Flavimonas oryzihabitans (Pseudomonas oryzihabitans; CDC Group Ve-2): an Emerging Pathogen in Peritonitis Related to Continuous Ambulatory Peritoneal Dialysis?

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A case of peritonitis caused by Flavimonas oryzihabitans (Pseudomonas oryzihabitans; CDC group Ve-2) in a patient on continuous ambulatory peritoneal dialysis is reported. This is the seventh case of infection caused by this organism reported in the English literature and the third reported case of continuous ambulatory peritoneal dialysis-related peritonitis caused by this organism; it is the first case of infection of any kind caused by this organism in England.

Flavimonas oryzihabitans is the newly proposed genus and combination for an unusual, and rarely pathogenic, gram-negative rod, known previously as Pseudomonas oryzihabitans (and before that as CDC group Ve-2). Only six cases of infection caused by this organism have been reported, most occurring in the United States. Two have been cases of peritonitis in patients on continuous ambulatory peritoneal dialysis (CAPD; 1, 12), and four have been cases of septicemia (2, 4, 9, 10). We wish to document a third case of peritonitis caused by this organism in a patient on CAPD, and the first reported case of infection of any kind caused by this organism in England.

A 66-year-old man on CAPD for end-stage renal failure caused by obstructive uropathy presented in December 1987 with increased cloudiness of his dialysis fluid and reduced ultrafiltration on his overnight bag (he had had only one previous episode of peritonitis, caused by Staphylococcus epidermidis, soon after starting CAPD in May 1986, which was treated with intraperitoneal cefuroxime). Gram stain of a centrifuged 20-ml sample of dialysate showed numerous pus cells but no organisms. Culture of the fluid on blood and MacConkey agar and in BACTEC blood culture bottles (Becton Dickinson UK, Cowley, Oxford, England) all revealed a pure growth of a yellow-pigmented, nonlactose-fermenting, oxidase-negative, gram-negative rod (aerobic culture only). This was tested in the API 20NE system (API Laboratory Products, Basingstoke, England), and our results yielded the profile number 0047651, which is listed in the API 20NE Analytical Profile Index (2nd ed., August 1984) with the comment: "excellent identification to CDC Group Ve-2." Subsequently, the isolate was sent to the National Collection of Type Cultures, Central Public Health Laboratory, Colindale, London, England. There it was examined (as culture number CL12/86) in 40 conventional tests, and when the results of these were processed through the appropriate probability matrix (5), the strain was identified to group Ve-2 with the maximum possible identification score. The isolate was susceptible by disk diffusion testing to ampicillin, erythromycin, tetracycline, gentamicin, neomy-

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proposed, but with a name reflecting the close phenotypic similarity of Ve-2 organisms to the pseudomonads. The resistance of this organism to cefuroxime and cephradine, but not to cefotaxime, holds true in our isolate. Prior use of cephalosporins is likely to select for colonization with *F. oryzihabitans*. As in the other two recorded cases of peritonitis caused by this organism (1, 12), our patient had had a previous course of a cephalosporin, though the original source of the organism remains obscure. Our patient had never been in the vicinity of rice paddies. The isolation and identification of *F. oryzihabitans* in a routine laboratory should not be difficult. It will be interesting if further cases are reported in CAPD patients.

**LITERATURE CITED**


