



Abstract Determination of the Pattern of Resistance to Antibiotics among Strains of Staphylococcus aureus Isolated from the Nose or Pharynx[†]

Samuel González-García^{1,*}, Aida Hamdan-Partida², Anaid Bustos-Hamdan³ and Jaime Bustos-Martínez²

- ¹ División de Ciencias Biológicas y de la Salud, Universidad Autónoma Metropolitana, Mexico City 04960, Mexico
- ² Departamento Atención a la Salud, Universidad Autónoma Metropolitana-Xochimilco, Mexico City 04960, Mexico; ahamp@correo.xoc.uam.mx (A.H.-P.); jbustos@correo.xoc.uam.mx (J.B.-M.)
- ³ Instituto Nacional de Perinatología, Mexico City 11000, Mexico; anaidbustos@gmail.com
- Correspondence: sgonzalezg@correo.xoc.uam.mx
- + Presented at the 2nd International Electronic Conference on Antibiotics—Drugs for Superbugs: Antibiotic Discovery, Modes of Action and Mechanisms of Resistance, 15–30 June 2022; Available online: https://eca2022.sciforum.net/.

Keywords: Staphylococcus aureus; pharynx; nose; antibiotic resistance



Citation: González-García, S.; Hamdan-Partida, A.; Bustos-Hamdan, A.; Bustos-Martínez, J. Determination of the Pattern of Resistance to Antibiotics among Strains of *Staphylococcus aureus* Isolated from the Nose or Pharynx. *Med. Sci. Forum* 2022, *12*, 38. https://doi.org/10.3390/ eca2022-12720

Academic Editor: Marc Maresca

Published: 15 June 2022

Publisher's Note: MDPI stays neutral with regard to jurisdictional claims in published maps and institutional affiliations.



Copyright: © 2022 by the authors. Licensee MDPI, Basel, Switzerland. This article is an open access article distributed under the terms and conditions of the Creative Commons Attribution (CC BY) license (https:// creativecommons.org/licenses/by/ 4.0/). The pathophysiology of *Staphylococcus aureus* in nasal carriers has been extensively studied, however, it must be admitted that the clinical relevance of *S. aureus* carriers in the pharynx has not been extensively investigated. *S. aureus* can be commonly found in other body sites such as the axillae (8%), chest/abdomen (15%), perineum (22%), intestine (17–31%), vagina (5%) and from 4 to 64% in the pharynx.

The objective of the work was to determine if there are differences in the pattern of resistance to antibiotics of strains isolated from the nose and pharynx.

Pharyngeal and nasal exudates were performed on 98 university students once a month for three months. All strains that were coagulase-positive mannitol fermenters were identified as *S. aureus*. If a person presented three isolates of *S. aureus*, they were considered persistent carriers, if they presented one or two isolates in a row, they were considered intermittent carriers, and if the bacteria were never isolated, they were considered non-carriers.

All strains of *S. aureus* underwent antibiogram against ciprofloxacin, fosfomycin, trimethoprim-sulfamethoxazole, penicillin, vancomycin, tetracycline, erythromycin, oxacillin, clindamycin, gentamicin, and cephalothin by the Kirby-Bauer method and minimum inhibitory concentration (MIC) for oxacillin, following the indications of the CLSI.

A total of 81 strains of *S. aureus* were isolated from the pharynx and 43 strains from the nose of the students during the three samples taken. In the case of the pharyngeal strains, 81.4% were resistant to penicillin, 12.5% to clindamycin, 8.6% to erythromycin, 2.78% they are resistant to tetracycline and oxacillin. For ciprofloxacin, fosfomycin, vancomycin, gentamicin, and cephalothin, the percentage of resistant strains was less than 1%.

In the case of the strains isolated from the nose, it was found that 84.3% are resistant to penicillin, 18.2% to erythromycin, 12.4% to clindamycin, 4.49% to tetracycline, 3.6% were resistant to oxacillin. For ciprofloxacin, fosfomycin, trimethoprim-sulfamethoxazole, gentamicin, and cephalothin, the percentage of resistant strains was less than 1%.

More strains of *S. aureus* were isolated from the pharynx than from the nose. No differences were found in resistance to antibiotics, nor changes in the percentage of resistant strains in the pharynx and nose.

Supplementary Materials: The following are available online at https://www.mdpi.com/article/10.3390/eca2022-12720/s1.

Author Contributions: Conceptualization, S.G.-G., A.H.-P. and J.B.-M.; methodology, S.G.-G., A.H.-P. and A.B.-H.; formal analysis, S.G.-G., A.H.-P. and A.B.-H.; writing—original draft preparation, S.G.-G., A.H.-P. and J.B.-M.; writing—review and editing S.G.-G., A.H.-P., A.B.-H. and J.B.-M. All authors have read and agreed to the published version of the manuscript.

Funding: This work was support by Special Research Support Program of UAM.

Institutional Review Board Statement: The study was conducted according to the guidelines of the Declaration of Helsinki and approved by the Ethics Committee and the Research Committee of the Division of Biological and Health Sciences of the Universidad Autónoma Metropolitana-Xochimilco within the project: "Molecular characterization of Staphylococcus aureus strains isolated in healthy carriers of the Mexican community" in the 1/18 session held on 8 February 2018. The identification code is DCBS.CD.056.18.

Informed Consent Statement: Informed consent was obtained from all subjects involved in the study.

Data Availability Statement: Not applicable.

Conflicts of Interest: The authors declare no conflict of interest.