

Mycobacterium peregrinum ATCC 700686 Susceptibility Testing: A Multi Site Evaluation to Establish Microbroth Dilution Quality Control (QC) Ranges for 5 Antimicrobial Agents

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ABSTRACT

Background: The purpose of this study was to determine the QC ranges for 5 antimicrobial agents used in the treatment of rapidly growing mycobacteria infections against the QC organism, *M.peregrinum* ATCC 700686.The frozen reference broth microdilution (BMD) method, with plates produced by TREK Diagnostic Systems, Cleveland, OH was used. The criteria utilized were based on the NCCLS M23 document.

Methods: The NCCLS M24 method was used as the BMD method in this study; using cation adjusted Mueller Hinton Broth (CAMHB) and incubating for 72 hrs. in ambient air at 30°C. Eight laboratories performed the BMD method on 10 different replicates of the QC strain over several days. The isolates were tested against cefoxitin, linezolid, meropenem, ertapenem and tobramycin on 3 different lots of CAMHB.

Results: The BMD QC ranges were established and included greater than 95% of the observed values. The proposed BMD QC ranges are as follows: cefoxitin, 4-16µg/ml, linezolid, 1-8µg/ml, meropenem, 2-8µg/ml, ertapenem, 8-32µg/ml, and tobramycin, 2-8µg/ml.

Conclusions: Of the 5 proposed BMD QC ranges, 3 drugs (cefoxitin, linezolid and tobramycin) were re-tested, following the NCCLS M23, to extend their earlier published QC ranges and meropenem will be added to table 9 in the NCCLS M24 standard.

OBJECTIVE

In reviewing the CLSI (NCCLS) standard M24-A, it was observed that cefoxitin, tobramycin and linezolid only had 2 well quality control ranges for testing ATCC 700686 *Mycobacterium peregrinum*. Quality control limits for meropenem also needed to be established.

PURPOSE OF THE STUDY

The purpose of this study was to conduct a multi laboratory trial to evaluate quality control ranges for *Mycobacterium peregrinum* ATCC 700686 with 5 antimicrobial agents for the microbroth dilution method using the CLSI M23 document.

MATERIALS

Testing was performed at 8 different sites:

- ARUP Research Institute
- TREK Diagnostic Systems
- Cleveland Clinic Foundation
- Wisconsin State Lab
- Lab Corp
- Mayo Clinic
- Winnipeg-Canadian Science Center for Human and Animal Health
- University of Texas Health Center

Quality Control Strains

Mycobacterium peregrinum ATCC 700686
Staphylococcus aureus ATCC 29213

• The frozen reference microdilution plates were prepared by TREK Diagnostic Systems, Cleveland, OH, as per the CLSI M7 standard.

3 Different Lots of Mueller Hinton Broth

Supplied by Becton Dickinson (Sparks, MD)

Lot #1- 3126205 DIFCO
 Lot #2- 3311419 DIFCO
 Lot #3- 2218968 BBL

5 Antimicrobial Agents

Antimicrobials	Range Tested (µg/ml)	Supplied By
Cefoxitin	0.5-64	Sigma-Aldrich St. Louis, Missouri
Linezolid	0.5-8	Pfizer Pharmaceuticals New York, New York
Meropenem	0.015-32	Astra Zeneca Wilmington, Delaware
Tobramycin	0.06-16	Sigma-Aldrich St. Louis, Missouri
Ertapenem	0.03-64	Merck & Co., Inc. North Wales, PA

METHODS

• The study design followed the CLSI M23 guidelines for establishing quality control ranges. These studies evaluate the reproducibility of inter to intra laboratory testing and between reagent lots.²

• The MIC plates were inoculated, incubated, and read according to the CLSI M24-A section 5 and M7-A6 standards.^{1,3}

• Colony counts were performed for each ATCC Quality Control strain per day of testing as per the protocol.

• Data analysis for establishing the expected ranges was based on 95% of the results included in the proposed range

RESULTS

• For MIC QC ranges, a 3 dilution range is preferred. However, in order to obtain 95% of the values included, a four dilution range may be needed.

- Based on the results from the study, the proposed ranges for ATCC 700686 *M. peregrinum* were 4-32 µg/ml cefoxitin, 1-8 µg/ml linezolid, 2-16 µg/ml meropenem, 8-32 µg/ml ertapenem, and 2-8 µg/ml tobramycin. The distribution of results can be observed in Tables 2-6.

- The MIC values for tobramycin, linezolid, and cefoxitin were all expanded from their original 2 well range published in CLSI document M24-A Table 9.

• The 8 laboratory study also tabulates the inter and intra laboratory performances for the five different antimicrobials along with variations in the 3 different reagent lots of Mueller Hinton Broth. This can be observed in Table 1.

