

Frequently Asked Questions for the EUCAST Susceptibility Testing Method

Does the workshop cover the EUCAST disk diffusion method?

Yes, all aspects of the EUCAST disk diffusion method are covered alongside BSAC disk testing for comparison. The workshop also covers the theory & practicalities of how to detect resistance mechanisms.

How can I interpret MIC results for agents/organisms for which there is no data in the tables

Pharmakokinetic / Pharmacodynamic breakpoints; see the tab "PK PD breakpoints". These are non species specific breakpoints.

Can we perform disk diffusion testing on *N. gonorrhoeae*?

EUCAST currently have not developed a disk diffusion method for *Neisseria* species. Difficulties regarding growth on media are cited as the main reason; no one media supports good growth for all isolates.

We are looking into this problem alongside EUCAST. In the interim laboratories can either continue disk testing using the BSAC method or MIC test as per EUCAST instructions.

If we MIC test *Neisseria* species what media do we use?

Perform according to manufacturer's instructions – do not use either IsoSensitest agar with 5% horse blood & 20ug/ml NAD OR Mueller Hinton Fastidious agar (incl. 5% defibrinated horse blood & 20ug/ml NAD) unless advised by manufacturer.

What do dashes and IE mean in the EUCAST breakpoint tables?

The dashes mean that no breakpoint is available for the antimicrobial / organism combination & that susceptibility testing should not be performed. When no breakpoints are available it is because either the drug is not indicated for the organism or that breakpoints are not clinically useful; due to either lack of data or problems associated with susceptibility testing.

IE mean there is insufficient evidence that the organism is a good target for therapy with the agent.

Do we still use a *S. aureus* control strain to quality control susceptibility testing of Campylobacters

No EUCAST recommend a *C. jejuni* ATCC 33560.

Do we need to use clinical isolates to verify the EUCAST disk diffusion method in our laboratory?

No, the use of control isolates is sufficient. The control isolates have defined target zone diameters and are far better than clinical isolates for establishing your ability to perform the method.

Can we still perform direct sensitivities on urines and blood cultures using the EUCAST method?

EUCAST guidance on direct sensitivity testing can be found:

http://www.eucast.org/fileadmin/src/media/PDFs/EUCAST_files/General_documents/Direct_testing_guidance_note_Feb2012.pdf

Direct sensitivities are currently used widely in the UK and laboratories may wish to maintain testing. To continue using direct sensitivities each laboratory will need to validate the method using their current technique. A comparison of results with the EUCAST standardised disk diffusion method will provide data for the validation. See the BSAC produced document for help.

Do we need to stop using the BSAC disk diffusion method by end of January 2016?

It is advisable to move from BSAC to EUCAST disk diffusion methods by January 2016 or as soon as you can after this date. There may be instances when laboratories cannot implement the EUCAST disk diffusion method because of extenuating circumstances. In such cases it is best to adopt the current “tried & tested” method until the laboratory feels able to move over. It is advisable to move to the EUCAST disk diffusion method before January 2017, if not a plan of implementation is required to complete ISO 15189 accreditation.

Who can we turn to for support whilst moving from BSAC to EUCAST disk diffusion methods?

BSAC are here to help with any aspect of the implementation of the EUCAST disk method, contact details are on the website. A “Buddying scheme” is offered which connects laboratories just starting the process of implementation with those who already use EUCAST – see the website for details.

How do I interpret Group F Streptococci (e.g. *S. anginosus*) using the EUCAST breakpoint tables?

Use the breakpoints in the viridans streps tab of the EUCAST breakpoint tables; as from January 2016 there is a helpful guide as to which *Streptococcus* species is covered in the table.

