

**GET SMART  
COLORADO**  
USE ANTIBIOTICS WISELY

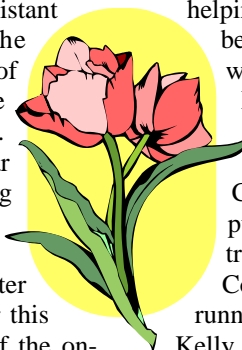
# Provider Newsletter

A resource for Colorado health care providers about antibiotic resistance and efforts to promote the judicious use of antibiotics throughout the state.

## Welcome new Get Smart Colorado staff

### Comings

Get Smart Colorado is pleased to welcome Helen Johnston as assistant project coordinator of the coalition. Helen is a Masters of Public Health student at the University of Colorado Denver. She just completed her first year and looks forward to working with Get Smart Colorado. She will assist with a multitude of projects including this newsletter (you can already thank her for this issue!) and the development of the on-line continuing education program. Helen can be reached at 303-692-3018 or [hjohnsto@cdphe.state.co.us](mailto:hjohnsto@cdphe.state.co.us).



### Goings

Christina Sandoval who has been helping Get Smart Colorado since the beginning of 2007 will soon graduate with her Masters of Science in Public Health from the University of Colorado Denver. As such, she is moving on from Get Smart Colorado to pursue her career in public health. Christina has been a tremendous help with Get Smart Colorado, including keeping things running while the project coordinator, Kelly Kast, was on maternity leave. The coalition will miss her.

## Drug-resistant *S. pneumoniae* update

By Helen Johnston

This article summarizes updated national and Colorado-specific surveillance and trend data for antibiotic non-susceptibility of invasive pneumococcal isolates, also known as drug resistant *Streptococcus pneumoniae* or DRSP. Isolates were collected as part of the “Emerging Infections Program,” which is grant funded by the Centers for Disease Control and Prevention (CDC). The Colorado-specific data for the Denver metro area are comprised of information from Adams, Arapahoe, Douglas, Denver and Jefferson counties. The Denver metro data show trends from fiscal year 2001 to fiscal year 2007. National data demonstrate trends from 1997 to 2006.

The following are highlights from the Colorado surveillance period for fiscal year 2007:

- High-level resistance in Colorado increased from fiscal year 2006 to fiscal year 2007 for all tested antibiotics except TMP/sulfa, erythromycin and amoxicillin (Figure 1). However, high-level resistance to erythromycin remained above 15% of isolates.
- Rates of high-level resistance to meropenem increased to above fiscal year 2001 levels (Figure 1).
- After a period of decreasing rates seen after the introduction of the pneumococcal conjugate vaccine, the non-susceptibility rates of *S. pneumoniae* to penicillin increased in fiscal year 2006 and continued to rise in fiscal year 2007.

### Inside this issue:

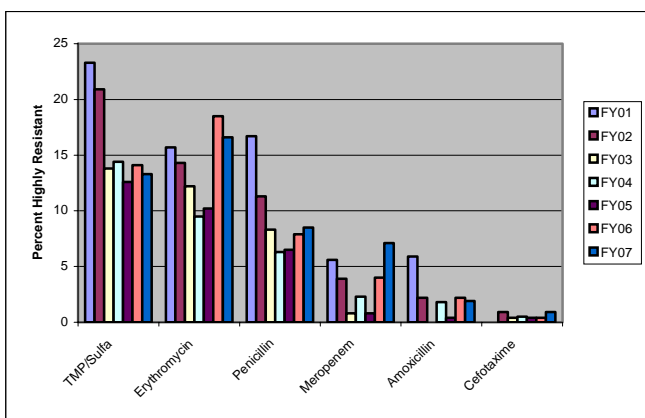
New Get Smart Colorado staff	1
DRSP surveillance information	1
Contributors	2
Upcoming events	3
News briefs	3
Health fair updates	4

### By reading this issue, you will:

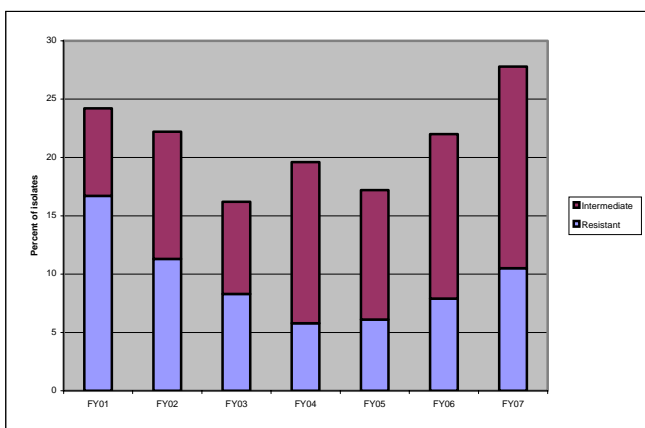
- Understand current trends in *Streptococcus pneumoniae* resistance in Colorado and the United States.
- Learn about Antibiotic Awareness Week (October 6—10, 2008).
- Learn about emerging cases of drug resistant meningococcal disease in the Midwest.

