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Treatment of methicillin-resistant *Staphylococcus aureus* infections. Importance of high vancomycin minimum inhibitory concentrations

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Abstract

Staphylococcus aureus (SA) infections remain a major cause of morbidity and mortality despite the availability of numerous effective anti-staphylococcal antibiotics. This organism is responsible for both nosocomial and community-acquired infections ranging from relatively minor skin and soft tissue infections to life-threatening systemic infections. The increasing incidence of methicillin-resistant strains has granted an increasing use of vancomycin causing a covert progressive increase of its minimum inhibitory concentration (MIC) (dubbed the MIC "creep"). In this way, the emergence of vancomycin-intermediate *S. aureus* (VISA) strains and heteroresistant-VISA has raised concern for the scarcity of alternative treatment options. Equally alarming, though fortunately less frequent, is the emergence of vancomycin-resistant SA (VRSA). These strains show different mechanisms of resistance but have similar problems in terms of therapeutic approach. Ultimately, various debate issues have arisen regarding the emergence of *S. aureus* strains with a minimum inhibitory concentration sitting on the superior limit of the sensitivity range (i.e. MIC = 2

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