Infection, Genetics and Evolution 67 (2019) 244

Contents lists available at ScienceDirect

Infection, Genetics and Evolution

journal homepage: www.elsevier.com/locate/meegid

COMMENT on the comment: Goić-Barišić, I. Comment and correct to the paper „Arrival of carbapenem-hydrolyzing oxacillinases in *Acinetobacter baumannii* in Bosnia and Herzegovina

Dear Editor,

I read with interest the comment (Goić-Barišić, 2018) written on my paper "Arrival of carbapenem hydrolyzing oxacillinases in Bosnia and Herzegovina" (Petrović et al., 2018) by Ivana Goić-Barišić. With respect to the author, I would like to explain that the OXA-72 carbapenemase reported in her paper published in Journal of Hospital Infection was not identified in Bosnia and Herzegovina (Goić-Barišić et al., 2011). It was imported case of a patient transferred from University Hospital in Mostar to the University Hospital in Split. The *A. baumannii* strain was analyzed in Split in Croatia and identified as OXA-72 positive. Theoretically, it is possible that the patient was colonized with that strain during the stay in University Hospital Split. The fact that there were no OXA-72 producing organisms in University Hospital Split prior of the hospitalization of the mentioned patient from Bosnia and Herzegovina does not necessarily prove that the strain is imported. In our previous paper published European Journal of Clinical Microbiology and Infectious diseases (Vranić-Ladavac et al., 2014) *A. baumannii* isolates collected in the multicenter study conducted from 2009 to 2011 were analyzed, and General Hospital Pula in Croatia, involved in the study, did not have any carbapene-hydrolyzing oxacillinases (CHDL) in the study period (2009–2011.) However, the CHDL emerged in Pula in 2013 with none of the patients being hospitalized abroad or in other hospital centers in Croatia as reported recently (Ladavac et al., 2017). In theory, it is possible that OXA-72 emerged „de novo "University Hospital Split under selective pressure of carbapenems as reported in many other studies. The clinical microbiologists in Mostar have not isolated the strain from the mentioned patient and sent it to Split for identification and characterization. The patient was transferred from one hospital to the other. She could have been colonized elsewhere. The undoubted proof would be the analyis of the strain sent from Mostar to Split. Moreover, the clinical microbiologists in University Hospital Mostar were not informed about the existence of extensively- drug resistant isolate in order to implement the infection control measure and did not participate in the characterization of the isolate. None of the clinical microbiologists from University Hospital Mostar is the coauthor in the paper from Goić-Barišić et al. (Goić-Barišić et al., 2011). In the view of these information it is hard to say that it was really the Bosnian strain. Morevoer, the paper from Goić-Barišić et al., is focused on an oubreak in Croatia following the importation of the Mostar strain which is visible from the title of the paper „Outbreak in Croatia caused by a new carbapenem-resistant clone of *Acinetobacter baumannii* producing OXA-72 carbapenemase "and is cited in our paper as OXA-72 positive *A. baumannii* from Croatia and not from Bosnia and Herzegovina.

Furthermore, the author of the comment claims that the OXA-72 producing *A. baumannii*, isolated in Split in January 2009, reported in the paper published in Journal of Hospital infections is the first one in Southeast Europe. However, we have published the paper on the oubreak of OXA-72 producing *A. baumannii* in University Hospital Center Zagreb in International journal of Infectious Diseases in 2011 (Franolić-Kukina et al., 2011). The isolates described in that paper were isolated in July to August 2008 and thus should be the first one in this geographic region. I would like to use this opportunity to give the proper informations to the medical and scientific audience.

References

Franolić-Kukina, I., Bedenić, B., Budimir, A., Herljević, Z., Vraneš, J., Higgins, P., 2011. Clonal spread of carbapenem-resistant OXA-72 positive *Acinetobacter baumannii* in a Croatian university hospital. Int. J. Infect. Dis. 15 (e706-e70).

Goić-Barišić, I., 2018. Comment and correct to the paper, Arrival of carbapenem-hydrolyzing oxacillinases in *Acinetobacter baumannii* in Bosnia and Herzegovina. Infect. Genet. Evol. 61, 207.

Goić-Barišić, I., Towner, K.J., Kovačić, A., Šiško-Kraljević, K., Tonkić, M., Novak, A., Punda-Polić, V., 2011. Outbreak in Croatia caused by a new carbapenem-resistant clone of *Acinetobacter baumannii* producing OXA-72 carbapenemase. J. Hosp. Infect. 77 (4), 368–369.

Ladavac, R., Bedenić, B., Vranić-Ladavac, M., Barišić, N., Karčić, N., Pompe, K., Ferenčić, A., Stojanović, A., Seifert, H., Katić, S., Higgins, P.G., 2017. Emergence of different *Acinetobacter baumannii* clones in a Croatian hospital and correlation with antibiotic susceptibility. J Glob Antimicrob Resist 10, 213–218. https://doi.org/10.1016/.

Petrović, T., Uzunović, S., Barišić, I., Luxner, J., Grisold, A., Zarfel, G., Ibrahimagić, A., Jakovac, S., Slaćanac, D., Bedenić, B., 2018. Arrival of carbapenem-hydrolyzing-oxacillinases in *Acinetobacter baumannii* in Bosnia and Herzegovina. Infect. Genet. Evol. 58, 192–198.

Vranić-Ladavac, M., Bedenić, B., Minandri, F., Ištok, M., Frančula-Zaninović, S., Ladavac, R., Visca, P., 2014. Carbapenem-resistance and acquired class D carbapenemases in *Acinetobacter baumannii* from Croatia 2009-2010. Eur. J. Clin. Microbiol. Infect. Dis. 33 (3), 471–478.

Branka Bedenić[a,b,*]

[a] *School of Medicine, Universtiy of Zagreb, Croatia*

[b] *Clinical Hospital Center Zagreb, Croatia*

E-mail addresses: branka.bedenic@kbc-zagreb.hr, bbedenic@mef.hr

* Corresponding author at: Clinical Department for Clinical and Molecular Microbiology, School of Medicine, University of Zagreb, University Hospital Center Zagreb, Croatia.

https://doi.org/10.1016/j.meegid.2018.07.019
Received 17 June 2018; Accepted 17 July 2018
Available online 17 July 2018