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

Florescu D, Hill L, Sudan D, Iwen PC.

From the *Immunocompromised Host Infectious Diseases Program, and Departments of daggerSurgery, and double daggerPathology and Microbiology University of Nebraska Medical Center, Omaha, NE.

**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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