January 20, 2009

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LOUISVILLE, KENTUCKY · SOUTHERN INDIANA

## Study: Drug-resistant illness in children is rising

'Alarming' increase found in ear, nose, throat infections nationwide

## By Lindsey Tanner

Associated Press

CHICAGO -- Researchers say they found an "alarming" increase in children's ear, nose and throat infections nationwide caused by dangerous drug-resistant staph germs.

Other studies have shown rising numbers of skin infections in adults and children caused by these germs, nicknamed MRSA, but this is the first nationwide report on how common they are in deeper tissue infections in the head and neck, the study authors said. These include certain ear and sinus infections, and abscesses that can form in the tonsils and throat.

The study found a total of 21,009 pediatric head and neck infections caused by staph germs from 2001 through 2006. The percentage caused by hard-to-treat MRSA bacteria more than doubled during that time from almost 12 percent to 28 percent.

"In most parts of the United States, there's been an alarming rise," said study author Dr. Steven Sobol, a children's head and neck specialist at Emory University.

The study appears in this month's Archives of Otolaryngology, released yesterday.

It is based on nationally representative information from an electronic database that collects lab results from more than 300 hospitals nationwide.

MRSA, or methicillin-resistant Staphylococcus aureus, can cause dangerous, life-threatening invasive infections and doctors believe inappropriate use of antibiotics has contributed to its rise.

The study didn't look at the severity of MRSA illness in affected children.

Almost 60 percent of the MRSA infections found in the study were thought to have been contracted outside a hospital setting.

Dr. Julia Richerson, a pediatrician and medical director of Family Health Centers in Louisville, said she was surprised to hear about the study because she has not seen the problem locally.

"I've just seen the skin infections with MRSA," she said.

She said she hasn't seen a throat culture come back positive for MRSA, and almost all ear infections are easily treated.

"It's unusual for them not to respond to the first antibiotic we put them on," Richerson said.

Doctors at Family Health Centers are very cautious about skin infections because of the problem of MRSA, she said, and are also careful about prescribing antibiotics because they don't want to foster resistance.

Dr. Robert Daum, a University of Chicago expert in community-acquired MRSA, said the study should serve as an alert to agencies that fund U.S. research "that this is a major public health problem."

MRSA involvement in adult head and neck infections has been reported although data on prevalence is scarce.

MRSA infections were once limited mostly to hospitals, nursing homes and other health-care settings

but other studies have shown they are increasingly picked up in the community, in otherwise healthy people. This can happen through direct skin-to-skin contact or contact with surfaces contaminated with germs from cuts and other open wounds.

But staph germs also normally live or "colonize" on the skin and in other tissues including inside the nose and throat, without causing symptoms. And other studies have shown that for poorly understood reasons, the number of people who carry MRSA germs is also on the rise.

Sobol said MRSA head and neck infections most likely develop in MRSA carriers, who become susceptible because of ear, nose or throat infections caused by some other bug. Symptoms that it could be MRSA include ear infections that drain pus, or swollen neck lymph nodes caused by pus draining from a throat or nose abscess.

Unlike cold and flu bugs, MRSA germs aren't airborne and don't spread through sneezing.

MRSA does not respond to penicillin-based antibiotics and doctors are concerned that it is becoming resistant to others.

The study authors said a worrisome 46 percent of MRSA infections studied were resistant to the antibiotic clindamycin, one of the non-penicillin drugs doctors often rely on to treat community-acquired MRSA. However, other doctors said it's more likely that at least some of infections thought to be community-acquired had actually originated in a hospital or other health-care setting, where MRSA resistance to clindamycin is common.

Dr. Buddy Creech, an infectious disease specialist at Vanderbilt University Medical Center, said the research "fits nicely" with smaller studies reporting local increases in MRSA head and neck infections.

"Every time someone looks, the rates of MRSA are going up and that's certainly concerning because it's a bug that can cause dramatic disease," Creech said.

C-J reporter Laura Ungar contributed to this story.