

INCIDENCE, SEVERITY, AND TREATMENT OF COMMUNITY-ACQUIRED MRSA (CA-MRSA) SKIN AND SOFT TISSUE INFECTIONS (SSTI) IN 12 STARNet CLINICS:

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Setting:

Twelve primary care STARNet clinics participated in this prospective, community-based study.

Data Collection & Analysis:

Clinicians consented patients, collected clinical information, pictures, and wound swabs; data were processed centrally. MRSASelect™ was used for identification. Susceptibilities were determined for five antibiotics via Etest®.

Results:

80/135 (59%) patients had CA-MRSA;

Characteristics:

39/80 (49%) were male,
65/79 (82%) were Hispanic,
24/80 (30%) had diabetes, and
34/80 (43%) had a SSTI within the last 12 months.

Exam Findings:

Most (60/80, 75%) had abscesses;
38/60 (63%) abscesses were ≥ 5 cm in diameter.
The majority of patients experienced pain scores of 7 or higher out of 10 (54/80, 68%).
Many presented with erythema (64/80, 80%),
drainage (43/80, 54%),
or ulceration (25/80, 31%).

Treatment

Most received incision and drainage plus an antibiotic (46/78, 60%).
78% Trimethoprim/sulfamethoxazole (TMP/SMX)
4% doxycycline
3% clindamycin
2% mupirocin

MRSA Antibiotic Sensitivity:

vancomycin (1.5 μ g/mL, 100%),
doxycycline (0.047, 100%),
TMP/SMX (0.047, 100%), clindamycin (0.06, 94%), and
linezolid (1.0, 100%).

In conclusion, many patients presenting to medical clinics in Texas with SSTIs have CA-MRSA. Most of these patients receive incision and drainage plus anti-MRSA antibiotics.