554. The Changing Epidemiology of Methicillin-Resistant Staphylococcus aureus Causing Bacteremia in Hiroshima, Japan During 2008–2017
Hiroki Kitagawa, MD1; Junzo Hisatsume, PhD2; Hiroki Obge, MD, PhD3; Motouyuki Sugai, DDS, PhD2; 1Graduate School of Biomedical and Health Sciences, Hiroshima University, Hiroshima, Hiroshima, Japan; 2Antimicrobial Resistance Research Center, National Institute of Infectious Diseases, Higashimurayama, Tokyo, Japan; 3Hiroshima University Hospital, Hiroshima, Japan

Session: 61. HA: MRSA Epidemiology

Thursday, October 3, 2019: 12:15 PM

Background. Device-related infections account for a fourth of all HAIs. Hepatic artery infusion pump (HAIP) devices are used to deliver chemotherapy directly into the hepatic artery. This device is used primarily in patients with colorectal cancer for the management of unresectable hepatic metastases. We describe the infection rates and characteristics of patients with MRSA bacteremia at Hiroshima University Hospital between January 2008 and December 2018.

Methods. In December 2018, a cluster of 3 MRSA cases was identified within 16–25 days of HAIP insertion. From January 1, 2017 to December 31, 2018, patients with culture proven SSIs within 30 days of HAIP placement were screened for MRSA carriage; 2/60 (3.3%) were positive. All 56 environmental cultures were negative for MRSA. WGS of the 3 patient isolates showed 2/3 samples were identical (1 SNP difference), confirming common source transmission between two newly placed HAIPs.

Results. HAIP handling did not reveal obvious lapses, but mask use and strict hand hygiene were enforced with HCPS. No further infections have been identified in the 76 procedures since the cluster.

Conclusion. WGS confirmed common source transmission between two newly placed HAIPs although the definitive source could not be identified. Surveillance and prevention of MRSA colonization to all types of vascular access devices.

Disclosures. All authors: no reported disclosures.

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