

# Antimicrobial Resistance (AMR) Surveillance on Culture Specimens in Public Hospitals and Clinics - Hospital Authority AMR Data (2024)

December 2025



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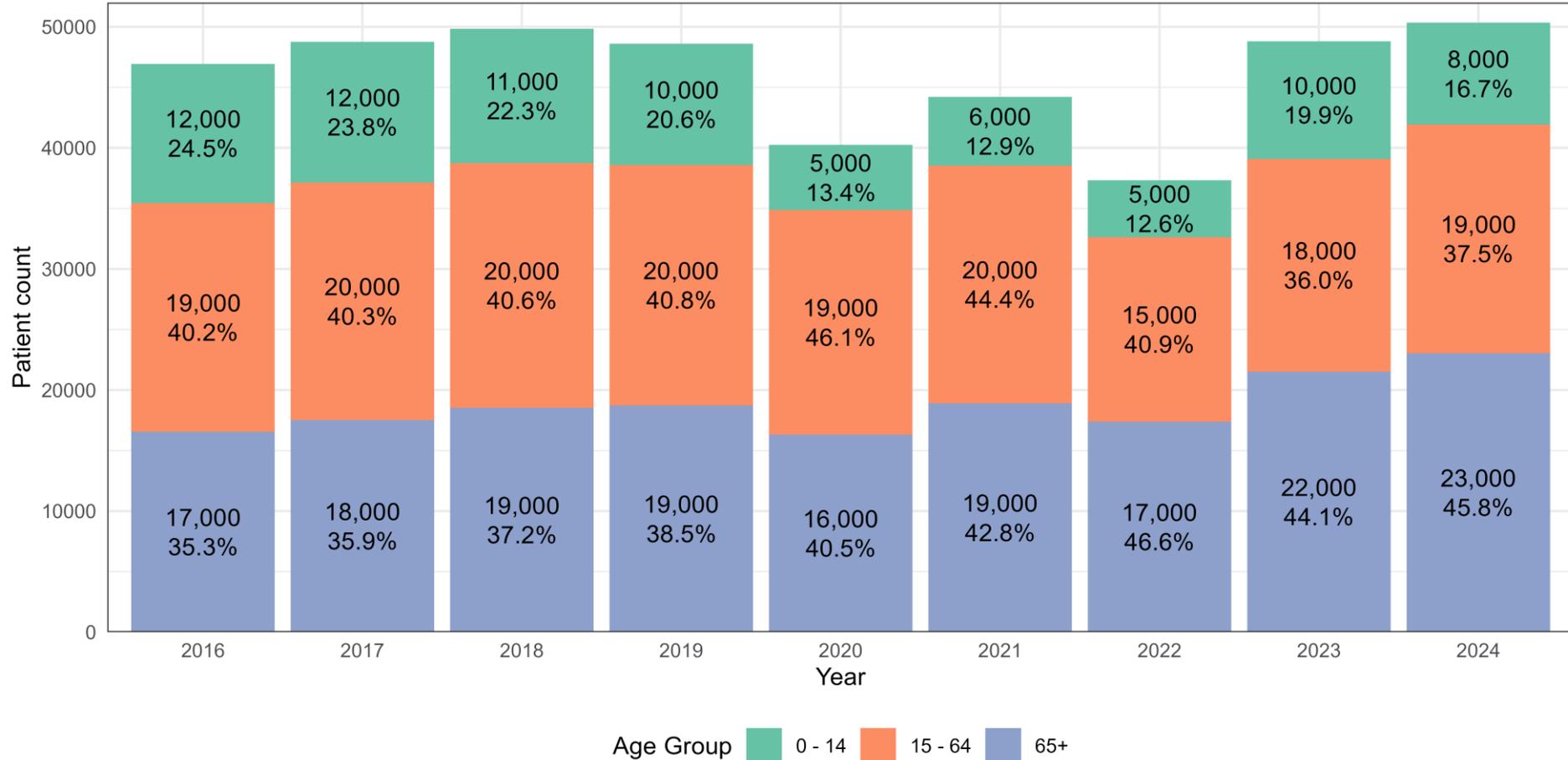


