

CHAPTER 7

CONCLUSION AND SUGGESTIONS

7.1 Conclusion

- 7.1.1 There is a significant increase of resistance on *K.pneumoniae* towards antimicrobial at Dr.Saiful Anwar General Hospital, Malang from year 2009/10 to 2010/2011.
- 7.1.2 There is significant increase in resistance of amoxicillin+clavulanic acid,kanamicin,ciprofloxacin and nalidixic acid.
- 7.1.3 There is no significant increase in resistance of cefotaxime, ceftriaxone, cefuroxime,cephalothin,gentamicin,netilmicin,amikacin,ofloxacin,norfloxacin,meropenem,tetracycline,doxycycline,chloramphenicol,cotrimaxazole,sulfonamide and nitrofurantoin.

7.2 Suggestions

- This kind of research should be continued so that the antimicrobial susceptibility pattern towards *K.pneumoniae* can be monitored in years to come.
- Sensitivity test should be conducted before prescribing antimicrobials drugs to patient to prevent the prescription of resistant antimicrobial drugs.
- A further study should be conducted focusing more on risk factors.
- Restrict antimicrobial use for inappropriate indications. Reevaluate the first and second line therapies for the treatment of urinary tract infections in our regions.



- Clinician should be more careful in prescribing antimicrobials to patients especially for antimicrobials which shows decreased sensitivity. Moreover, clinicians should not overprescribe sensitive antimicrobials as this can lead to resistance in future.
- Pharmacist should control the sales of antimicrobial drugs so that it is not misused by community, especially those without clinician's prescription.
- Provide patient education on *K.pneumoniae* infection, prevention and management.
- Medical staffs should obtain complete data of patient and be recorded completely.



REFERENCE

- Arnold, Thom, SR, Kerri, A 2010, *Southern Medical Journal*: January 2011, Volume 104, pp 40-45.
- Barnett 1997, Urinary tract infection.An overview.Am J Med Sci 314(4):245-2492), *Clinical Infectious Diseases*, 2nd edition,pp 35-39.
- Barry HC, Hickner J, Ebell MH, Ettenhofer T, A randomized controlled trial of telephone management of suspected urinary tract infections in women, *J Fam Pract.* 2005 Jul; 50(7):589–594.
- Bearden, DT, Danziger, L H 2001, “Mechanism of action of and resistance to quinolones”, *Pharmacotherapy*, 21(10s): pp1-11.
- Cameron JS, Davidson A M, Grunfeld JP 2004, Oxford Textbook of Clinical Nephrology, *Oxford University Press*, pp. 213-29.
- Cano, M E 2009, “Detection of plasmid-mediated quinolone resistance genes in clinical isolates of Enterobacter spp. in Spain”, *J. Clin. Microbiol*, pp2033–2039.
- Canton, R and Coque, T M 2006, The CTX-M beta-lactamase pandemic.Curr. Opin. Microbiol. 9: 466-475.Characterization of the Pseudomonas aeruginosa 101 /1477 metallo-β-lactamase IMP-1produced by Klebsiella pneumoniae”,*Antimicrob Agen Chemother*,pp902–906.
- Cheesbrough, M 2006, The Edinburgh Building, Cambridge CB2 8RU, UK District Laboratory Practice in Tropical Countries, *Part2*, *Cambridge University Press, Cambridge UK*, p434.
- Chen, Y J, Kuo, H K, Wu, P C, Kuo, M L, Tsai, H H, Liu, C C.,Chen, C H 2004,”A 10-year comparison of endogenous endophthalmitis outcomes”,*An East Asian experience with Klebsiella pneumoniae infection Retina*24, pp383–390.

David, A, William, Thomas,L, Lemke 2002, Foye's Principle of Medicinal Chemistry 5th Edition,Chapters 34.

Davies J and Wright G 1997, "Bacterial Resistance to Aminoglycoside Antibiotics", *Trends in Microbiology*, vol 5,pp234-39.*Escherichia coli* and *Klebsiella pneumoniae*", *Clin.Microbiol Reviews* 21, pp26-59.

Fihn SD 2003, acute uncomplicated urinary tract infection, *New England Journal of Medicine* 349, pp259-266.

Fleiszig, S M J, Zaidi, T S and Pier, GB 2002, *Klebsiella pneumonia*

Fred,C,Tenover 2006, "Mechanism of Antimicrobial Resistance in Bacteria", *The American Journal of Medicine*, p228-233.

