TYPE OF SCC\textit{mec} MRSA FROM SKIN AND SOFT TISSUE INFECTIONS (SSTI) PATIENTS IN MOH. HOESIN GENERAL HOSPITAL (RSUP MH) PALEMBANG

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\textbf{INTRODUCTION}

Antimicrobial resistance and spectrum infection of \textit{Methicillin resistant Staphylococcus aureus} (MRSA) are still serious problem in the world\textsuperscript{1}. Many studies showed that Skin and Soft Tissue Infections (SSTI) commonly caused by MRSA with \textit{Staphylococcal cassette chromosome mec} (SCC\textit{mec}) type IV\textsuperscript{2}. Another study showed that others type of SCC\textit{mec} were possible exist in SSTI\textsuperscript{3}.

\textbf{METODE}

The study was observational descriptive to explore SCC\textit{mec} type of MRSA isolated from SSTI patients from Moh. Hoesin General Hospital Palembang. We used multiplex PCR to identify the SCC\textit{mec} according to Zhang et al (2005) with modification\textsuperscript{4}.
RESULT AND DISCUSSION

We found 46 isolates containing *Staphylococcus aureus*. Four (8.6%) of the isolates also have mixed infection with *Acinetobacter calcoaceticus*, 3 isolates (6.5%) mixed infection with Pseudomonas aeruginosa, 2 isolates (4.3%) with *Klebsiella pneumoniae* and 1 isolates with *Escherichia coli*, *Enterobacter aerogenes* and *Candida sp* respectively. Detection of *mec* A gene were positive in 22 (47.8%) samples, indicated that these samples were MRSA. Multiplex PCR with modification results 15 isolates of MRSA have SCCmec type III and 1 isolate has SCCmec type I, unfortunately 6 isolates were not identified.

![Picture 1. PCR result of SCCmec type III amplicon 280 bp. M is marker. K negative control.](image1)

![Gambar 3. PCR result of SCCmec type I amplicon 600 bp. M is marker.](image2)
CONCLUSION

Majority of SCCmec of MRSA from SSTI patients in RSUP MH were type III.

References