# Results - Stool Culture

Overview on patients with stool culture

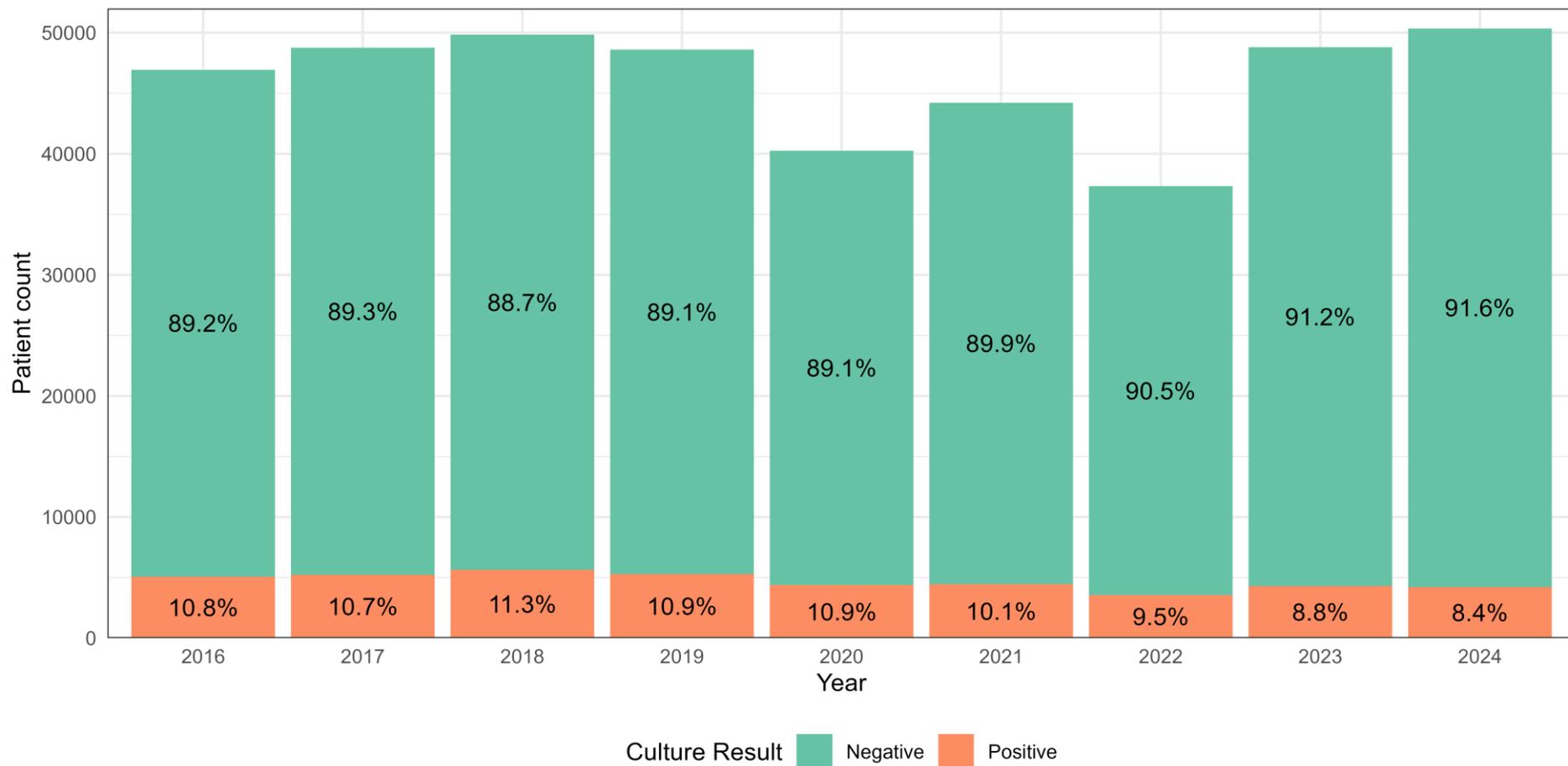


# Age distribution of patients with stool culture



- No. of patients with stool culture increased from 49000 in 2023 to 50000 in 2024 (2.0% increase).