French,G.,and Ling,T 1998," Amoxycilin/clavulanate resistant *Klebsiella Pneumoniae*",*Antimicrob Agents Chemother*,Volume 39,pp2478-2483.

Gordon,G,Forbes,K,Gould,IM 1994,"Quinolone-resistant *Haemophilus influenza*",*Antimicrob Agents Chemother*,chap 33,pp 607-617.

Highsmith A K, Jarvis W R 2007, "*Klebsiella pneumoniae*: selected virulence factors that contribute to pathogenicity", *Infect Control*, pp75–77.

Jacobsen, SM, Stickler, DJ Mobley,HLT and Shirtliff, ME 2008,"Complicated Catheter-Associated Urinary Tract Infections", pp 99-138.

Kalsi J, Arya M, Wilson P, Mundy, A 2003, *Int J Clin Pract.* 57(5):388-91.

Katzung B.G, Susan B, Anthony Trevor 2009,"Section VIII:Chemotherapeutic Drugs", *Basic & Clinical Pharmacology 11th Edition*,p872.



Kucers A, Crowe S, Grayson ML, Hoy J. 1997, "The Use of Antibiotics: A Clinical Review of Antibacterial, Antifungal, and Antiviral Drugs 5th edition Oxford", *Butterworth Heinemann*, pp452-457.

Laraki, N, Franceschini, N, Rossolini, GM, Santucci, P, Meunier, C., De Pauw, E., Amicosante, G., Frere, J.M., Galleni, M. 1999, Biochemical, pp 128.

Leslie, K, Levine C, Halper D, Peist A, Gould DA, Bridging troubled waters: family caregivers, transitions, and long-term care, *Health Aff (Millwood)* 2010;29(1):116-124.

Marre, R, and Schulz, E 1997, "In vitro activity of mecillinam and amoxicillin/clavulanic acid against strains of Klebsiella Pneumoniae producing TEM-1, OXA-1 and chromosomal b-lactamases", *Arzneim. Forsch*, Vol 38, pp863–865.

Mori R, Lakanpaul M, Verrier-Jones, K 2007, "Diagnosis and management of urinary tract infection in children", *Summary of NICE guidance. BMJ*; 335(7616):pp395-7.

Nicolle, L E 2001, "Epidemiology of urinary tract infection", *Infect. Med.*, pp153–162.

Norrby, S R 2007, "Approach to the patient with urinary tract infection", *Cecil Medicine 23rd ed Philadelphia*, chap.306.

Port, T 2006, Mode of Action of Gentamicin, Amikacin, Neomycin and Related Antimicrobics, *The Antimicrobial Drugs*, 2nd Ed, Oxford University Press pili in acute pulmonary infection", *Infect. Immun*, vol 63, pp1278-1285.

R. Finkelstein, Kassis, E, Reinhertz, G, Gorenstein, S, Herman, P 2009, *Journal of Hospital Infection*, Volume 38, Issue 3, p193-202.

Ronald 1997,"complicated urinary tract infections", *Infect Dis Clin North Am*, pp583-592.

Satish ,G 2006, "The Short Text books of Medical Microbiology 9th Edition, Jaypee Brothers", *Medical Publishers (P) Ltd., New Delhi.*

Scholar , E M, Pratt, W B 2000, "The Antimicrobial Drugs. 2nd Edition", *Oxford University Press* survival and multiplication within corneal epithelial cells in vitro,*Infect. Immun.* 63:4072-4077.

Tang, H, Kays M and Prince, A 1995,"Role of *Klebsiella Pneumoniae*

Todar, K 2004, "Corynebacterium diphtheiae and diphtheria, web review of todar's online textbook of bacteriology", *The good, the bad and the deadly Sci. Magazine*, Vol 2,pp1421-1632.

