Acinetobacter baumannii*

| Antimicrobial | Expected interpretation | (ARGs and PMs)** |
|---------------|-------------------------|---|
| Amikacin | R | |
| Ciprofloxacin | R | <i>gyrA</i> S81L, <i>parC</i> S84L, <i>parC</i> V104I, <i>parC</i> D105E |
| Colistin | S | |
| Gentamicin | R | <i>ant(2'')-Ia</i> |
| Imipenem | S | |
| Levofloxacin | R | <i>gyrA</i> S81L, <i>parC</i> S84L, <i>parC</i> V104I, <i>parC</i> D105E |
| Meropenem | S | |
| Tobramycin | R | <i>ant(2'')-Ia</i> |

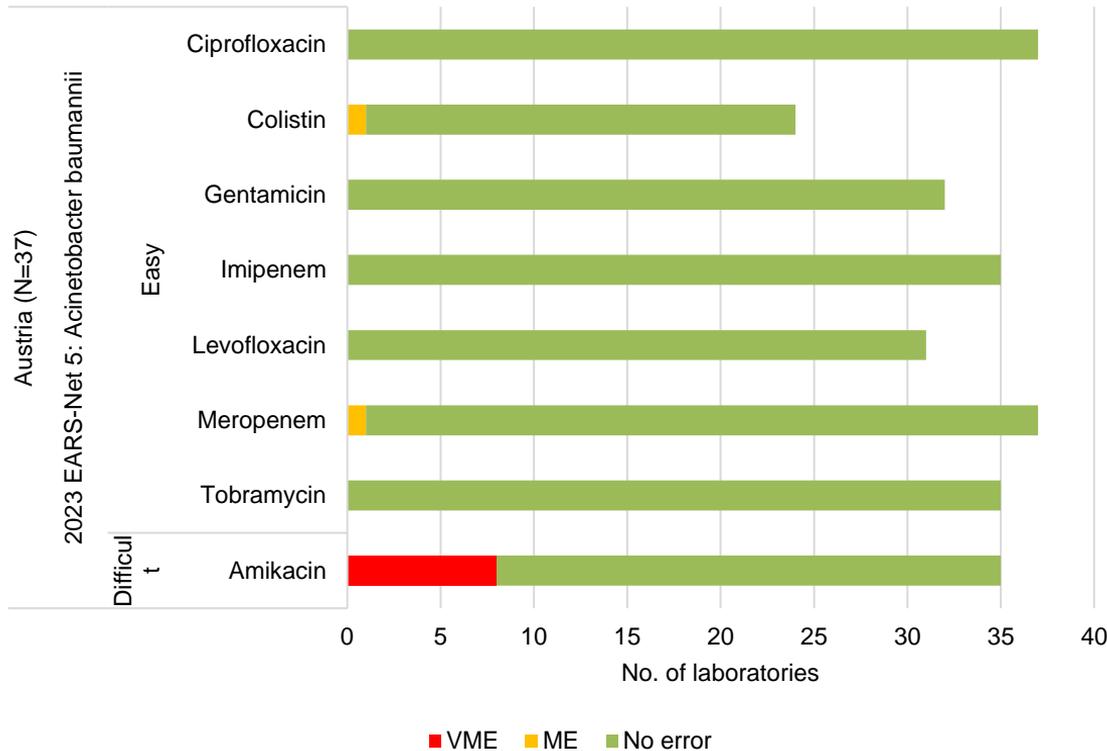
*Additional: ...,aph(3')-Ib, aph(3'')-Ib,
aph(6)-Id,...*
- *able to confer amikacin resistance
(e.g., other aph(3') variants).*

EARS-Net 5: *A. baumannii*



Ordens
klinikum
Linz

Barmherzige
Schwestern
Elisabethinen



96,2% korrekt
3% (8) VME
0,8% (2) ME

VME Amikacin (22,9%):
autom., Agardiff.,
Gradient.

- Methodenvariation
- systematischer, zufälliger Fehler

EARS-Net 5: *A. baumannii*

- 27/37 alle Ergebnisse richtig
- 8/37 gut (85%-89%)
- 1/37 zufriedenstellend (80%- 84%)
- 1/37 < 80%

EARS-Net 6: *Enterococcus faecium*

| Antimicrobial | Expected interpretation | (ARGs and PMs)** |
|-------------------------------|-------------------------|------------------|
| Amoxicillin | R | PBP5-R |
| Ampicillin | R | PBP5-R |
| Gentamicin (test for HLAR) | S | |
| Linezolid | S | |
| Teicoplanin | S | |
| Vancomycin | R | VanHBX |