# Percentage of patients with positive stool culture



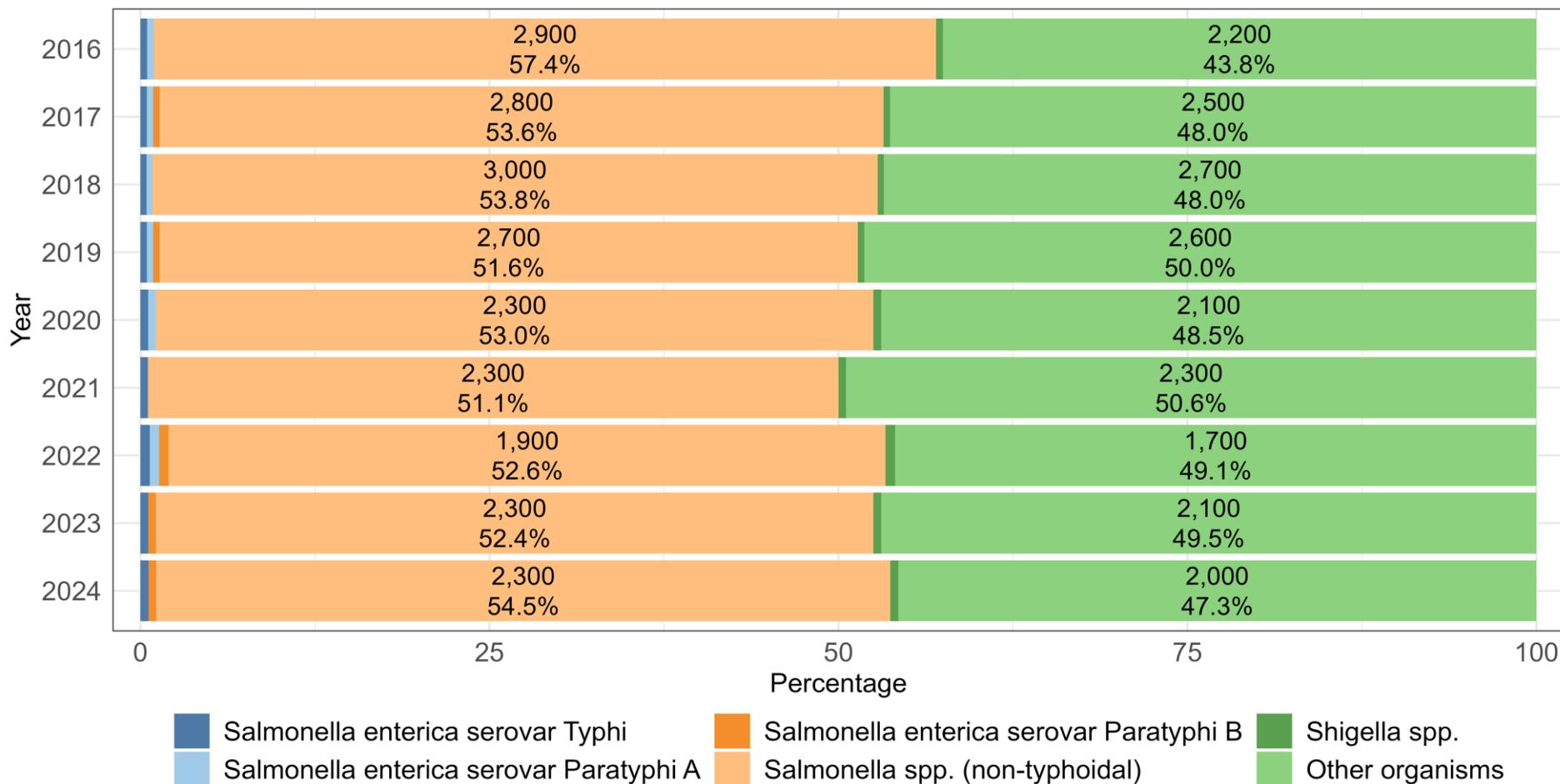
- % patients with positive stool culture remained stable over the past years at around 10%.