# *S. pneumoniae* (continued from page 1)

**Fig. 1 Trends in High - level Resistance of Invasive Pneumococcal Isolates by Antibiotic, Denver Metro Area July 2000—June 2007**



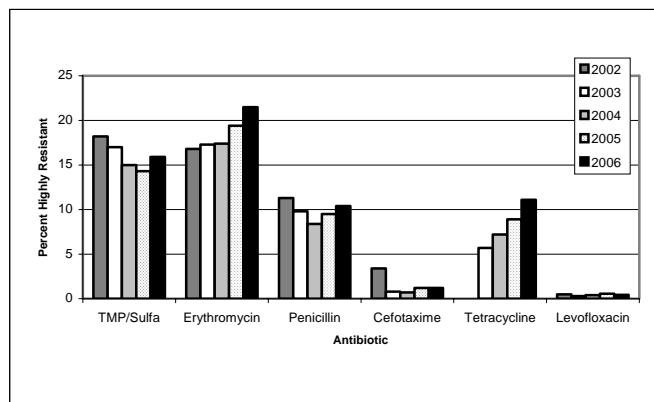
**Fig. 2 Trends in Penicillin Non-Susceptibility of Invasive Pneumococcal Isolates: Denver Metro Area, July 2000 — June 2007**



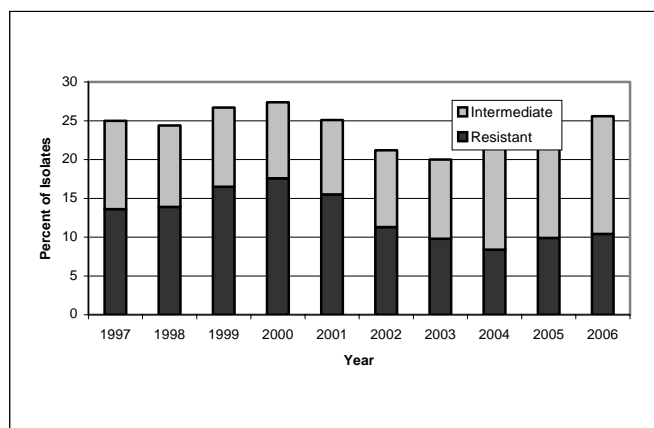
The following are highlights from the national trend data from 2005 to 2006:

- High-level resistance of *S. pneumoniae* increased to all antibiotics, excluding cefotaxime and levofloxacin for which high-level resistance remained stable (Figure 3).
- Specifically, non-susceptibility rates to penicillin continued to increase. These rates increased both for intermediate and fully resistant strains (Figure 4).

**Fig. 3 Trends in High—level Resistance of Invasive Pneumococcal Isolates by Antibiotic, United States, 2002—2006**



**Fig. 4 Trends in Penicillin Non-susceptibility of Invasive Pneumococcal Isolates, United States, 1997—2006**



Additional information about the Emerging Infections Program in Colorado can be found on the Colorado Department of Public Health and Environment website at <http://www.cdphe.state.co.us/dc/eip/index.html>. Additional information about the national surveillance project can be found on the CDC website at [www.cdc.gov/abcs](http://www.cdc.gov/abcs).

## Contributors

**Kelly Kast** is project coordinator of Get Smart Colorado.

**Helen Johnston** is project assistant with Get Smart Colorado and MPH student at the University of Colorado



## Upcoming Events

### ***Antibiotic Awareness Week October 6–10, 2008***

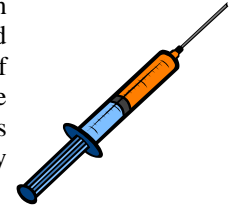
The Centers for Disease Control and Prevention is organizing the first ever national "Get Smart about Antibiotics" Week which will run from October 6th to the 10th. Get Smart Colorado is excited to participate in this national effort and welcomes participation from clinicians and partners across the state.

The theme of the week is "The Power to Prevent Resistance is in Your Hands." Get Smart Colorado's goal is to increase knowledge about ways people can prevent antibiotic resistance.

Planning for the week is currently under way. If you would like to be involved with the planning of the event please contact Kelly Kast at [kelly.kast@state.co.us](mailto:kelly.kast@state.co.us) or call 303-692-2459. In the mean time, please mark your calendars and stay tuned for more information.

### ***Vaccine Preventable Disease Conference July 8th and 9th***

LAST CALL!! Registration will close soon! Colorado Department of Public Health and Environment's Immunization Program has been chosen to host CDC's live-training, called "Epidemiology & Prevention of Vaccine-Preventable Diseases". The conference will be held at the Antlers Hilton Hotel in Colorado Springs on July 8th and 9th.