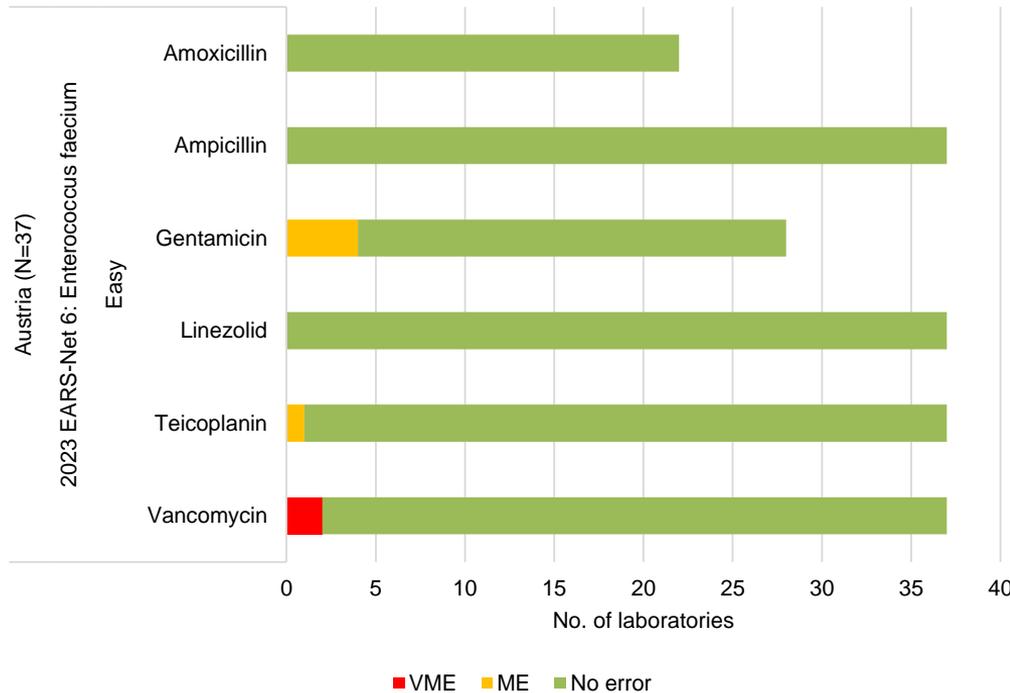
leicht

96,5% korrekt

1% (2) VME: Vancomycin

2,5% (5) ME

EARS-Net 6: *Enterococcus faecium*



30/37 alles korrekt
6/37 zufriedenstellend
1/37 < 80%

VME: Vancomycin
(5,4%) Agardiff.

- systematischer, zufälliger Fehler

ME Gentamicin
(14,3%): automatisiert,
Gradiententest

- System., zufälliger Fehler
CAVE: Fehlinterpretation (no
HLAR = S)



Enterococcus spp.

Expert Rules and Expected Phenotypes

For abbreviations and explanations of breakpoints, see the Notes sheet

In endocarditis, refer to national or international endocarditis guidelines for breakpoints for *E*

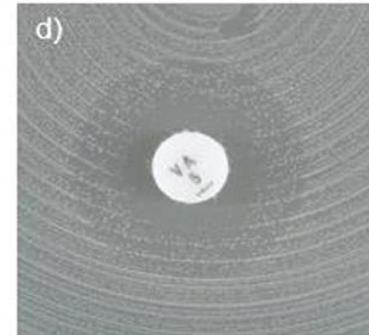
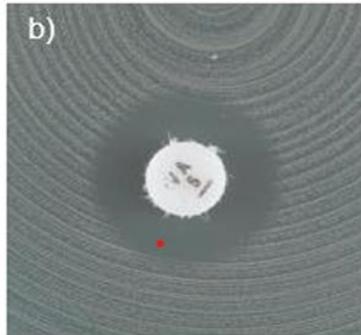
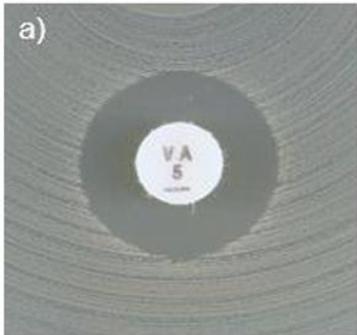
MIC determination (broth microdilution according to ISO standard 20776-1)

Medium: Cation-adjusted Mueller-Hinton broth

Inoculum: 5×10^5 CFU/mL

Incubation: Sealed panels, air, $35 \pm 1^\circ\text{C}$, $18 \pm 2\text{h}$ (for glycopeptides 24h)

Reading: Unless otherwise stated, read MICs at the lowest concentration of the agent that completely



Examples of inhibition zones for *Enterococcus* spp. with vancomycin.

a) Sharp zone edge and zone diameter ≥ 12 mm. Report susceptible.

b-d) Fuzzy zone edge or colonies within zone. Perform confirmatory testing with PCR or report resistant even if the zone diameter ≥ 12 mm.

Empfehlungen



- Protokolle in Übereinstimmung mit EUCAST?
- richtige Kontrollstämme? Monitoring/ Kontrollmechanismen? Qualitätsmanagement?
- Methodenvariabilität zwischen verschiedenen Methoden
- Aminoglykosid-Testung/ Interpretation? Darstellung?
- Cephalosporin-, Carbapenemtestung Variabilität durch unterschiedliche Expression von β -Lactamasen, ggf. Bestätigung (CARBA-Net)
- Personalschulung

Zusammenfassend

- 100% korrekte Speziesidentifizierung
- 2 253/ 2 360 (95,5%) exzellente Übereinstimmung
- 21/37 (56.8%) der Labore haben eine 95% Übereinstimmung erreicht