# Results - Stool Culture

Overview on WHO priority organisms isolated from stool

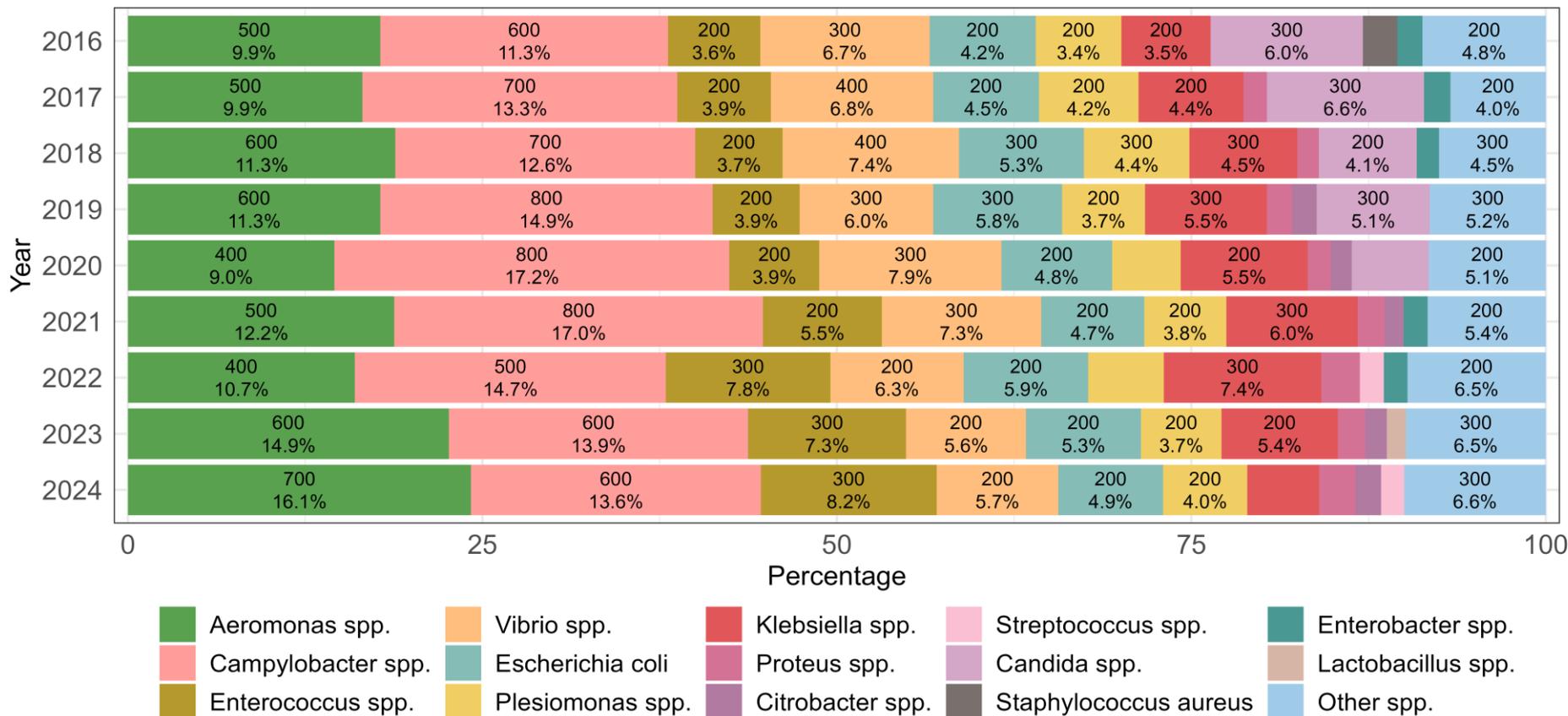


# Distribution of organisms by year



- The most common WHO priority organisms cultured from stool remained to be Salmonella spp. (non-typhoidal) from 2016 to 2024.

