

SHC Clinical Pathway: Management of Urinary Tract Infections – Adult Patients**Stewardship Tips/Pearls****Enterococcus/VRE in urine cultures**

- For all bacteria recovered from urine culture it is important to distinguish between symptomatic UTI and asymptomatic bacteriuria (ASB).
- A patient with ASB should NOT be given antibiotics per IDSA guidelines, except in the setting of pregnancy or planned urologic manipulation.
- Enterococci are normal flora of the GI tract, and often colonize the urinary tract and indwelling urinary catheters.^{1,2}
 - In patients with urinary catheters, pyuria (+WBC on UA) is reflective of inflammation and should not be used to differentiate between UTI and ASB per IDSA guidelines
- If Enterococci are isolated from urine culture and patient is asymptomatic/stable consider the following:
 - Hold antibiotics and observe for development of symptoms (*dysuria, increased urinary urgency/frequency, suprapubic pain, fever*)
 - Foley catheter removal
 - Repeat UA and/or urine culture (though persistent recovery of organism from urine culture may occur in the setting of colonization/ASB)
- Tx options for symptomatic VRE UTI include:
 - nitrofurantoin
 - doxycycline (tetracycline susceptible predicts doxycycline susceptible. For tetracycline resistant isolates, call lab to check doxycycline susceptibilities)
 - linezolid (not tedizolid)
 - daptomycin

References:

1. Lin E et al. Overtreatment of enterococcal bacteriuria. Arch Intern Med. 2012;172(1):33-38.
2. Heintz BH et al. Vancomycin-Resistant Enterococcal Urinary Tract Infections. Pharmacotherapy. 2010 Nov 1;30(11):1136-49.
3. Shah KJ et al. Ampicillin for the treatment of complicated urinary tract infections caused by vancomycin resistant enterococcus spp (VRE): a single-center university hospital experience. International Journal of Antimicrobial Agents. 2017 Jun 27
4. Trautner, Barbara W., et al. "Effectiveness of an antimicrobial stewardship approach for urinary catheter-associated asymptomatic bacteriuria." JAMA internal medicine 175.7 (2015): 1120-1127