For further information and to register today, go to <http://www.cdphe.state.co.us/dc/Immunization/EPV.pdf>. The registration fee is \$125. For questions, call Cindy at 303-692-2972.

## News Briefs

### ***FDA approves quick test for drug-resistant Staph infections***

On January 2, 2008 the U.S. Food and Drug Administration (FDA) announced it cleared for marketing a rapid blood test for the methicillin-resistant Staphylococcus aureus (MRSA). The test can identify whether a blood specimen contains genetic material from MRSA or a staph bacterium that is still treatable with methicillin. In order to preserve the integrity of positive test results, this test should be used only in patients suspected of a staph infection. The test should not be used to monitor treatment for staph infections because it cannot quantify a patient's response to treatment. For more information: <http://www.fda.gov/bbs/topics/NEWS/2007/NEW01768.html>

### ***Emerging fluoroquinolone – resistant N. meningitidis***

MMWR - Emergence of Fluoroquinolone-Resistant Neisseria meningitidis--- Minnesota and North Dakota

Although isolated cases of ciprofloxacin-resistant meningococcal disease have been described in Argentina, Australia, China, France, India, and Spain, resistance has not been reported in North America. This report describes a cluster of three cases of fluoroquinolone-resistant meningococcal disease that occurred among residents of the border area of North Dakota and Minnesota during January 2007 - January 2008. The first of these cases was epidemiologically linked and had closely related molecular features to a 2006 case of fluoroquinolone-susceptible meningococcal disease that occurred in the same geographic region. Until further notice, ciprofloxacin should not be used for chemoprophylaxis of close contacts of persons with

meningococcal disease in selected counties in North Dakota and Minnesota. Ceftriaxone, rifampin, and azithromycin are alternative agents. Ciprofloxacin may continue to be used for chemoprophylaxis of adults outside this region. To view the full report, go to: <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5707a2.htm>

### ***Availability of cefixime 400 mg tablets***

MMWR - Availability of Cefixime 400 mg Tablets --- United States, April 2008.

The only current CDC-recommended options for treating Neisseria gonorrhoeae infections are from a single class of antibiotics, the cephalosporins. Within this class, ceftriaxone, available only as an injection, is the recommended treatment for all types of gonorrhea infections (i.e., urogenital, rectal, and pharyngeal). The only oral agent recommended currently by CDC for treatment of uncomplicated urogenital or rectal gonorrhea is a single dose of cefixime 400 mg (1). Availability of cefixime had been limited since July 2002, when Wyeth Pharmaceuticals (Collegeville, Pennsylvania) discontinued manufacturing cefixime tablets in the United States (2). Beginning in April 2008, cefixime (Suprax®) 400 mg tablets are again available in the United States. Oral cefixime is now being provided by Lupin Pharmaceuticals, Inc. (Baltimore, Maryland), which received Food and Drug Administration approval in February 2004 to manufacture and market cefixime. Information on obtaining cefixime is available from Lupin by telephone (866-587-4617). Guidance on treatment of N. gonorrhoeae infections and updates on the availability of recommended antimicrobials are available from CDC at <http://www.cdc.gov/std/treatment>. To view the full report, go to: <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5716a5.htm>

# Health fair update

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Get Smart Colorado is fortunate to participate in several 9Health Fairs this year. In previous years, Get Smart Colorado distributed around 1000 packets of information. This year, with the help of additional Get Smart Colorado staff persons, University of Colorado Denver students and fellows, and staff of the Communicable Disease Epidemiology Program at the Colorado Department of Public Health and Environment, it participated in 21 fairs, distributing over 3000 packets of information.

Get Smart Colorado participated in the fairs in the following areas:

- ◇ Rifle
- ◇ Broomfield (2)
- ◇ Denver (4)
- ◇ Manitou Springs
- ◇ Aurora
- ◇ Westminster
- ◇ Evergreen
- ◇ Longmont
- ◇ Rocky Ford
- ◇ Castle Rock
- ◇ Bailey
- ◇ Thornton

It also sent materials to fairs in the following communities.

- ◇ Baggs, Wyoming
- ◇ Summit County
- ◇ Burlington
- ◇ Colorado Springs
- ◇ Fort Lupton
- ◇ Trinidad

Many thanks to the following partners for their help planning for the fairs:

- ◇ Deb Aragon, Colorado Department of Public Health and Environment
- ◇ Deb Chapman, Doctors Care
- ◇ Sheila Ducello, Anthem Blue Cross Blue Shield
- ◇ Jen Sadlowski, Colorado Department of Public Health and Environment
- ◇ Christina Sandoval, Get Smart Colorado
- ◇ Ashley Juhl, Colorado Department of Public Health and Environment.

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Comments, questions, suggestions? Unsubscribe? Please contact us at the email or phone number above.

**WE'RE ON THE WEB!**  
**[WWW.GETSMARTCOLORADO.COM](http://WWW.GETSMARTCOLORADO.COM)**