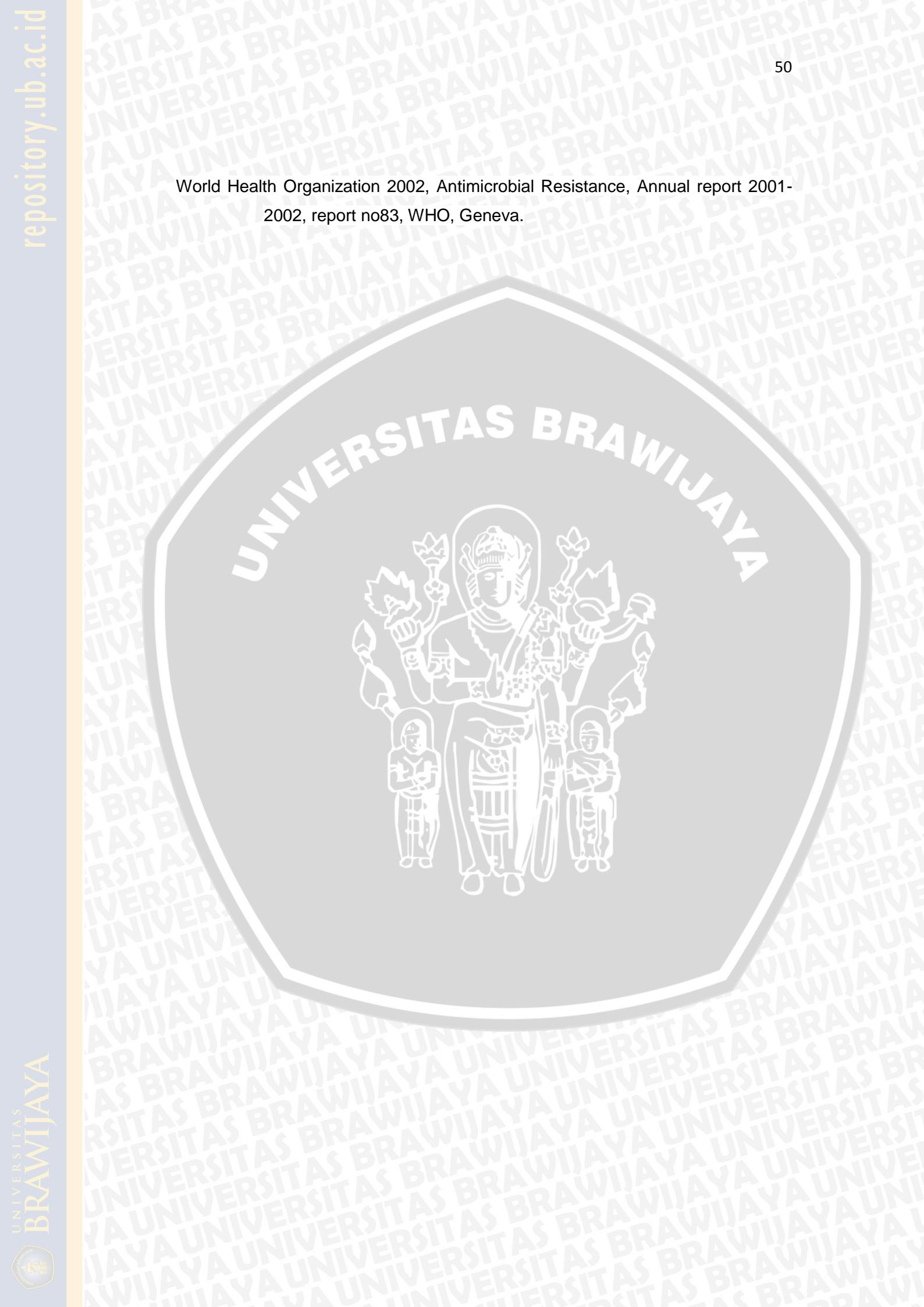
Umeh, N, Awodi 2009, "Urinary Tract Infections among Female Students of The University Of Agriculture, Makurdi, Benue State, Nigeria", *The Internet Journal of Microbiology*, Volume 7 Number 1,pp 219.

Walter E. Stamm 2008, Urinary Tract Infection, Pyelonephritis and Prostatitis, *Harrison's Principles of Internal Medicine 17th Edition*, pp1826-1827.

Warren, JW, Abrutyn, E, Hebel, JR 1999, *Guidelines for antimicrobial treatment of uncomplicated acute bacterial cystitis and acute pyelonephritis in women*. Infectious Diseases Society of America, *Clin Infect Dis.* 29, pp745-758.

Wen-Chien Ko, David , L, Paterson, Anthanasia, J,Sagnimeni, Dennis , S, Hansen, Anne Von Gottberg, Sunita Mohapatra, Jose Maria Casellas, Herman Goossens, Lutfiye Mulazimoglu, Gordon Trenholme, Keith P. Klugman, Joseph G. McCormack, Victor L. Yu. 2002, "Community-Acquired *Klebsiella pneumoniae*", *Bacteremia: Global Differences in Clinical Patterns*, Vol. 8, p 2.