# Distribution of other organisms by year

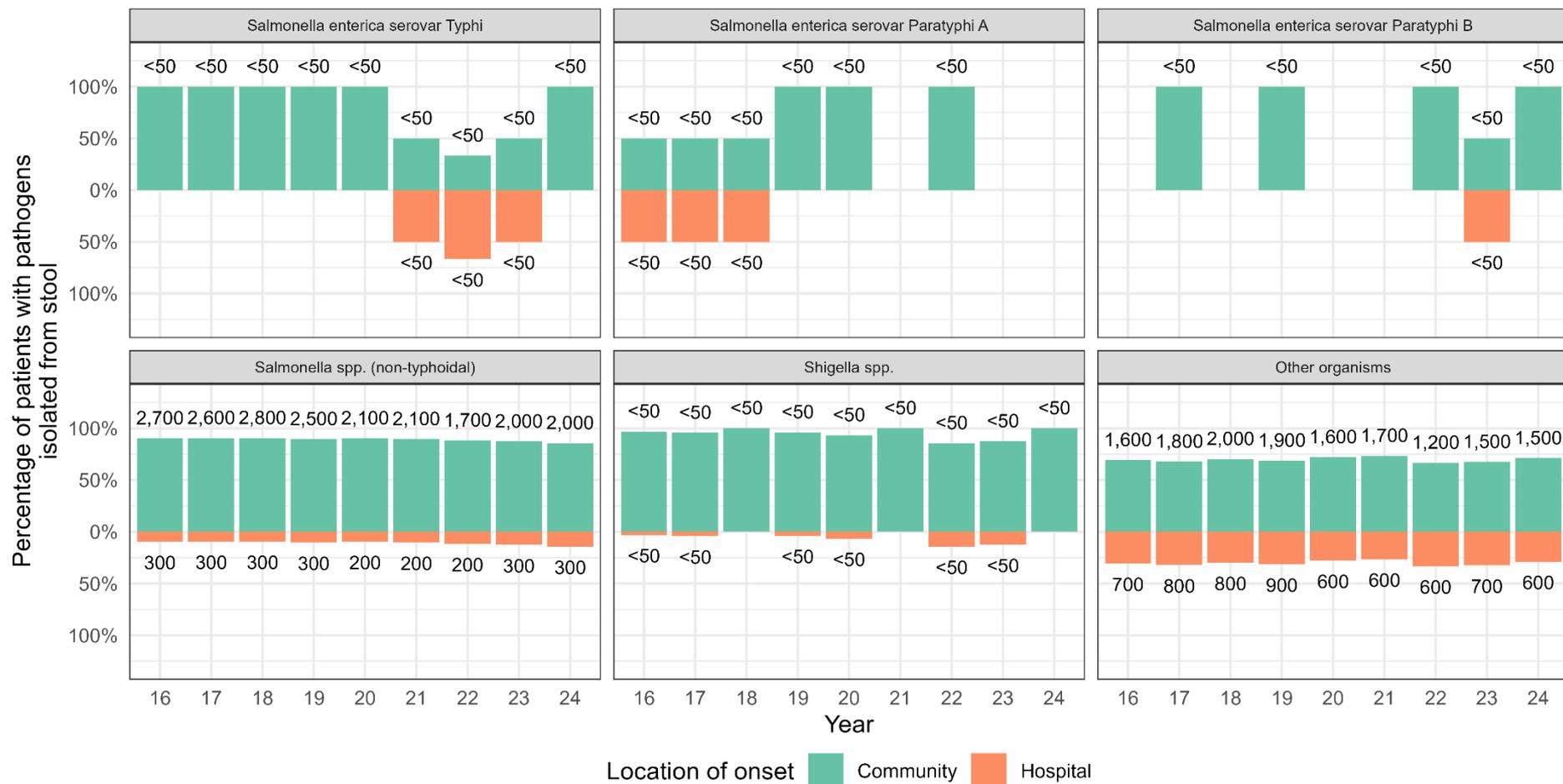


Note:  
Each patient may have more than one kind of microorganism isolated from stool within the same surveillance year.

- Among the 50% of organisms isolated from stool being Other spp. each year, the most commonly seen organisms were Aeromonas spp., Campylobacter spp. and Enterococcus spp.



# Distribution of organisms by location of onset



- Pathogens isolated from stool were predominantly community-onset from 2016 to 2024.



