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Title	Drug resistant <i>Staphylococcus aureus</i> in clinical samples at Kampala International University-teaching hospital, Bushenyi District, Uganda.
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Abstract	背景（Background）： メチシリン耐性黄色ブドウ球菌（MRSA）は、治療が困難な感染症を引き起こすことが多い重要な院内感染病原体である。これは、同病原体が通常、他に一般的に使用される抗菌薬（抗生物質）に対しても耐性を示すことに起因する。患者における薬剤耐性MRSAの存在は、ウガンダの様々な地域でこれまでに報告されている。しかし、ウガンダ西部に位置するカンパラ国際大学教育病院（<i>Kampala International University Teaching Hospital</i>）における報告はこれまでにない。そこで本研究は、外科病棟に入院中の患者におけるMRSA株の保有率（プレバレンス）および抗菌薬耐性パターンを明らかにすることを目的として実施された。 方法（Methods）： 外科病棟に入院中の男女の患者から創傷拭い液（スワブ）を採取した。採取した検体は適切な培地で培養した。得られた黄色ブドウ球菌（<i>Staphylococcus aureus</i>）のコロニーに対してオキサシリン耐性試験を行い、MRSA株の同定を行った。さらに、種々の抗菌薬を用いたディスク拡散法により、分離されたMRSA株の抗菌薬耐性を測定した。 結果（Results）： 臨床検体から得られた114の分離株のうち、明確に黄色ブドウ球菌（<i>S. aureus</i>）と同定されたのは75株のみであり、そのうち85.3%がコアグラールゼ陽性、13.3%がコアグラールゼ陰性であった。メチシリン耐性黄色ブドウ球菌（MRSA）の保有率は56.1%であった。分離されたMRSA株において、シプロフロキサシンに対する耐性率が最も高く、セフトリアキソンに対する耐性率が最も低いことが観察された。 結論（Conclusion）： 外科病棟の患者における高いMRSA保有率は、同病原体のさらなる蔓延を防ぐための適切な対策を講じる必要があることを示している。治療困難な感染症の将来的な発生を防ぐための適切な介入策を構築するために、これら薬剤耐性MRSA株の感染源（ソース）を特定することが推奨される。
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