World Health Organization 2002, Antimicrobial Resistance, Annual report 2001-2002, report no83, WHO, Geneva.



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APPENDICES

A. Results of data analysis of each antibiotic

1)

year * amoxiclav Crosstabulation

			amoxiclav		Total
year	2009	Count	Sensitive	Resistant	
2009	Count	41	19	60	
	% within amoxiclav	57.7%	35.2%	48.0%	
2011	Count	30	35	65	
	% within amoxiclav	42.3%	64.8%	52.0%	
Total	Count	71	54	125	
	% within amoxiclav	100.0%	100.0%	100.0%	

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	6.255 ^a	1	.012		
Continuity Correction ^b	5.384	1	.020		
Likelihood Ratio	6.324	1	.012		
Fisher's Exact Test				.018	.010
Linear-by-Linear Association	6.205	1	.013		
N of Valid Cases ^b	125				

a. 0 cells (.0%) have expected count less than 5. The minimum expected count is 25.92.

b. Computed only for a 2x2 table



2)

year * cefotaxim Crosstabulation

		cefotaxim		Total	
		Sensitive	resistant		
year	2009	Count	24	14	38
		% within cefotaxim	52.2%	42.4%	48.1%
Total	2011	Count	22	19	41
		% within cefotaxim	47.8%	57.6%	51.9%
Total		Count	46	33	79
		% within cefotaxim	100.0%	100.0%	100.0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	.732 ^a	1	.392		
Continuity Correction ^b	.393	1	.531		
Likelihood Ratio	.734	1	.392		
Fisher's Exact Test				.494	.266
Linear-by-Linear Association	.722	1	.395		
N of Valid Cases ^b	79				

a. 0 cells (.0%) have expected count less than 5. The minimum expected count is 15.87.

b. Computed only for a 2x2 table



3)

year * ceftriaxone Crosstabulation

		ceftriaxone		Total
		sensitive	resistant	
year	2009	Count	31	12
		% within ceftriaxone	54.4%	48.0%
	2011	Count	26	13
		% within ceftriaxone	45.6%	52.0%
Total		Count	57	25
		% within ceftriaxone	100.0%	100.0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	.284 ^a	1	.594		
Continuity Correction ^b	.086	1	.770		
Likelihood Ratio	.284	1	.594		
Fisher's Exact Test				.637	.384
Linear-by-Linear Association	.281	1	.596		
N of Valid Cases ^b	82				

a. 0 cells (.0%) have expected count less than 5. The minimum expected count is 11.89.

b. Computed only for a 2x2 table



4)

year * cefuroxim Crosstabulation

		cefuroxim		Total
		sensitive	resistant	
year	2009	Count	18	19
		% within cefuroxime	69.2%	45.2%
	2011	Count	8	23
		% within cefuroxime	30.8%	54.8%
Total		Count	26	42
		% within cefuroxime	100.0%	100.0%
				68

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	3.727 ^a	1	.054		
Continuity Correction ^b	2.822	1	.093		
Likelihood Ratio	3.799	1	.051		
Fisher's Exact Test				.079	.046
Linear-by-Linear Association	3.672	1	.055		
N of Valid Cases ^b	68				

a. 0 cells (.0%) have expected count less than 5. The minimum expected count is 11.85.

b. Computed only for a 2x2 table



5)

year * cephalotin Crosstabulation

			cephalotin		Total	
year	2009	Count	sensitive	resistant		
		% within cephalotin	40.7%	60.0%	50.9%	
Total	2011	Count	16	12	28	
		% within cephalotin	59.3%	40.0%	49.1%	
Total		Count	27	30	57	
		% within cephalotin	100.0%	100.0%	100.0%	

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	2.109 ^a	1	.146		
Continuity Correction ^b	1.409	1	.235		
Likelihood Ratio	2.122	1	.145		
Fisher's Exact Test				.189	.118
Linear-by-Linear Association	2.072	1	.150		
N of Valid Cases ^b	57				

a. 0 cells (.0%) have expected count less than 5. The minimum expected count is 13.26.

