

**BACKGROUND** 7-valent pneumococcal conjugate vaccine (PCV7) was added to childhood immunization schedules in England and Wales in September 2006, and replaced by 13-valent PCV13 in April 2010. Invasive pneumococcal disease incidence fell by estimated 34% from 2000-06 to 2009-10 (86% drop in PCV7 types, 19% rise in others).<sup>1</sup>

The BSAC Resistance Surveillance Project tracked antimicrobial susceptibility in *S. pneumoniae* from blood (invasive infections) and community-onset lower respiratory infections (RTI, up to 48 hours in hospital).

<sup>1</sup>Miller et al (2011) Lancet Infect Dis 11: 760-68.

**METHODS** Between Jan 2001 and Dec 2012, 7496 RTI and 2724 blood isolates were collected from 20-39 centres per year.

MICs were measured by BSAC agar dilution in two central laboratories and interpreted by BSAC/EUCAST breakpoints.

Serotypes were identified for blood isolates only.

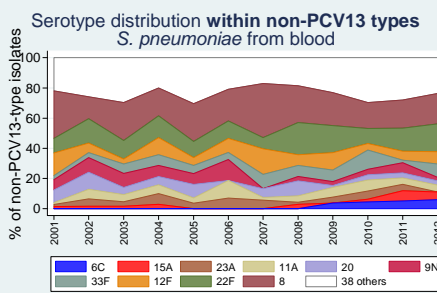
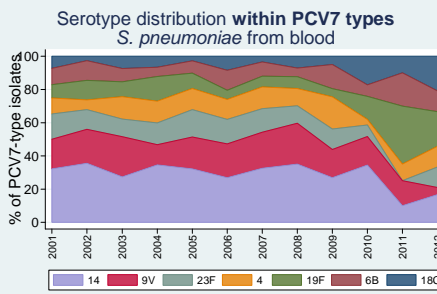
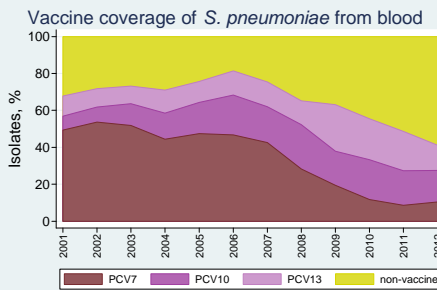
**RESULTS** show resistance to erythromycin (ERY-R, MIC>0.5 mg/L) alone, or in combination with penicillin non-susceptibility, tetracycline resistance or constitutive clindamycin resistance (MICs >0.06, 2 and 0.5 mg/L, respectively).

### CONCLUSIONS

Following the introduction of PCV7:

- **Erythromycin resistance** fell among invasive (blood) but not respiratory *S. pneumoniae*.
- **Multiple resistance** increased in blood and especially in respiratory *S. pneumoniae*.
- Previously dominant serotypes 14 and 9V declined in bacteremia, while **types not covered by PCV13** - such as 6C, 15A, 22F and 33F - have become more prominent.
- The **emergence of 15A** is of particular concern as it is very often multi-resistant.

### Serotype distribution and resistance in invasive isolates

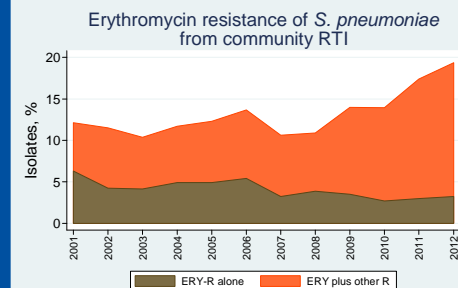


- PCV7 serotypes fell from 49% of invasive (blood) infections before PCV7 to 10% from 5 years afterwards. Serotypes 14 and 9V fell most sharply, from 15 and 9% before PCV7 to 2 and <1% after 5 years, respectively.
- The six added serotypes of PCV13 rose from 18% of bacteremias in 2001 to peak at 44% in 2009-10, before retreating to 30%.
- From Oct 2011, non-PCV serotypes made up 60% of the total, with 6C, 15A and 33F emerging from very low levels to account for 4, 3 and 5% of all blood *S. pneumoniae*.

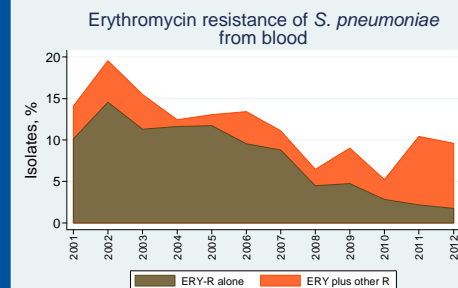
Invasive PCV13 serotypes					
Serotype	N of isolates	Erythromycin resistance %			
		single	+ other	total	
PCV7	14	290	54	2	57
	9V	180	3	8	11
	23F	121	2	7	10
	4	108	0	1	1
	19F	94	4	10	14
	6B	88	6	16	22
PCV10	18C	60	2	0	2
	1	247	2	0	2
	7F	200	1	0	1
PCV13	5	4	no calc	no calc	no calc
	19A	165	1	10	10
	3	149	3	1	4
	6A	85	4	1	5

Top ten invasive non-PCV13 serotypes				
Serotype	N of isolates	Erythromycin resistance %		
		single	+ other	total
other	229	4	3	7
8	205	2	0	3
22F	133	1	1	2
12F	78	1	1	3
33F	62	2	10	11
9N	51	6	0	6
20	48	0	2	2
11A	47	6	2	9
23A	34	0	0	0
15A	24	0	50	50
6C	22	0	5	5

### Erythromycin resistance over time



Resistance to erythromycin alone was quite stable at around 4% among community-onset RTI but combined resistance rose from 7% before PCV7 to 17% in the year from Oct 2011.



In blood *S. pneumoniae*, resistance to erythromycin alone fell from average 12% before PCV7 to 2% from Oct 2011. Combined resistance to erythromycin and other agents was uncommon at 3% before PCV7 but reached 8% from Oct 2011.

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**Organism ID and Susceptibility Testing 2012 collection:** A. Kidney, S. Mushtaq and staff at Quotient Bio Analytical Sciences & Public Health England, London.

**Collecting Laboratories:** See [www.bsac.org.uk](http://www.bsac.org.uk) <sup>1</sup>North Bristol NHS Trust; <sup>2</sup>Novartis; <sup>3</sup>EUCAST Scientific Secretary; <sup>4</sup>Cempra, <sup>5</sup>RIVM; <sup>6</sup>Public Health Wales; <sup>7</sup>Quotient Bio Analytical Sciences; <sup>8</sup>Basilea; <sup>9</sup>Public Health England, London; <sup>10</sup>Cubist; <sup>11</sup>AstraZeneca; <sup>12</sup>Pfizer; <sup>13</sup>Astellas; <sup>14</sup>Transcrip Partners.

**Central Laboratories:** Public Health England, London; Quotient Bio Analytical Sciences, Fordham. **Sponsors 2012:** Cempra, Cubist, Pfizer, Basilea (associate). **Support:** BSAC.

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