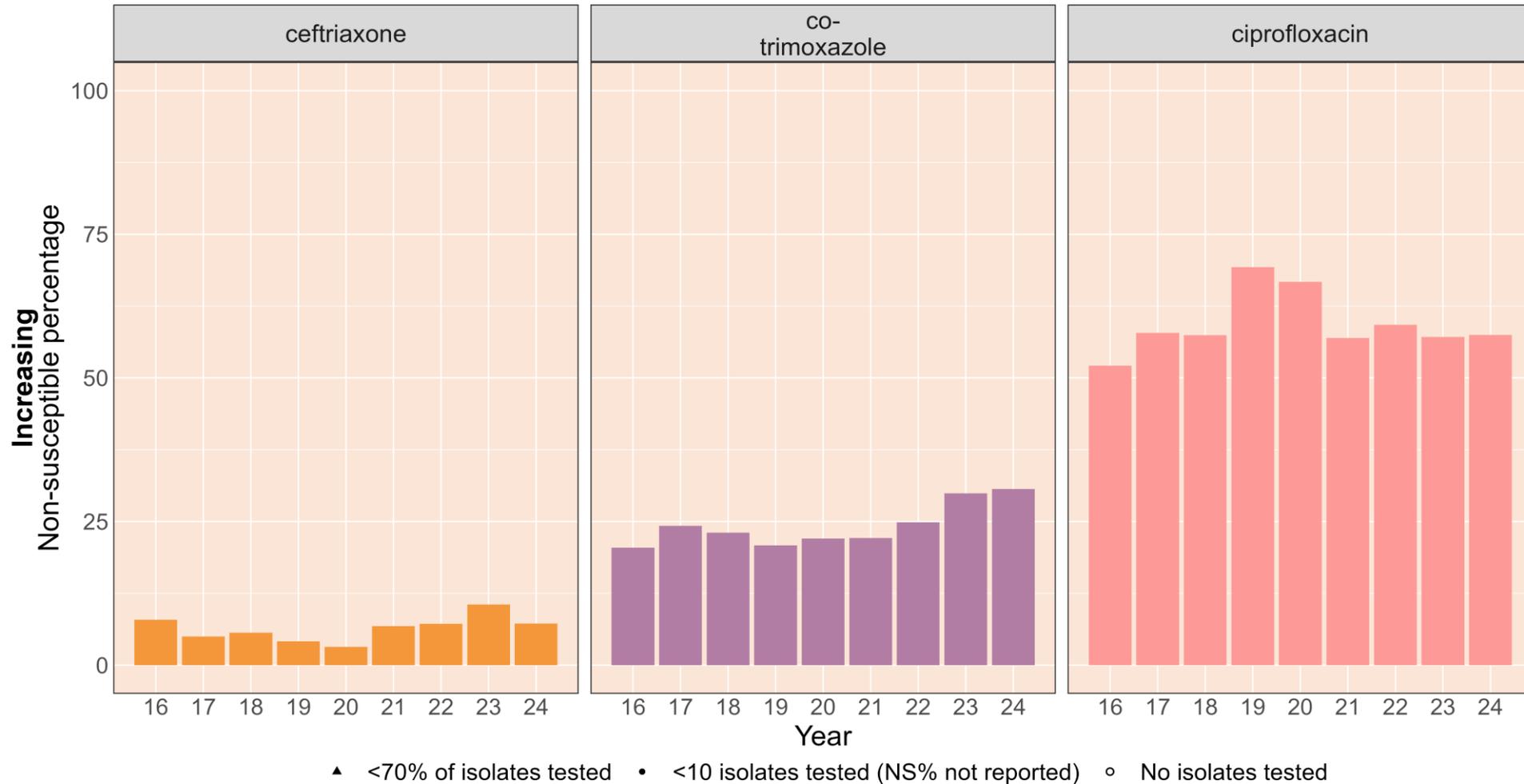
# Results - Stool Culture

AST results for WHO priority organisms isolated from stool



# AST results with significant trend for Non-typhoidal Salmonella (16 to 24)

Community (Undifferentiated-onset)

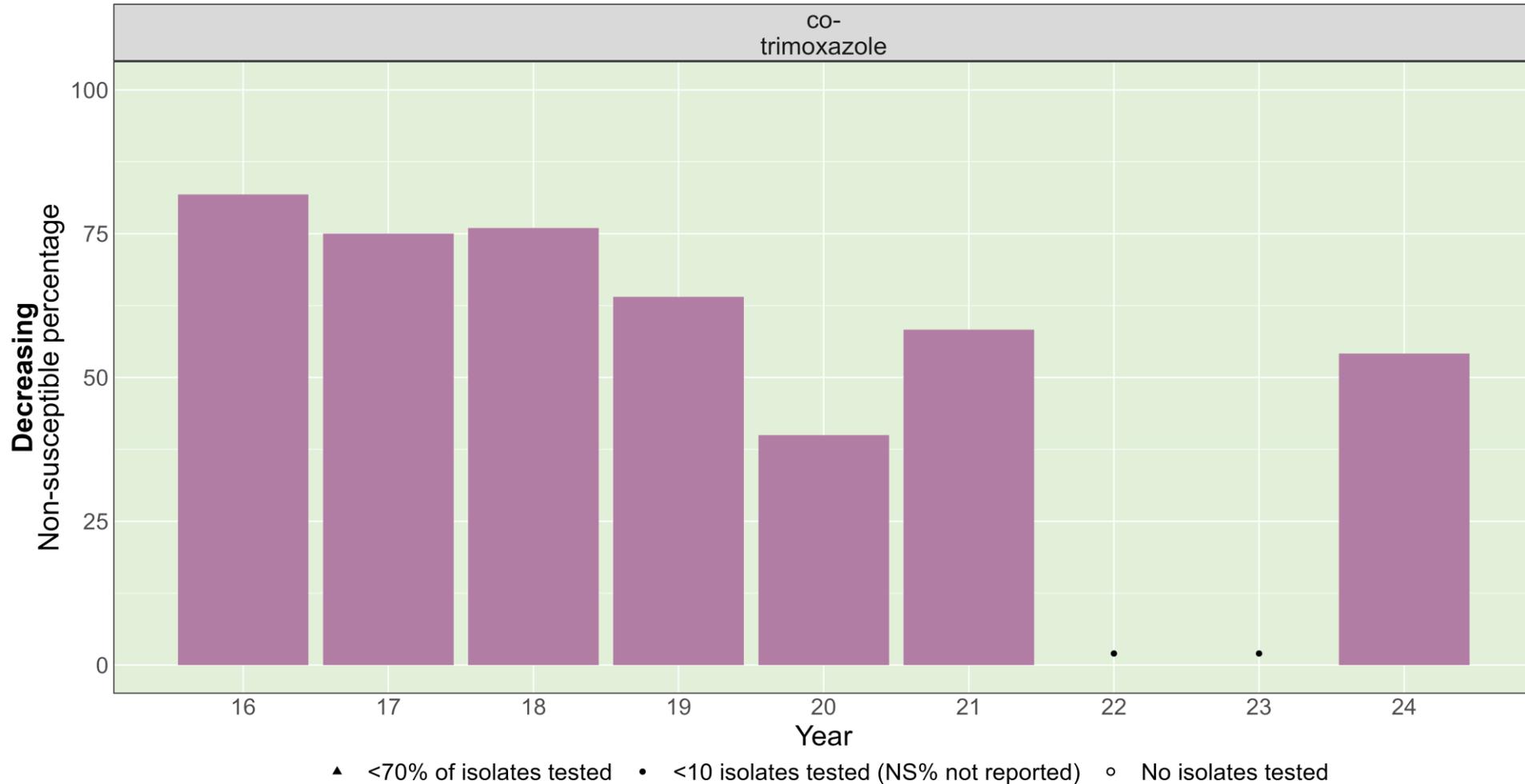


- Ceftriaxone, ciprofloxacin, and co-trimoxazole show a significant increasing trend in non-susceptible percentage from 2016-2024.