b. Computed only for a 2x2 table



6)

year * kanamycin Crosstabulation

		kanamycin		Total	
		sensitive	resistant		
year	2009	Count	17	23	
		% within kanamycin	42.5%	65.7%	
	2011	Count	23	12	
		% within kanamycin	57.5%	34.3%	
Total		Count	40	35	
		% within kanamycin	100.0%	100.0%	
				100.0%	

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	4.042 ^a	1	.044		
Continuity Correction ^b	3.163	1	.075		
Likelihood Ratio	4.086	1	.043		
Fisher's Exact Test				.064	.037
Linear-by-Linear Association	3.988	1	.046		
N of Valid Cases ^b	75				

a. 0 cells (.0%) have expected count less than 5. The minimum expected count is 16.33.

b. Computed only for a 2x2 table



7)

year * gentamicin Crosstabulation

		gentamicin		Total
		sensitive	resistant	
year	2009	Count	45	47
		% within gentamicin	54.2%	66.7%
	2011	Count	38	39
		% within gentamicin	45.8%	33.3%
Total		Count	83	86
		% within gentamicin	100.0%	100.0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	.181 ^a	1	.670		
Continuity Correction ^b	.000	1	1.000		
Likelihood Ratio	.186	1	.667		
Fisher's Exact Test				1.000	.570
Linear-by-Linear Association	.179	1	.672		
N of Valid Cases ^b	86				

a. 2 cells (50.0%) have expected count less than 5. The minimum expected count is 1.36.

b. Computed only for a 2x2 table

8)

year * Netilmicin Crosstabulation

			Netilmicin		Total	
year	2009	Count	sensitive	resistant		
		% within Netilmicin	49.2%	33.3%	48.8%	
Total	2011	Count	63	2	65	
		% within Netilmicin	50.8%	66.7%	51.2%	
Total		Count	124	3	127	
		% within Netilmicin	100.0%	100.0%	100.0%	

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	.295 ^a	1	.587		
Continuity Correction ^b	.000	1	1.000		
Likelihood Ratio	.301	1	.583		
Fisher's Exact Test				1.000	.518
Linear-by-Linear Association	.293	1	.589		
N of Valid Cases ^b	127				

a. 2 cells (50.0%) have expected count less than 5. The minimum expected count is 1.46.

b. Computed only for a 2x2 table



9)

year * Amikacin Crosstabulation

		Amikacin		Total
		sensitive	resistant	
year	2009	Count	63	2
		% within Amikacin	47.7%	25.0%
Total	2011	Count	69	6
		% within Amikacin	52.3%	75.0%
Total		Count	132	8
		% within Amikacin	100.0%	100.0%
				100.0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	1.566 ^a	1	.211		
Continuity Correction ^b	.786	1	.375		
Likelihood Ratio	1.651	1	.199		
Fisher's Exact Test				.285	.189
Linear-by-Linear Association	1.555	1	.212		
N of Valid Cases ^b	140				

a. 2 cells (50.0%) have expected count less than 5. The minimum expected count is 3.71.

b. Computed only for a 2x2 table



10)

year * ciprofloxacin Crosstabulation

		ciprofloxacin		Total
		sensitive	resistant	
year	2009	Count	28	31
		% within ciprofloxacin	58.3%	23.1% 50.8%
	2011	Count	20	30
		% within ciprofloxacin	41.7%	76.9% 49.2%
Total		Count	48	61
		% within ciprofloxacin	100.0%	100.0% 100.0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	5.088 ^a	1	.024		
Continuity Correction ^b	3.775	1	.052		
Likelihood Ratio	5.300	1	.021		
Fisher's Exact Test				.031	.025
Linear-by-Linear Association	5.004	1	.025		
N of Valid Cases ^b	61				

a. 0 cells (.0%) have expected count less than 5. The minimum expected count is 6.39.

b. Computed only for a 2x2 table



11)

year * ofloxacin Crosstabulation

			ofloxacin		Total	
			sensitive	resistant		
year	2009	Count	23	3	26	
		% within ofloxacin	46.9%	50.0%	47.3%	
	2011	Count	26	3	29	
		% within ofloxacin	53.1%	50.0%	52.7%	
Total		Count	49	6	55	
		% within ofloxacin	100.0%	100.0%	100.0%	

