Table 1: Performance of Genexpert as compared with AFB culture

| Culture – | genexpert + | genexpert – |
|-----------|-------------|-------------|
| Culture + | 6           | 1           |
|           | 6           | 1           |

2114. Prevalence of Tuberculous Spondylodiscitis and Diagnostic Utility of Xpert MTB RIF

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Methods. 69 patients with infective spondylodiscitis who underwent surgical or image guided tissue biopsy were evaluated during May 2014 to February 2017. Tuberculous spondylodiscitis were classified as ‘confirmed’ if culture grew MTB, ‘probable’ if in the absence of positive AFB culture, clinical, radiological or pathological findings favor TB, ‘possible’ if all negative but response to ATT was noted.

Results. 36 patient had culture confirmed pyogenic spondylodiscitis; 17 cases were treated empirically though the tissue culture were negative as HPE was suggestive of pyogenic spondylodiscitis. 3 had non-infective etiology.

Conclusion. Pyogenic spondylodiscitis is more prevalent than tuberculous spondylodiscitis in this study. Genexpert in tissue from infective spondylodiscitis is more sensitive than AFB smear and culture in diagnosing tuberculous spondylodiscitis.

Disclosures. All authors: No reported disclosures.

2115. Prevalence of Gene Mutations profiles by GenoType MTBDRplus/sl to First Line Antituberculosis Drugs and Clinical Characteristics in Drug Resistant Tuberculous Patients Referred to the National Institute of Respiratory Diseases in Mexico City

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Methods. Retrospective cohort from 2010 to 2014 of M. tuberculosis isolates with any type of resistance to first line antituberculosis drugs identified by MGIT SIRE and in which GenoType MTBDRplus/sl were performed, we evaluate prevalence of genotyping profiles according to the LPA within the isolates and gather data from those with complete medical records to assess clinical characteristics.

Results. In 52 and 33 isolates phenotyping and genotyping MTBDRplus/sl respectively were performed, 41 resistant to Isoniazid INH with 75% genotypic concordance, 33 resistant to rifampicin RIF with 75.6% concordance, 14 to streptomycin SM with 23% concordance and 10 to ethambutol EMB with 100% concordance, 54% MDR tuberculosis. The genotyping profile for RIF was absent of probes rpoB Wild Type 8 (WT) 57.7%, WT 7 30.8% and presence of rpoB mutation 3 (MUT) 19.2%. For INH absence of inhA WT2 48.1% and InhA WT1 19.2%. For EMB absence of embB WT1 30.8% and for SM absence of rrs WT1 (19%). Absence of InhA WT1 was associated with female (P = 0.01) and DM2 (P = 0.032) patients, other clinical/biochemical characteristics and mortality was not different in patients with or without the genotypic profile for each drug, Cavity disease by CT was more frequent in patients with WT probe absence in RIF and INH than those who did not have a LPA suggestive of resistance for this drugs.

Conclusion. Wild Type probe absence is the frequent finding in our isolates according to LPA in RIF, INH, EMB and SM, intrinsic host factors and clinical characteristics seems not to be related to a particular resistant gene profile.

Disclosures. All authors: No reported disclosures.

2116. Resistance of Mycobacterium and Outcomes of Pulmonary Tuberculosis Depending on VNTR-Profile Among Different Age Groups of Patients in Ukraine

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Background. Ukraine is among the five countries with the highest burden of multiple drug-resistance tuberculosis (MDR TB). MDR TB has found in 22 % new cases of TB and in 56 % of re-treatment cases in Ukraine (WHO, 2015), and the elderly among TB-affected persons are near 23%. The aim was to study the resistance of...