# AST results with significant trend for Shigella spp. (16 to 24)

Community (Undifferentiated-onset)

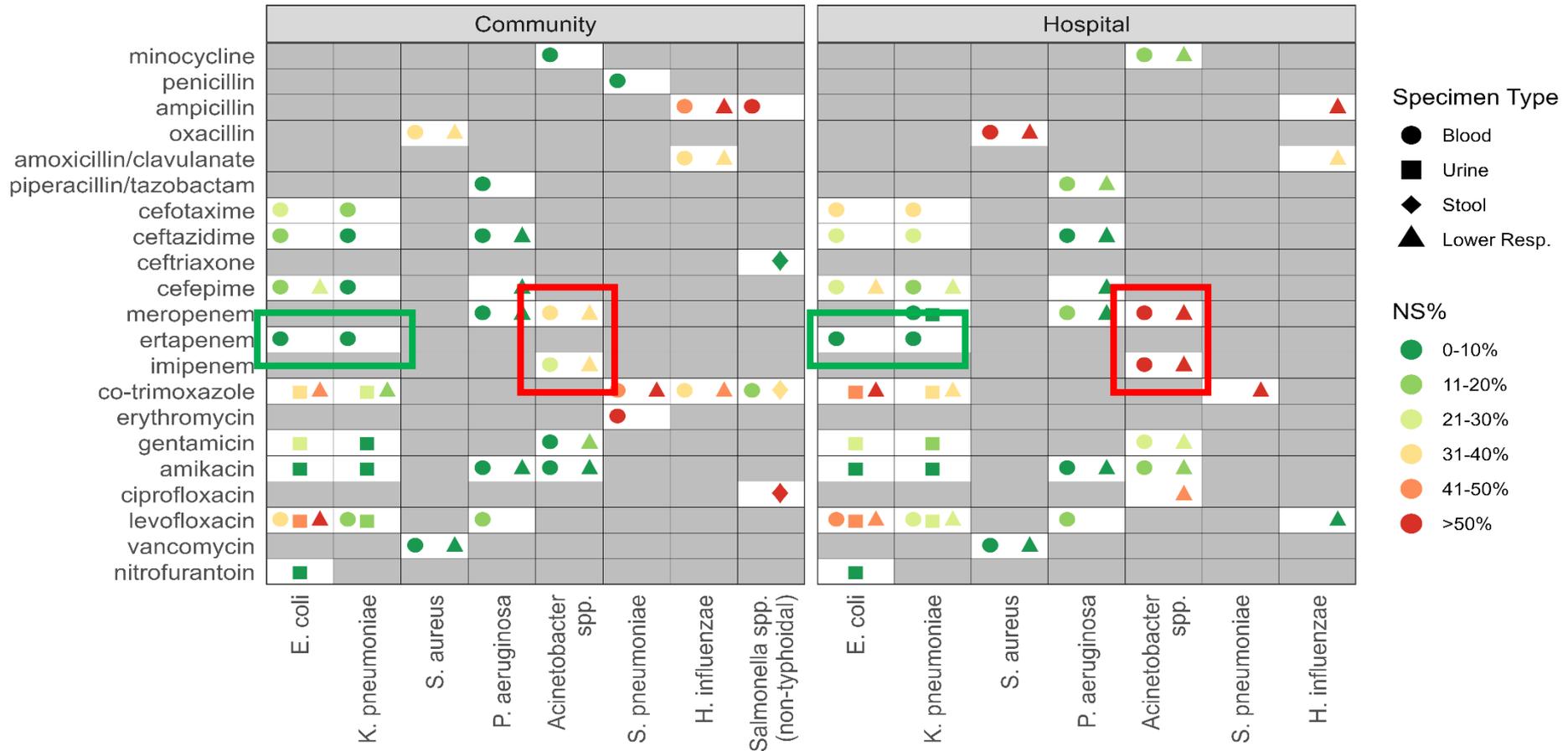
CO-  
trimoxazole



- Co-trimoxazole shows a significant decreasing trend in non-susceptible percentage from 2016-2024.



