Across all regions, the prevalence of carbapenem resistance among CR GN pathogens varied significantly by geographic region, bed size, teaching status, and LOS. CR varied significantly for both Enterobacteriaceae and CRP. CR was defined as non-susceptibility to meropenem or imipenem. Prevalence and CR were examined by geographic region, bed size, teaching status, and LOS. CR varied significantly by bed size and was more pronounced in teaching versus non-teaching hospitals. CR was defined as non-susceptibility to meropenem or imipenem. Data analysis was performed using SAS version 9.3 (SAS Institute, Cary, NC). A series of univariate analyses of variance with hospital characteristics (teaching status, geographic region, hospital size, total discharges, average length of stay [LOS], total patient days, and case mix index) as predictors of outcome measures were conducted.

Conclusions

The prevalence of CR GN ranged between 4% and 12% by geographic region. Across all regions, the prevalence of carbapenem resistance among CR, Enterobacteriaceae, and Enterobacter spp and CRP was associated with considerable morbidity and mortality. These data are crucial for selecting appropriate empirical treatment while awaiting susceptibility results.

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