

10 percent of carbapenem-resistant Enterobacterales cases in U.S. not tied to health care risk factors

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In 2012 to 2015, 10 percent of carbapenem-resistant Enterobacterales (CRE) cases in the United States were community-associated (CA), according to a study published online July 27 in the *American Journal of Infection Control*.

Sandra N. Bulens, M.P.H., from the U.S. Centers for Disease Control and Prevention in Atlanta, and colleagues conducted active, population-based surveillance from January 2012 to December 2015 to identify case patients with cultures positive for Enterobacterales not susceptible to a carbapenem (excluding ertapenem) and resistant to all third-generation cephalosporins. Cases were classified as either health care-associated or CA if the patient had no known health care risk factors and a culture was collected less than three days after hospital admission.

The researchers identified 1,499 CRE cases in 1,194 case patients; of these, 149 cases in 139 patients were CA. The incidence of CRE cases was 2.96 per 100,000 population overall and 0.29 per 100,000 for CA-CRE. Seventy-three percent of the CA-CRE cases were in White persons, 84 percent were in women, and 98 percent were identified from urine [cultures](#). Five of the 12 sequenced CA-CRE isolates harbored a carbapenemase gene.

"While only 10 percent of the CRE cases in our study were determined to be community-associated, this finding, coupled with the fact that five of 12 CRE isolates we sequenced had carbapenemase genes is concerning," Bulens said in a statement. "Further investigation is needed to understand this emergence in the community and how infection [prevention](#) and control efforts can be targeted to reduce spread."

More information: [Abstract/Full Text](#)

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