

Scottish Microbiology Reference Laboratories (Glasgow)
Level 5
New Lister Building
Glasgow Royal Infirmary
10-16 Alexandra Parade
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5.3.25

Communications for service users re Enterococcal Surveillance Service 30.8.24 – Amended 5.3.25

Introduction and Background

In 2020, vancomycin resistance of 45.6% was reported among all *E. faecium* bloodstream isolates in Scotland, one of the highest proportions in Europe (ARHAI, 2021), (ECDC, 2022). This has remained stable at 40.0% in 2022 (ARHAI, 2022). To investigate the reasons for this the Scottish Government have agreed 1 year of funding to develop and establish a sequencing service for enterococci. Plans for future funding to support beyond this are being developed. The service will be based in SMiRL Glasgow.

Aims of the Service

This service aims to detail the genetic epidemiology of enterococcal blood stream infections within Scotland and the distribution of antimicrobial resistance determinants. Future work, if funded, would aim to build on this background data to provide contextualised outbreak support to boards and inform targets for surveillance and interventions in a One Health setting.

Requests of boards

Boards are requested to send stored isolates from 1.4.24 to date and all new isolates going forward of the following:

1. One isolate per episode of *E. faecium* bacteraemia. A two week definition of an episode of infection should be applied, if a patient has multiple bacteraemia isolates with the same sensitivity pattern within a two week period please only submit one isolate. For mixed antibiotic susceptibility phenotypes an example of each isolate should be sent.
2. In addition, isolates which meet the following criteria should be sent from any body site (If isolated from multiple body sites with the same sensitivity pattern please only send from one body site):

<i>Enterococcus faecium</i> with daptomycin MIC >4mg/L
<i>Enterococcus faecalis</i> with a daptomycin MIC >2mg/L
<i>Enterococcus faecalis</i> with an amp/amoxicillin MIC >4mg/L
<i>Enterococcus faecalis</i> with a vancomycin MIC >4mg/L

<i>Enterococcus faecalis/faecium</i> with tigecycline MIC >0.25mg/L
<i>Enterococcus faecalis/faecium</i> with linezolid MIC >4 mg/L

These should be submitted as soon as possible to SMiRL Glasgow on nutrient agar slopes using normal transport channels.

This service does not replace the confirmatory service provided by UK Health Security Agency (UKHSA) so isolates should also continue to be submitted to UKHSA Colindale as per <https://www.nss.nhs.scot/media/4254/reference-lab-referral-guide-confirmation-of-unusual-resistance-profiles-v2.pdf>.

Submitted isolates should be accompanied by a copy of the request form [Enterococcal Surveillance Service Request Form - NHSGGC](#), also available on the SMiRL Glasgow website. The accompanying metadata has been discussed with ARHAI Scotland and Public Health Microbiology, Public Health Scotland and aims to be as easy to collect as possible, so we would be very grateful if this can be completed.

SMiRL Glasgow will continue to support outbreak investigations on a limited basis where this could alter outbreak management. Where this is needed the infection control doctor/consultant microbiologist should complete the relevant section.

There are no funds for boards to support these additional submissions however in utilising the existing submission pathways these are expected to be kept to a minimum and the voluntary support of boards is greatly appreciated.

Reporting of results to boards

Reporting of the findings of this service will be by an annual report. Results will not be reported on an individual isolate basis unless there is a request for outbreak typing as above.

Future developments if funded include reporting of sequence types in the context of the Scottish epidemiology therefore the submissions of batched retrospective isolates back to 1.4.24 to allow understanding of this is very important and we are grateful for the support of boards in facilitating this.

Yours Sincerely,



Prof A. Leanord

References

Antimicrobial Resistance and Healthcare Associated Infection Scotland. Scottish One Health Antimicrobial Use and Antimicrobial Resistance in 2020. ARHAI Scotland, Glasgow 2021 [Report]

Antimicrobial Resistance and Healthcare Associated Infection Scotland. Scottish One Health Antimicrobial Use and Antimicrobial Resistance in 2022. ARHAI Scotland, Glasgow 2023 [Report]

<https://www.ecdc.europa.eu/en/publications-data/surveillance-antimicrobial-resistance-europe-2022>

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5.2.2025

Communications for service users re Enterococcal Surveillance Service, update 5.2.2025

Dear Colleagues,

This is an update to the communication dated 30.08.24, ([Enterococcal Surveillance Service Communications - NHSGGC](#)).

1. Please continue to submit isolates as per request dated 30.8.24.
2. As an additional request please submit the first isolate per patient of all vancomycin resistant *E. faecium* isolates detected from Jan-March 2025. Whether newly detected or previously known. From any body site.
3. Submission criteria for April '25 onwards will continue as per request dated 30.8.24

If possible please include a copy of the Vitek 2 report for submitted isolates.

As previously discussed the processing of these isolates will be batched so results will not be available in real time. For limited outbreak support please submit isolates as previously advised to allow processing out with batches.

Please continue to use the Enterococcal surveillance service submission form ([Enterococcal Surveillance Service Request Form - NHSGGC](#)). Or for submission of batches of isolates please contact SMiRL Glasgow.

Yours Sincerely,



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Dear Colleagues,

Please note the communication dated 30.8.24 should read that isolates of *E. faecalis* with an amp/amoxicillin MIC >4mg/L should be submitted rather than >2mg/L. Apologies for this error.

Communication dated 5.2.25 is unchanged.

Amendment to original request circulated along with this communication.

Yours Sincerely,