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	.020 ^a	1	.887		
Continuity Correction ^b	.000	1	1.000		
Likelihood Ratio	.020	1	.887		
Fisher's Exact Test				1.000	.611
Linear-by-Linear Association	.020	1	.888		
N of Valid Cases ^b	55				

a. 2 cells (50.0%) have expected count less than 5. The minimum expected count is 2.84.

b. Computed only for a 2x2 table

12)

year * norfloxacin Crosstabulation

		norfloxacin		Total
		sensitive	resistant	
year	2009	Count	28	1 29
		% within norfloxacin	52.8%	33.3% 51.8%
Total	2011	Count	25	2 27
		% within norfloxacin	47.2%	66.7% 48.2%
Total		Count	53	3 56
		% within norfloxacin	100.0%	100.0% 100.0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	.432 ^a	1	.511		
Continuity Correction ^b	.004	1	.949		
Likelihood Ratio	.438	1	.508		
Fisher's Exact Test				.605	.473
Linear-by-Linear Association	.425	1	.515		
N of Valid Cases ^b	56				

a. 2 cells (50.0%) have expected count less than 5. The minimum expected count is 1.45.

b. Computed only for a 2x2 table

13)

year * meropenam Crosstabulation

		meropenam		Total	
		sensitive	resistant		
year	2009	Count	62	1	
		% within meropenam	45.6%	50.0%	
	2011	Count	74	1	
		% within meropenam	54.4%	50.0%	
Total		Count	136	2	
		% within meropenam	100.0%	100.0%	
				138	

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	.015 ^a	1	.901		
Continuity Correction ^b	.000	1	1.000		
Likelihood Ratio	.015	1	.901		
Fisher's Exact Test				1.000	.706
Linear-by-Linear Association	.015	1	.901		
N of Valid Cases ^b	138				

a. 2 cells (50.0%) have expected count less than 5. The minimum expected count is .91.

b. Computed only for a 2x2 table

14)

year * tetracycline Crosstabulation

			tetracycline		Total	
year	2009	Count	sensitive	resistant		
		% within tetracycline	50.0%	50.0%	50.0%	
Total	2011	Count	28	1	29	
		% within tetracycline	50.0%	50.0%	50.0%	
Total		Count	56	2	58	
		% within tetracycline	100.0%	100.0%	100.0%	

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	.000 ^a	1	1.000		
Continuity Correction ^b	.000	1	1.000		
Likelihood Ratio	.000	1	1.000		
Fisher's Exact Test				1.000	.754
Linear-by-Linear Association	.000	1	1.000		
N of Valid Cases ^b	58				

a. 2 cells (50.0%) have expected count less than 5. The minimum expected count is 1.00.

b. Computed only for a 2x2 table



15)

year * doxycycline Crosstabulation

			doxycycline		Total	
			sensitive	resistant		
year	2009	Count	11	3	14	
		% within doxycycline	39.3%	50.0%	41.2%	
	2011	Count	17	3	20	
		% within doxycycline	60.7%	50.0%	58.8%	
Total		Count	28	6	34	
		% within doxycycline	100.0%	100.0%	100.0%	

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	.234 ^a	1	.628		
Continuity Correction ^b	.001	1	.979		
Likelihood Ratio	.231	1	.631		
Fisher's Exact Test				.672	.482
Linear-by-Linear Association	.227	1	.634		
N of Valid Cases ^b	34				

a. 2 cells (50.0%) have expected count less than 5. The minimum expected count is 2.47.

b. Computed only for a 2x2 table



16)

year * chloramphenicol Crosstabulation

			chloramphenicol		Total	
			sensitive	resistant		
year	2009	Count	28	8	36	
		% within chloramphenicol	49.1%	72.7%	52.9%	
year	2011	Count	29	3	32	
		% within chloramphenicol	50.9%	27.3%	47.1%	
Total		Count	57	11	68	
		% within chloramphenicol	100.0%	100.0%	100.0%	

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	2.062 ^a	1	.151		
Continuity Correction ^b	1.223	1	.269		
Likelihood Ratio	2.140	1	.143		
Fisher's Exact Test				.196	.134
Linear-by-Linear Association	2.032	1	.154		
N of Valid Cases ^b	68				

a. 0 cells (.0%) have expected count less than 5. The minimum expected count is 5.18.

