

MICROBIOLOGICAL STUDY OF ETIOLOGICAL PATHOGEN IN EARLY INFECTION OF OPEN FRACTURE IN ORTHOPEDICS

Tai KM, Ahmad Fadzli S, Nazri MY
Orthopaedics Department IIUM Medical Centre

PURPOSE:

To evaluate the susceptibility of microorganism causing early infection in open fractures to current antibiotic prophylaxis and determine contributing factors towards development of resistance.

METHODS:

A total of 110 cases of open fractures were selected in this study. They underwent routine debridement and C&S were followed up. Risk factors to antibiotic resistance were identified.

RESULTS:

Admission to ICU, blood transfusion, antibiotic regime and duration, fracture grade, injury severity score and duration of admission were significantly associated with resistance of microorganism. There was Gram-negative predominance of 65.9%. The overall resistance to Cefuroxime was 68.6% and 36.9% to Gentamicin. Staphylococcus aureus and MRSA were the commonest Gram-positive while Pseudomonas and Acinetobacter Gram-negative.

DISCUSSIONS:

Resistance in open fracture is not well established unlike rate of infection. Previous studies reported predominant Gram-positive microorganisms which form the basis of prophylactic antibiotics¹. Hannigan et al. reported increasing multi-drug resistance bacterias in open fractures². Carsenti-Etesse et al. reported resistance was influenced by type and duration of antibiotics while others have described various other factors³.

CONCLUSION:

The high resistance of microorganisms and shift to predominantly Gram-negative microorganisms is alarming. Further measures are needed to achieve optimal outcome.

REFERENCES:

1. Gustilo, R.B., (1971). Management of open fractures. An analysis of 673 cases. *Minnesota Medicine*, 54(3), pp.185–189
2. Hannigan, G.D. et al., 2014. Culture-independent pilot study of microbiota colonizing open fractures and association. *Journal of Orthopaedic Research*, 32(4), pp.597–605
3. Carsenti-Etesse, H. et al., 1999. Epidemiology of bacterial infection during management of open leg fractures. *European Journal of Clinical Microbiology and Infectious Diseases*, 18(5), pp.315–323

Characteristics	χ^2 – statistics ^a (df)	p-value
Gender	3.80 (1)	0.051
Age category	4.70 (3)	0.195
Medical Illness	2.82(3)	0.42
Side of injury	2.17 (1)	0.141
ICU	18.19 (1)	< 0.001
Blood transfusion	22.45 (1)	< 0.001
Antibiotic regime	29.99 (3)	< 0.001
Debridement	3.40 (2)	0.183
Fracture Grade	41.6(4)	< 0.001
Injury Severity Score	31.44(4)	< 0.001
Duration of admission	21.18(2)	< 0.001
Duration of Antiiotics	23.45(3)	< 0.001

Table 1: Association between Multiple Variables to Sensitivity of Microorganism