Table 1. Distribution of Quality Control (QC) MICs Tested with 3 Different Reagent Lots of Mueller Hinton Broth

Method/ Result MIC (µg/ml)	Cefoxitin Lot #			Linezolid Lot #			Meropenem Lot #			Tobramycin Lot #			Ertapenem Lot #					
	1	2	3	1	2	3	1	2	3	1	2	3	1	2	3			
	0.015 0.03 0.06 0.12 0.25 0.5 1 2 4 8 16 32 64 128						1			2		9	19	5			17	17
	60	42	43	40	27	39	52	50	36	66	60	66			62	62	59	
	20	38	37	2	8	12	28	30	42	5	1	9	1	1	1			

Table 2. Inter and Intra Laboratory comparisons of the Cefoxitin* MIC results versus M. peregrinum ATCC 700686 for eight test sites

MIC (µg/ml)	A	B	C	D	E	F	G	H	Total
0.5									
1									
2									
4									
8	19	22	20	24	20	12	22	5	144
16	11	8	10	6	10	18	8	25	96
32									
64									
128									
Total	30	30	30	30	30	30	30	30	240
MODE	8	8	8	8	8	16	8	16	8
Range	2	2	2	2	2	2	2	2	2

*100% of results within proposed QC Range (4-32 µg/ml)

RESULTS cont.

Table 3. Inter and Intra Laboratory comparisons of the Linezolid* MIC results versus M. peregrinum ATCC 700686 for eight test sites

MIC (µg/ml)	Laboratory code (occurrences)								Total
	A	B	C	D	E	F	G	H	
0.5									
1		3			1				4
2	11	20	26	26	24	2		7	116
4	14	7	4	2	6	24	28	22	107
8	8					4	2	1	15
Total	33	30	30	30	30	30	30	30	242
MODE	4	2	2	2	2	4	4	4	2
Range	3	3	3	3	2	3	2	3	4

*100% of results within proposed QC Range (1-8 µg/ml)

Table 4. Inter and Intra Laboratory comparisons of the Meropenem* MIC results versus M. peregrinum ATCC 700686 for eight test sites

MIC (µg/ml)	Laboratory code (occurrences)								Total
	A	B	C	D	E	F	G	H	
0.5									
1									
2		2							2
4	23	20	21	27	18	2	26	7	144
8	7	8	9	3	12	28	4	23	94
16									
32									
Total	30	30	30	30	30	30	30	30	240
MODE	4	4	4	4	4	8	4	8	4
Range	2	3	2	2	2	2	2	2	3

*100% of results within proposed QC Range (2-16 µg/ml)

Table 5. Inter and Intra Laboratory comparisons of the Tobramycin* MIC results versus M. peregrinum ATCC 700686 for eight test sites

MIC (µg/ml)	Laboratory code (occurrences)								Total
	A	B	C	D	E	F	G	H	
0.06									
0.12									
0.25									
0.5									
1									
2		16		3	7	5	2		33
4	30	14	30	25	22	24	28	19	192
8				2	1	1		11	15
16									
Total	30	30	30	30	30	30	30	30	240
MODE	4	2	4	4	4	4	4	4	4
Range	1	2	1	3	3	3x	2	2	3

*100% of results within proposed QC Range (2-8 µg/ml)

RESULTS cont.

Table 6. Inter and Intra Laboratory comparisons of the Ertapenem* MIC results versus M. peregrinum ATCC 700686 for eight test sites

MIC (µg/ml)	Laboratory code (occurrences)								Total
	A	B	C	D	E	F	G	H	
0.03									
0.06									
0.12									
0.25									
0.5									
1									
2									
4									
8	14	18		15		1	2	4	54
16	16	12	30	15	29	29	28	24	183
32					1			2	3
64									
Total	30	30	30	30	30	30	30	30	240
MODE	16	8	16	16	16	16	16	16	16
Range	2	2	1	2	2	2	2	3	3

*100% of results within proposed QC Range (8-32 µg/ml)

CONCLUSIONS

• The results from this 8 laboratory study were adequate to provide acceptable ranges for 4 of the 5 antimicrobials tested. These approved ranges are listed below:

Quality Control Ranges of Minimal Inhibitory Concentrations (MICs) (µg/ml) for M. peregrinum ATCC 700686 and S. aureus ATCC 29213 when Testing Rapidly Growing Mycobacteria

Antimicrobial Agent	MIC Range (µg/ml) for <i>M. peregrinum</i> ATCC 700686	MIC Range (µg/ml) for <i>S. aureus</i> ATCC 29213
Cefoxitin	4-32	1-4
Linezolid	1-8	1-4
Meropenem	2-16	0.03-0.12
Tobramycin	2-8	0.12-1
*Ertapenem	8-32	N/A

*Not included in Table 9 in the M24 supplement: It was decided by the subcommittee not to include ertapenem (8-32 µg/ml) QC ranges in the approved table 9 supplement for M24 since ertapenem is not normally utilized for treatment of patients.

• Data analysis for establishing the expected ranges is based on 95% of the values being included in the proposed ranges.

• All of the generated MIC values were incorporated within the recently approved ranges. There were no occurrences noted between labs or reagent lots.

REFERENCES

- 1.National Committee for Clinical Laboratory Standards. 2003. *Methods for dilution antimicrobial susceptibility tests for bacteria that grow aerobically; approved standard-sixth edition*. Approved document M7-A6. Wayne, PA: NCCLS
- 2.National Committee for Clinical Laboratory Standards. 2001. *Development of In Vitro susceptibility testing criteria and quality control parameters; approved guideline second edition*. Approved document M23. Wayne, PA: NCCLS
- 3.National Committee for Clinical Laboratory Standards. 2003. *Susceptibility testing of Mycobacteria, Nocardiae, and other aerobic actinomycetes; approved standard*. Approved document M24-A. Wayne, PA: NCCLS