b. Computed only for a 2x2 table

17)

year * cotrimoxazole Crosstabulation

			cotrimoxazole		Total	
year	2009	Count	sensitive	resistant		
		% within cotrimoxazole	54.9%	66.7%	55.6%	
2011	Count		23	1	24	
		% within cotrimoxazole	45.1%	33.3%	44.4%	
Total		Count	51	3	54	
		% within cotrimoxazole	100.0%	100.0%	100.0%	

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	.159 ^a	1	.690		
Continuity Correction ^b	.000	1	1.000		
Likelihood Ratio	.163	1	.687		
Fisher's Exact Test				1.000	.585
Linear-by-Linear Association	.156	1	.693		
N of Valid Cases ^b	54				

a. 2 cells (50.0%) have expected count less than 5. The minimum expected count is 1.33.

b. Computed only for a 2x2 table

18)

year * sulfonamide Crosstabulation

		sulfonamide		Total
year	2009	Count	23	1
		% within sulfonamide	57.5%	33.3%
resistant	Count	17	2	19
	% within sulfonamide	42.5%	66.7%	44.2%
Total		Count	40	3
		% within sulfonamide	100.0%	100.0%
			100.0%	100.0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	.661 ^a	1	.416		
Continuity Correction ^b	.044	1	.833		
Likelihood Ratio	.660	1	.416		
Fisher's Exact Test				.575	.411
Linear-by-Linear Association	.646	1	.422		
N of Valid Cases ^b	43				

a. 2 cells (50.0%) have expected count less than 5. The minimum expected count is 1.33.

b. Computed only for a 2x2 table

19)

year * nalidixicacid Crosstabulation

		nalidixicacid		Total
		sensitive	resistant	
year	2009	Count	28	1
		% within nalidixicacid	60.9%	14.3%
	2011	Count	18	6
		% within nalidixicacid	39.1%	85.7%
Total		Count	46	7
		% within nalidixicacid	100.0%	100.0%
				53

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	5.321 ^a	1	.021		
Continuity Correction ^b	3.607	1	.058		
Likelihood Ratio	5.681	1	.017		
Fisher's Exact Test				.038	.028
Linear-by-Linear Association	5.221	1	.022		
N of Valid Cases ^b	53				

a. 2 cells (50.0%) have expected count less than 5. The minimum expected count is 3.17.

b. Computed only for a 2x2 table

20)

year * nitrofurantoin Crosstabulation

		nitrofurantoin		Total
		sensitive	resistant	
year	2009	Count	26	10
		% within nitrofurantoin	47.3%	45.5%
	2011	Count	29	12
		% within nitrofurantoin	52.7%	54.5%
Total		Count	55	22
		% within nitrofurantoin	100.0%	100.0%

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	.021 ^a	1	.885		
Continuity Correction ^b	.000	1	1.000		
Likelihood Ratio	.021	1	.885		
Fisher's Exact Test				1.000	.544
Linear-by-Linear Association	.021	1	.886		
N of Valid Cases ^b	77				

a. 0 cells (.0%) have expected count less than 5. The minimum expected count is 10.29.

b. Computed only for a 2x2 table



B.Master Table Year 2009/2010

Antibiotics	Resistant	Sensitive
Amoxicilin + Clavunic acid		
Cefotaxime		
Ceftriaxone		
Cefuroxime		
Cephalothin		
Kanamicin		
Gentamicin	==	
Netilmicin		
Amikacin		
Ciprofloxacin		
Oflloxacin		
Norfloxacin		
Meropenam		
Tetracycline		
Doxycycline		
Chloramphrenicol		
Cotrimoxazole		
Sulfonamide		
Nalidixic Acid		
Nitrofurantoin		

C.Master Table Year 2010/2011

Antibiotics	Resistant	Sensitive
Amoxicilin + Clavunic acid		
Cefotaxime		
Ceftriaxone		
Cefuroxime		
Cephalothin		
Kanamicin		
Gentamicin	—	
Netilmicin		
Amikacin		
Ciprofloxacin		
Ofloxacin		
Norfloxacin		
Meropenam	—	
Tetracycline	—	
Doxycycline		
Chloramphrenicol		
Cotrimoxazole	—	
Sulfonamide		
Nalidixic Acid		
Nitrofurantoin		

STATEMENT OF ORIGINALITY

Hereby, I:

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would like verify that this thesis is done by me. It is my original work and not based on any form of plagiarism. In the future, if my thesis is proven as the work of others, I am willing to be punished as stated by the rules.

Malang, November 2012

Sincerely,

(Vinoth Kumar Raman)

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