

350 C for 60 min. In this work hospital acquired *Pseudomonas aeruginosa* was used in development of biofilm. Such a conditioned biomaterial when used for *Pseudomonas aeruginosa* biofilm colonization studies through flow cell showed 42% reduction to biofilm as determined by confocal scanning laser microscopy along with two fold log reduction in its viable count. Chemical characterization of the biosurfactant was done using GC-MS analyzer with HPCHEM library identified presence of 1,2-Benzenedicarboxylic acid, bis (2-propylheptyl) ester moieties. Thus this paper envisages use of biosurfactant as biomaterial coat enabling reduction in *Pseudomonas aeruginosa* biofilm on biomedical implants.

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What is the Role of Stethoscope in Transmitting Infection at a Tertiary Care Saudi Center?

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Background: It has been proven that stethoscopes can carry several nosocomial isolates, in previous studies. We initiate a study at our institution to find the magnitude of stethoscopes in transmitting nosocomial isolates between patients.

Methods: Randomly a health care worker (HCW) in the hospital was given a questionnaire. The HCW was asked to give his/her stethoscope to be swabbed and cultured "Diaphragm of the stethoscope".

Results: 151 stethoscopes were collected "the study is still ongoing". The health care were divided into male (69) and female (82). The total percentage of contamination was 47% (72/151). Consultants were 11(81.8% contaminated). Residents were 47(65.9% contaminated). Interns were 21 (66.6% contaminated). Nurses were 51 (21.5% contaminated). Medical students were 15 (40% contaminated). The most common organism is coagulase-negative staphylococcus at 66/72 (91.6%). The second commonest organisms was Diphtheroids (27.7%). 45.8% (33/72) of HCWs with contaminated stethoscopes had more than one organism per diaphragm.

Discussion: The diaphragm of the stethoscopes can work as a carrier of nosocomial isolates. Our results is 47.7% of stethoscopes are contaminated despite the recommendation of cleaning diaphragm of stethoscopes between patients. We recommend that disinfecting medical instrument should be mandatory and closely supervised.

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Four Years Surveillance of Antimicrobial Susceptibility in *Pseudomonas aeruginosa* Nosocomial Isolates from a Central Hospital in Portugal

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Background: *Pseudomonas aeruginosa* (PA) is one of the leading causes of nosocomial infections. Surveillance of antimicrobial susceptibility of PA clinical isolates has been monitored in this study, since determination of guidelines for empirical regimens and prompts enforcement of infection control measures are of great importance.

Methods: Isolates (N=907) were collected during April 2003 - April 2007. They were identified with API32GN (BioMérieux) and MicroScan WalkAway (DadeBehring) and susceptibility patterns were determined with these panels. Susceptibilities to Piperacillin (PIP), Piperacillin plus Tazobactam (TZP), Aztreonam (AZT), Ceftazidime (CAZ), Imipenem (IP), Meropenem (MP), Amikacin (AMK), Gentamicin (GN), and Ciprofloxacin (CIP) were guideline by CLSI.

Results: The best agent was TZP (82.6% of susceptibility) followed by AMK (82.5%), MP (81.7%), PIP (79.4%), CAZ (75.5%), AZT (71.4%), IP (70.9%), GN (62.6%), and CIP (60.5%). Resistance to beta lactams had increased, especially to IP that had diminished its susceptibility from first year to last year (21.2%), CAZ decreased 19.3% and MP 16.2%, and only the aminoglycosides had improved the activity. Multidrug resistance was observed in 18.2% isolates from nosocomial infections (resistance to three or four of follow agents: PIP, CAZ, IP, and CIP), where 35.8% of these were resistant to all agents, and 60.6% were from respiratory products.

Conclusion: Increased resistance to last generation of beta-lactams is of great concern, therefore susceptibilities should be determined and effective antibiotics usage policy should be performed.

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Changes in the Incidence of Central Venous Catheter Related Infection in Surgical Patients Receiving Total Parenteral Nutrition

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Background: In patients receiving Total Parenteral Nutrition (TPN), central venous catheter related infection (CRI) represents a serious complication which conduct to increased morbidity and cost of hospital stay. The aim of this study was to assess if there was any change regarding the incidence of CRI during the last decade, comparing two consecutive 5-year periods.