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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	Antecedentes: <i>Staphylococcus aureus</i> resistente a la meticilina (SARM) es un patógeno nosocomial importante que a menudo causa infecciones difíciles de tratar. Esto se debe a que el patógeno suele ser resistente a otros antibióticos de uso común. La presencia de SARM resistente a los medicamentos entre los pacientes ya se ha documentado en varias partes de Uganda. Sin embargo, no se han registrado informes para el Hospital Universitario de la Universidad Internacional de Kampala (<i>Kampala International University Teaching Hospital</i>) en el oeste de Uganda. Por lo tanto, este estudio se llevó a cabo para determinar la prevalencia y la resistencia a los antibióticos de las cepas de SARM en pacientes hospitalizados en la sala de cirugía. Métodos: Se recolectaron hisopos de heridas de pacientes tanto hombres como mujeres hospitalizados en la sala de cirugía. Luego, las muestras se cultivaron en medios adecuados. Las colonias de <i>Staphylococcus aureus</i> obtenidas se sometieron a pruebas de resistencia a la oxacilina para determinar cuáles cepas eran SARM. Además, la resistencia a los antibióticos de los aislamientos de SARM se determinó mediante el método de difusión en disco utilizando varios antibióticos. Resultados: De los ciento catorce aislamientos de las muestras clínicas, solo setenta y cinco aislamientos se identificaron claramente como <i>S. aureus</i>, con un 85.3% de coagulasa positiva y un 13.3% de coagulasa negativa. El <i>Staphylococcus aureus</i> resistente a la meticilina presentó una prevalencia del 56.1%. Entre los aislamientos de SARM, se observó que la resistencia a la ciprofloxacina fue la más alta, mientras que la resistencia a la ceftriaxona fue la menor. Conclusión: La alta prevalencia de SARM entre los pacientes de la sala de cirugía requiere que se tomen las medidas adecuadas para evitar una mayor propagación del patógeno. Se recomienda determinar la fuente de estas cepas de SARM resistentes a los medicamentos para poder diseñar intervenciones apropiadas que prevengan la aparición futura de infecciones difíciles de tratar.
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