

Leuconostoc Bacteremia in Pediatric Patients With Short Bowel Syndrome: Case Series and Review.

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INTRODUCTION:: Infections caused by *Leuconostoc* species are rare with most reported cases occurring in immunocompromised patients. This article presents 6 new cases of pediatric patients with short bowel syndrome who developed *Leuconostoc* bacteremia, and compares these cases with those previously reported in the literature. **MATERIALS AND METHODS::** This is a retrospective, descriptive study (January 2001 to May 2007) performed in a tertiary care teaching center. Hospitalized patients younger than 18 years of age, with multiple positive blood cultures for *Leuconostoc* spp. were evaluated. The collected data were compared with 10 similar previously reported cases. **RESULTS::** Six new cases of pediatric patients with short bowel syndrome who developed *Leuconostoc* bacteremia were identified. All 6 patients had received total parenteral nutrition and had central venous access, while 3 of these patients also received enteral nutrition. These results are similar to those reported in the literature. Only one of the newly reported patients had received vancomycin therapy before detection of *Leuconostoc* in the blood, whereas all prior reported cases had previously received this antimicrobial agent. Molecular analysis identified *Leuconostoc mesenteroides* as the most common species (4 cases) detected. **CONCLUSIONS::** This report expands on the number of cases of *Leuconostoc* bacteremia in pediatric patients with short bowel syndrome and shows that prior vancomycin is not a required risk factor for the development of this infection. As previously reported in the literature, the presence of a central venous catheter and disrupted bowel mucosa are risk factors for *Leuconostoc* bacteremia.

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