

Eikenella spp (LTR79363)

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**ASTM Manual** 

**Revision: 5.00** 

Organism	Eikenella corrodens
Clinical	This organism is part of the normal flora of the oropharynx and gastrointestinal tract. It is associated with skin/soft tissue infections (often polymicrobial), especially human bite wounds. Septic arthritis and osteomyelitis may occasionally complicate these infections. <i>E. corrodens</i> has also been associated with pneumonia, empyema, ophthalmic infections, post-surgical wound infections, meningitis, brain abscesses, endocarditis, visceral abscesses, chorioamnionitis and septicaemia. Intravenous drug users are at risk of endocarditis with this organism.
Usual susceptibility pattern	<i>E. corrodens</i> is resistant to clindamycin, erythromycin, cloxacillin, first generation cephalosporins, vancomycin and metronidazole. It is often resistant to aminoglycosides. It is usually susceptible to third generation cephalosporins, quinolones, tetracycline, chloramphenicol, and TMP-SMX (rare resistance to tetracycline and TMP-SMX has been reported). Although most strains are susceptible to penicillin and ampicillin, there have been several reports of beta-lactamase mediated resistance (they remain susceptible to amoxicillin/clavulanate).
Susceptibility method	Etest method using Laked blood agar incubated in 5% CO $_2$ at 35° C for 24-72 hours.
	<b>Note:</b> For Etest use 1.0 McFarland suspension (from 48-72 hour colonies) in broth.

### Eikenella spp., Continued

## Susceptibility reporting

	CSF/ Brain	Blood/ Sterile Body Site	<b>Other</b> (see note)	Comments
β-lactamase	*	*	*	Test but do not report
Amoxicillin/ clavulanate			~	
Ampicillin	✓	$\checkmark$	✓	If $\beta$ -lactamase positive – report amp R
Cefotaxime	~	✓	2	Report if patient <1 month instead of ceftriaxone 2 <sup>nd</sup> line if amp I/R
Ceftriaxone	~	$\checkmark$	2	Do not report if patient ≤1 month 2 <sup>nd</sup> line if amp I/R
Ciprofloxacin		$\checkmark$	~	Do not report in patients < 18 y
Tetracycline			$\checkmark$	Do not report in patients < 8 y

#### Note

**For wound specimens** if *Eikenella* sp. isolated with other organisms, susceptibility testing is not generally required. Consult Supervisor

If beta lactamase negative and SOP says to report susceptibility, add comment: "This organism is usually susceptible to ampicillin, extended spectrum cephalosporins, quinolones, tetracyclines and trimethoprim/ sulfamethoxazole. It is resistant to clindamycin and first generation cephalosporins." &A226

If patient < 8 y with severe beta-lactam allergy azithromycin may be considered.

# **Interpretation** For Etest, report actual MIC result. For interpretation (S, I, or R) report according to the nearest higher doubling dilution **(Appendix 1)**.

#### Use CLSI interpretive document for HACEK group.