Colonization with MRSA was present in 2 children and with P. aeruginosa in 1 child. All MRSA isolates were sensitive to vancomycin and linezolid and P. aeruginosa susceptible to first line antibiotics.

Discussion
S. aureus and P. aeruginosa were the most commonly isolated pathogens from sputum of pediatric CF cases. Antibiotic selection pressure induced antibiotic resistance, presence of low oxygen content and biofilm formation contribute to increased antibiotic tolerance that causes persistence of microorganisms in the airways of CF patients despite antibiotic therapy.

Conclusion: Microbiological surveillance of CF airway secretions is very important for keeping the patients stable and preventing lung function worsening. Complete eradication of bacterial colonization is difficult despite antibiotic therapy.

MOLECULAR EVALUATION OF EXTRA PULMONARY SAMPLES FOR MYCOBACTERIUM TUBERCULOSIS DETECTION AND RIFAMPICIN RESISTANCE IN A TERTIARY CARE HOSPITAL IN EASTERN INDIA - A RETROSPECTIVE STUDY

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Introduction
TB has become one of the major health problems globally and as per WHO India has the highest TB burden. Among all the tuberculosis incidences extrapulmonary tuberculosis positive cases are increasing in different parts of India.

Objectives
In this study we have emphasized on the positive cases of extrapulmonary tuberculosis along with the drug resistance in eastern part of India.

Methods
The study was conducted in Medica Superspecialty Hospital, Kolkata from March 2016 to July 2017. Nucleic acid amplification test (NAAT) was performed for the detection of MTB bacterial load and Rifampicin resistance by Truenat chip based MTB and MTB Rif Dx kit on TrueMx Uno Dx Real Time micro PCR analyzer from Molbio Diagnostics on extrapulmonary samples like CSF, pleural fluid, biopsy tissue, ascitic fluid, synovial fluid, gastric lavage and paraspinal pus (Total 86).

Results and discussion
A total of 16 samples (25%) out of 86, were found positive for Mycobacterium tuberculosis. Rifampicin resistance was detected in two samples (12.5%) out of 16 positive samples.

Conclusion
This study conducted at Medica Superspecialty Hospital suggests that there is a considerable incidence of EPTB cases in the eastern part of India. This observation warrants the need for using new technologies like molecular diagnostic tests for diagnosing EPTB so that timely appropriate treatment can be provided to patients.

COMPARISON OF RPR, TPHA AND HIV ANTIBODY TEST RESULTS OF PATIENTS ATTENDING STD CLINIC AND ICTCF TERTIARY CARE HOSPITAL

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Introduction
According to WHO estimates, about 3.40 million cases of curable sexually transmitted infections (STI) occur globally every year, Syphilis being one of the most common among them. It usually presents as painless ulcerative lesion on the genital area. These lesions facilitate HIV acquisition through sexual intercourse, increasing the risk by 5-10 times. Serological tests are routinely done for the screening and diagnosis of syphilis. Non-treponemal tests are used for screening and specific Treponemal tests are used for confirmation of syphilis infection.

Objectives
To compare the results of RPR and micro-TPHA in patients attending STD clinic and ICTCF and to find HIV co-infection among them, in our institute.

Material & Method
A total of 270 patients attending STD clinic and ICTCF at MGM Medical College, Indore, over a period of 3 months, from 1st April to 15th July, 2018 were included in the study. RPR test was performed for all these patients and reactive samples were tested by micro-TPHA for confirmation of syphilis. HIV antibody test results of all these patients were recorded from ICTCF of our Institute. Their demographic details and personal and clinical history was collected. The results were recorded and analysed.

Result
During the study period, 270 patients were tested for RPR, out of which 40 (14.8%) were found to be reactive. Out of these 40 samples, 32 (80%) samples were micro-TPHA positive and 17 (42.5%) were positive for HIV antibody test. Syphilis and HIV co-infection was seen in 53% cases. Out of the 40 patients, 26 (65%) were male, 13 (32.5%) were female and 1 (2.5%) was transgender. Clinically, 2 (6%) patients presented with secondary syphilis and 30 (94%) patients had latent syphilis at presentation. Homosexuality was the most common high-risk factor, seen in about 50% of micro-TPHA positive patients.