

Universidad Autónoma de San Luis Potosí Facultad de Ciencias Químicas Laboratorio de Microbiología General



Morganella morganii

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Grupo: 9:00-10:00

Morganella morganii

- Gram-negative microorganism belonging to the family Enterobacteriaceae, isolated in 1906.
- Bacteria present in fecal flora, although they can also be found in soil and in sewage.
- Causing as other Enterobacteriaceae of urinary infection and, to a lesser extent, other infections in the gynecological sphere or surgical wound, often in the form of outbreaks of nosocomial infection.



Early neonatal sepsis caused by vertical transmission of *Morganella morganii* in a term pregnancy • Primigesta of 15 years of age with gestation of the

Morganella morganii has been associated with neonatal infections, severe early onset, pneumonia and sepsis, with a history of premature delivery.

- Primigesta of 15 years of age, with gestation of 60 weeks.
- Vaginal birth, of newborn of 3,400 g male, with very bad smell, without description of meconium in said childbirth.
- Laboratory tests can help diagnose neonatal sepsis and identify the cause of the infection. Blood tests may include:
 - ✓ Hemoculture
 - ✓C-reactive protein
 - ✓ White blood cell count (CGB)

The infant was admitted to the ICU, with

- intubation, presenting:✓ Optimal gestational age.
- \checkmark Severe perinatal asphyxia.
- ✓ Probable connatal infection.
- ✓ Commitment of the CNS.
- ✓ Ischemic hypoxic encephalopathy.
- ✓ Need for ventilatory and vasoactive drug support.

At 24 hours of life the blood cultures taken at birth were positive for *Morganella morganii*, changing the antibiotic scheme:

AMS

CTX

The neonate died at 17 days of age. Revealing the autopsy:

✓ Morphological signs of septic shock.

The mother evolved:

- ✓ Feverish
- \checkmark No clinical signs of infection.
- ✓ Culture of positive lochia for *M.morganii*, sample taken on the first day of puerperium.

AMS: Ampicillin/Sulbactam CTX: Cefotaxime

The antibiogram of this strain showed:

RESISTANCE SUSCEPTIBILITY SXT: Trimethoprim/sulfamethoxazole AM: Ampicillin (10 µg) R: 13 mm (1.25/23.75 µg) I: 14-16 mm RESISTENTE < o = (mm) 10INTERMEDIO (mm) 11-15 S: 17 mm SENSIBLE > o = (mm) 16CF: Cefalotin (30 µg) GM: Gentamicin (10 µg) R: 12 mm R: 14 mm I: 13-14 mm I: 15-17 mm S: 15 mm S: 18 mm AN: Amikacin (30 µg) AMS: Ampicillin/Sulbactam (10/10 µg) R: 14 mm R: 11 mm I: 15-16 mm I: 12-14 mm S: 17 mm S: 15 mm CIP: Ciprofloxacin (5 µg) R: 15 mm I: 16-20 mm S: 21 mm CTX: Cefotaxime (30 µg) R: 22 mm I: 23-25 mm S: 26 mm

Regulated and controlled, according to the reports of the OMS and CLSI.

- There are different laboratory techniques that can be used to evaluate the resistance of bacteria to different antimicrobial agents.
- Among these techniques, the disc diffusion susceptibility test (Kirby-Bauer technique) is the most common, it's based on obtaining halos of inhibition that correlate with MIC









- ✓ Do not use more than 5 discs per plate.
- ✓ Separate at a minimum distance of 2.4 cm. And away from the edge of the plate to more than 1 cm.
- Mueller Hinton agar should be used, provides good lot-to-lot reproducibility.
- ✓ The height of the agar layer should be approximately 4 mm.



- In order to obtain reliable and uniform results, the techniques used, the means and the procedures used must be standardized.
- Today, the Clinical Laboratory Standards Institute (CLSI) is responsible for updating and modifying the original Kirby-Bauer procedure through a global consensus process.



 The use of standardized culture media and the control of conditions during the test are essential requirements in the microbiological testing of antibiotics in order to achieve satisfactory results.

- The choice of the appropriate medium is an important factor to ensure reproducibility in the analyzes performed.
- In the clinical field, the antimicrobial susceptibility study constitutes a fundamental tool for the surveillance of resistance to antibiotics in different microorganisms.

Bibliography

- "Manual de Pruebas de Susceptibilidad Antimicrobiana", S.J. Cavalieri ... [et al.], American Society for Microbiology; University of Washington, editora Coordinadora, pág 155, 2005.
- PRONADISA, Micro and Molecular Biology. «Pruebas para susceptibilidad de bacterias a antibióticos (PSA)"

Extraído de:

- http://www.condalab.com/pdf/Antibiotic_Susceptability_Test_esp_new.pdf
- Laboratorios Brizuela S.A. "Monodiscos." Extraído de:

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