

## Freedom of Information request 152-17

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### Request

I am writing to you under the Freedom of Information Act 2000 to request the following information from NHS Borders Health Board, and/or/including information from Clinical Testing Laboratories and Sample Collection Vehicle Conditions. I ask for information regarding for testing for the following bacterium species affecting Humans – Actinomyces israelii and Actinomyces gerencseria and other Actinomyces Genus which are antibiotic resistant. Also can the following be tested for -Propionibacterium propionicus which can often mimic Actinomycetis infections. The Actinomyces Bacterium degrade extremely quickly upon exposure to oxygen thus rendering testing impossible.

“Cultures should be placed immediately under anaerobic conditions and incubated for 48 hours or longer; the isolation and definitive identification of actinomycetes may require 2-3 weeks” – From <http://emedicine.medscape.com/article/211587-workup> To this regard

### Response

Actinomyces spp. are a mixture of facultative anaerobes and strict anaerobe species - the commonest causes of infection being A. israelii which are facultative anaerobic. They are not “extremely sensitive” to oxygen but require specialized atmospheric requirements to be cultured.

No organisms grow in a vacuum.

Actinomyces are not considered to be a problem with antimicrobial resistance and data is not routinely collected on “resistant species”

Actinomyces are not considered to be a sexually transmitted organism.

All Microbiology Laboratories in Scotland are currently UKAS accredited, or awaiting accreditation, this means they work to standard protocols which are the current best working practice for the tests and organisms under examination, The processes are based upon Public Health England’s Standard Microbiological Investigation protocols which are endorsed by NICE.

Electron Microscopy is not a process used in routine microbiological investigations or for identification of Actinomyces.

#### Question 1

*Do the NHS vans that transport samples have a vacuum chamber contained within for such delicate samples?*

Not within NHS Borders. As with all clinical samples transport is as rapid as reasonably practicable. Different transport arrangements exist within NHS Boards dependent on geography and logistics

#### Question 2

*What conditions are the samples held in once arriving at the Clinical Testing Laboratory*

Samples are generally processed upon arrival within any Laboratory and cultures placed under appropriate incubation conditions. These conditions are dictated by the clinical details and suspicions of the investigating clinician who sends the samples – specific request or indications for prolonged incubation for Actinomyces must be provided.

Question 3

*Does the Clinical Testing Laboratories have a vacuum chamber for such delicate samples.*

No, cultures are incubated in an anaerobic atmosphere not a vacuum.

Question 4

*Does the Clinical Testing Laboratories use an electron microscope to identify pathogens.*

No, this is NOT a routine technique or used for identification of Actinomyces

Question 5

*The woman who I believe I passed Actinomycosis to (via sexual intercourse or via oral sex) only had Actinomycosis identified by use of an electron Microscope at Infectious Diseases and Communicable Laboratories in Edinburgh.*

NHS Borders can't comment on practices at other Clinics or Health Boards but we do know that the Infectious Disease Unit does not have an individual Laboratory on site – work is performed in the Microbiology Laboratories at Edinburgh Royal Infirmary, they do not routinely use electron microscopy for Microbiological diagnosis.

Question 6

*Are suspected cases of Actinomycoses infections, Maxiofacial, Thoracic, Pelvic and Gastroenteral routinely sent to Infectious and Communicable Diseases Laboratories in your area?*

Clinicians refer or discuss cases with Infectious diseases on a case to case basis depending upon clinical presentation and symptoms.

Question 7

*To my knowledge Culture Testing for Actinomycois infections require up to three weeks. Please explain why NHS Laboratories only test cultures for one week in total? Quote from my own test result 24/02/17 - "Culture – No Growth. Culture will be incubated for 7 days in total. No further report will be issued unless culture becomes positive"*

As previously stated Laboratories follow standard procedures, generally prolonged incubation is for 7 days, if there is sufficient suspicion or clinical indication then cultures will be incubated longer. Actinomyces infections are rare – routine prolonged incubations are therefore not appropriate in all samples.

Question 8

*In the UK Actinomycosis with antibiotic resistance incidence is quoted on NHS website as 1:300000. In Holland and Germany the incidence is quoted as 1:100000. In Pelvic Actinomycosis in the UK (female infections) the IUD is blamed as causation in 10% of cases yet in the USA it is (One Tenth of One Percent). Please provide the figures of cases of Actinomycosis with antibiotic resistance identified in both men and women in NHS Borders from 2000 to 2016*

NHS Borders have had no cases of diagnosed antimicrobial resistant Actinomyces.

If you are not satisfied with the way your request has been handled or the decision given, you may ask NHS Borders to review its actions and the decision. If you would like to request a review please apply in writing to, Freedom of Information Review, NHS Borders, Room 2EC3, Education Centre, Borders General Hospital, Melrose, TD6 9BS or [foi.enquiries@borders.scot.nhs.uk](mailto:foi.enquiries@borders.scot.nhs.uk).

The request for a review should include your name and address for correspondence, the request for information to which the request relates and the issue which you wish to be reviewed. Please state the reference number **152-17** on this request. Your request should be made within 40 working days from receipt of this letter.

If following this review, you remain dissatisfied with the outcome, you may appeal to the Scottish Information Commissioner and request an investigation of your complaint. Your request to the Scottish Information Commissioner should be in writing (or other permanent form), stating your name and an address for correspondence. You should provide the details of the request and your reasons for dissatisfaction with both the original response by NHS Borders and your reasons for dissatisfaction with the outcome of the internal review. Your application for an investigation by the Scottish Information Commissioner must be made within six months of your receipt of the response with which you are dissatisfied. The address for the Office of the

Scottish Information Commissioner is, Office of the Scottish Information Commissioner, Kinburn Castle,  
Doubledykes Road, St Andrews, Fife.