

Chapter I

ONERBA's networks

ONERBA was established in 1997 with 11 networks of microbiologists involved in activities of surveillance of bacterial resistance to antimicrobials. In 2006, ONERBA was federating 14 networks listed and briefly described below.

(For more details on each network, please see the French part of the Chapter).

Networks of private practice laboratories

■ AFORCOPI-BIO

- Founded in 1986 - ONERBA's scientific board in 1997.
- 19 private practice laboratories in 8 French regions, performing microbiological analysis for ambulatory patients and private hospitals or health institutions (total of 1,420 beds).

Main topic

Urinary tract infections and bacterial resistance in the outpatients setting.

Method

Prospective studies, susceptibility testing in each centre with external quality control organised by the co-ordinating centre; MICs performed in one centre.

■ EPIVILLE

- This network is the result of the merging of two networks: the Aquitaine network (founded in 1998 – entered in ONERBA's scientific board in 2000) and the Epiville network (founded in 1990 – entered in ONERBA's scientific board in 1997). <http://epiville-france.e-monsite.com/>
- Main topic: community-acquired infections.

■ MEDQUAL

- Founded in 2004 – ONERBA's scientific board in 2008.
- 35 private practice laboratories in the Pays de la Loire region of France (west).

Main topics of interest

Susceptibility to antibiotics of *Escherichia coli* and *Staphylococcus aureus* isolated from clinical samples in the community.

Method

Monthly collection of the results of susceptibility tests by the MedQual database centre for validation and analysis.

Networks of hospital laboratories

■ AZAY-resistance network

Founded in 2001 - ONERBA's scientific board in 2003.

- 20 laboratories of teaching hospitals.
 - 22,000 acute-care beds, 4,200 rehabilitation or long-term care beds.
- Surveillance of bacteraemia all year long.

Data are sent to EARSS after aggregation with two other participating networks (Ile-de-France microbiologists and REUSSIR).

Quality control performed by NEQAS-EARSS.

■ Network of the Bacteriology-Virology-Hygiene college of Assistance Publique-Hôpitaux de Paris

Founded in 1993 - ONERBA's scientific board in 1997.

- 37 laboratories of teaching hospitals in Paris area.
- 21,000 beds, including 14,000 acute-care beds, 3,000 rehabilitation beds, and 3,500 long-term care beds.

Surveillance of multidrug-resistance bacteria: record of all MRSA and ESBL-producing bacteria isolated from clinical samples during a 2-month period every year. Susceptibility tests are performed in each centre.

■ COL-BVH: Bacteriology-Virology-Hygiene college of French hospitals

Founded in 1989 - ONERBA's scientific board in 1997.

- 108 health institutions.
- 19,500 acute-care beds, and 9,000 rehabilitation or long-term care beds.

Surveillance of bacteraemia one month a year since 2001 (15 days a year, prior to 2001). Susceptibility tests are performed in each centre and an external quality control is performed during the survey.

■ Network of the military hospitals

Founded in 1995 - ONERBA's scientific board in 1997.

- 9 laboratories of military hospitals.
- 2,600 acute-care beds (including 119 intensive-care beds).

Main topic

Bacterial resistance in nosocomial infections.

Method

Prospective multicenter surveys with susceptibility tests performed in each centre and an external quality control.

■ Network of the Ile-de-France microbiologists

Founded in 1986 - ONERBA's scientific board in 1997.

- 8 health institutions, including 7 general hospitals, and 1 private hospital.

- 3,709 acute-care beds, 970 beds of psychiatry, 489 rehabilitation beds, and 1,269 long-term care beds.

Accounting for a total of 27% of acute-care beds of general hospitals of the Ile-de-France region.

Surveillance of bacteraemia all year long since 2001.

Data are sent to EARSS after aggregation with two other participating networks (AZAY-resistance and REUSSIR).

Quality control performed by NEQAS-EARSS.

■ REUSSIR network

Founded in 1995 - ONERBA's scientific board in 1997.

Network of the system SIR users (I2A).

- 44 laboratories in 1999.

- 13 laboratories from 2000 to 2002.

- 27 laboratories in 2003-2005, 26 in 2006 and 29 laboratories in 2007.

Use of the SIR system for epidemiology (I2A society).

All clinical strains from all origins (except those from active surveillance cultures and environmental strains), all year long. Duplicates are eliminated by the coordinating centre.

Surveillance of bacteraemia all year long.

Data are sent to EARSS after aggregation with two other participating networks (AZAY-resistance and Ile-de-France networks).

Quality control performed by NEQAS-EARSS.

Networks of the Coordination Centres for prevention of nosocomial infection (C-CLIN)

■ Microbiological network of the C-CLIN Est (East)

Founded in 1993 - ONERBA's scientific board in 1997.

100 laboratories for 120 health institutions.

- 20 000 acute-care beds, 20 000 rehabilitation or long-term care beds.

■ Microbiological network of the C-CLIN Paris-Nord (Paris and North)

Founded in 1994 - ONERBA's scientific board in 1997.

117 laboratories for 131 health institutions.

- 3 teaching hospitals, 65 general hospitals, 24 private hospitals with public activities, 2 military hospitals, 2 cancer hospitals, 21 private hospitals.

- 32,908 acute-care beds (including 1,584 intensive-care beds), 7,501 rehabilitation beds, 8,802 long-term care beds, and 5,426 bed of psychiatry.

■ Microbiological network of the C-CLIN Sud-Ouest (South-West)

Founded in 1993-ONERBA's Scientific Board in 1997.

105 laboratories for 102 health institutions.

All institutions are conducting two types of surveillance

- Annual surveillance of multidrug resistant bacteria during a 3-month period.

- Annual surveillance of bacteraemia during a 3-month period.

■ Hygiene Network of the Centre of France

Founded in 1997 - ONERBA's scientific board in 2002.

- 63 health institutions (45 biologists).

Main topic

Bacterial resistance in hospital- and community-acquired infections, and more specifically bacteraemia.

Method

A 3-month survey every year since 2000 where all MRSA strains and all ESBL-producing strains are sent to a reference laboratory for susceptibility testing and molecular analysis. The co-ordinating centre organises an external quality control.

Networks of veterinary laboratories

■ RESAPATH

Founded in 2002, formerly as RESABO in 1982 (for cattle surveillance) and RESAPATH in 1999 (for poultry and swine surveillance). ONERBA's scientific board in 1997 for RESABO, and 2002 for RESAPATH.

- 51 laboratories of private or public practice performing analysis of samples, mainly from food-producing animals (cattle, poultry and swine).

Surveillance of a representative sample (12 643 strains in 2007, all bacteria from cattle, poultry, and swine included).

National Reference Centres

- Pneumococci.

- Mycobacteria and resistance of mycobacteria to antimicrobials.