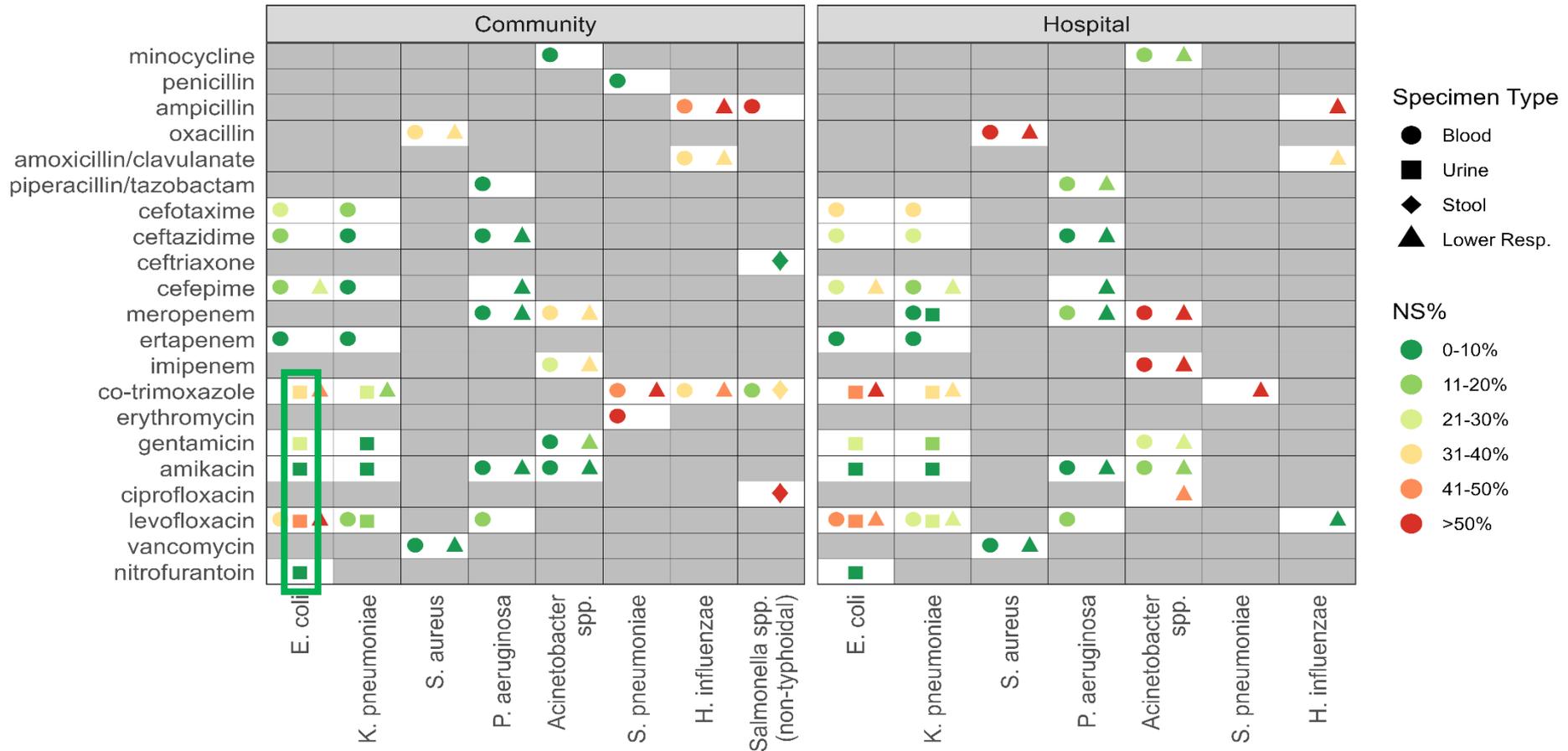
# Summary



Note: Only drug-bug combinations with more than 10 isolates and at least 70% of isolates tested for susceptibility in 2024 are shown.

- Enterobacterales (*E. coli*, *K. pneumoniae*) remain sensitive to carbapenems (ertapenem/meropenem; 0-10% NS), *Acinetobacter* spp. exhibit high carbapenem resistance (>50% NS to imipenem/meropenem in hospital blood/respiratory isolates).

# Summary



Note: Only drug-bug combinations with more than 10 isolates and at least 70% of isolates tested for susceptibility in 2024 are shown.

- Urinary E. coli: High Levofloxacin NS (41-50% Community & Hospital) and Co-trimoxazole NS (31-40% Comm, 41-50% Hosp) contrast with preserved Nitrofurantoin/Amikacin susceptibility (0-10% NS).