

Supplementary Files

Table S1: Breakpoints for Carbapenem according to CLSI.

	Enterobacterales Susceptible	Pseudomonas Susceptible	Acinetobacter Susceptible
Doripenem	</= 1 mcg/ml	</= 2 mcg/ml	</= 1 mcg/ml
Ertapenem	</= 0.5 mcg/ml	-	-
Imipenem	</= 1mcg/ml	</= 2 mcg/ml	</= 2 mcg/ml
Meropenem	</= 1 mcg/ml	</= 2 mcg/ml	</= 2 mcg/ml

Table S2: Resistance pattern of different CR-UTI-causing urinary pathogens to various antibiotics.

Antibiotics	Escherichia coli	Klebsiella	Pseudomonas	Enterobacter	Acinetobacter	Citrobacter	Providencia	Morganella	Proteus
Amikacin	58	76	90	50	78	45	50	70	60
Gentamicin	60	80	96	55	84	55	55	70	65
Cefepime	84	96	98	70	98	70	70	75	70
Cefoperazone sulbactam	88	98	-	76	99	70	76	80	76
Ciprofloxacin	73	95	80	70	96	75	75	75	70
Norfloxacin	90	99	-	88	-	80	80	-	90
Nitrofurantoin	60	84	-	50	-	70	55	75	70
Cotrimoxazole	64	95	-	55	-	70	65	70	70
Colistin	65	77	76	40	78	60	55	60	60
Tigecycline	58	69	-	30	76	45	52	60	55
Piperacillin Tazobactam	89	98	98	70	98	70	76	78	70
Minocycline	-	-	70	-	68	-	-	-	-
Ertapenem	90	96	-	60	-	65	60	75	65
Meropenem	85	98	90	70	96	75	70	80	70
Imipenem	80	90	96	55	98	60	-	-	-

Table S3: Survival, Relapse and Reinfection rates among patients with CR-UTI and CS-UTI

	CR-UTI (n=3106)	CS-UTI (n=4184)
Survival	2724 (87.70%)	3819 (91.27%)
Relapse	378 (12.16%)	356 (8.5%)
Reinfection	616 (19.83%)	573 (13.7%)

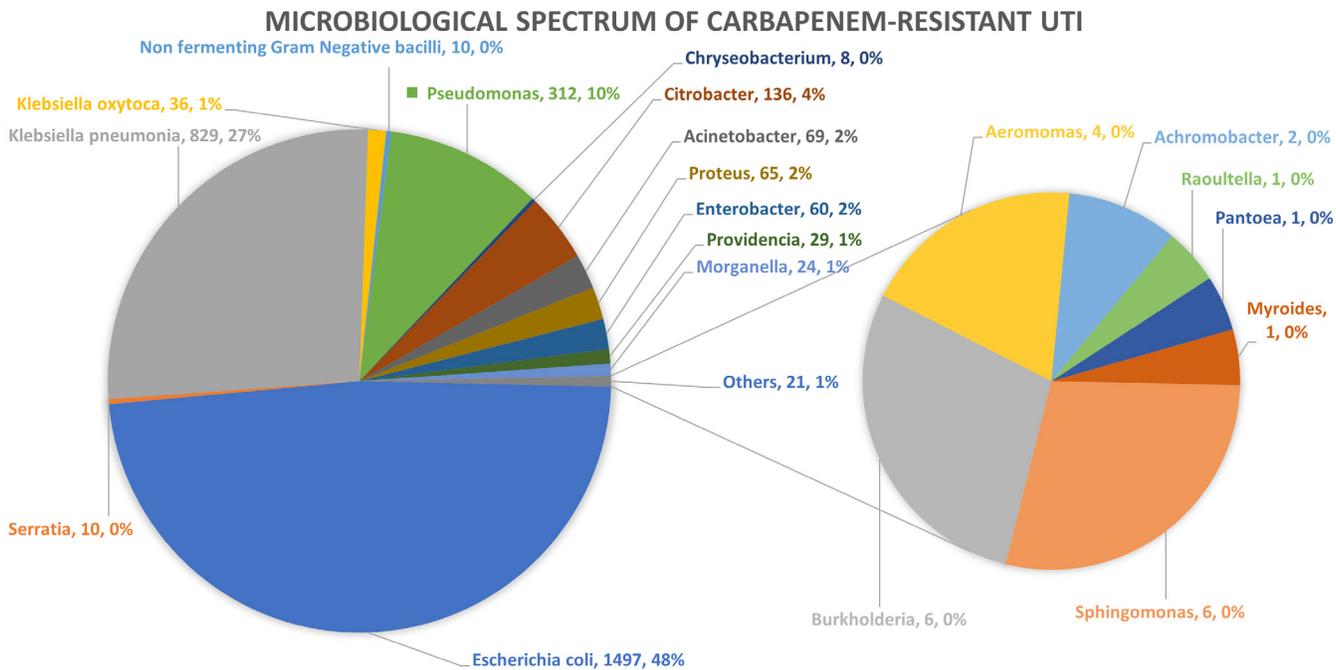


Figure S1: Pie chart showing the microbiological spectrum of urinary pathogens causing Carbapenem-resistant urinary tract infection (UTI).

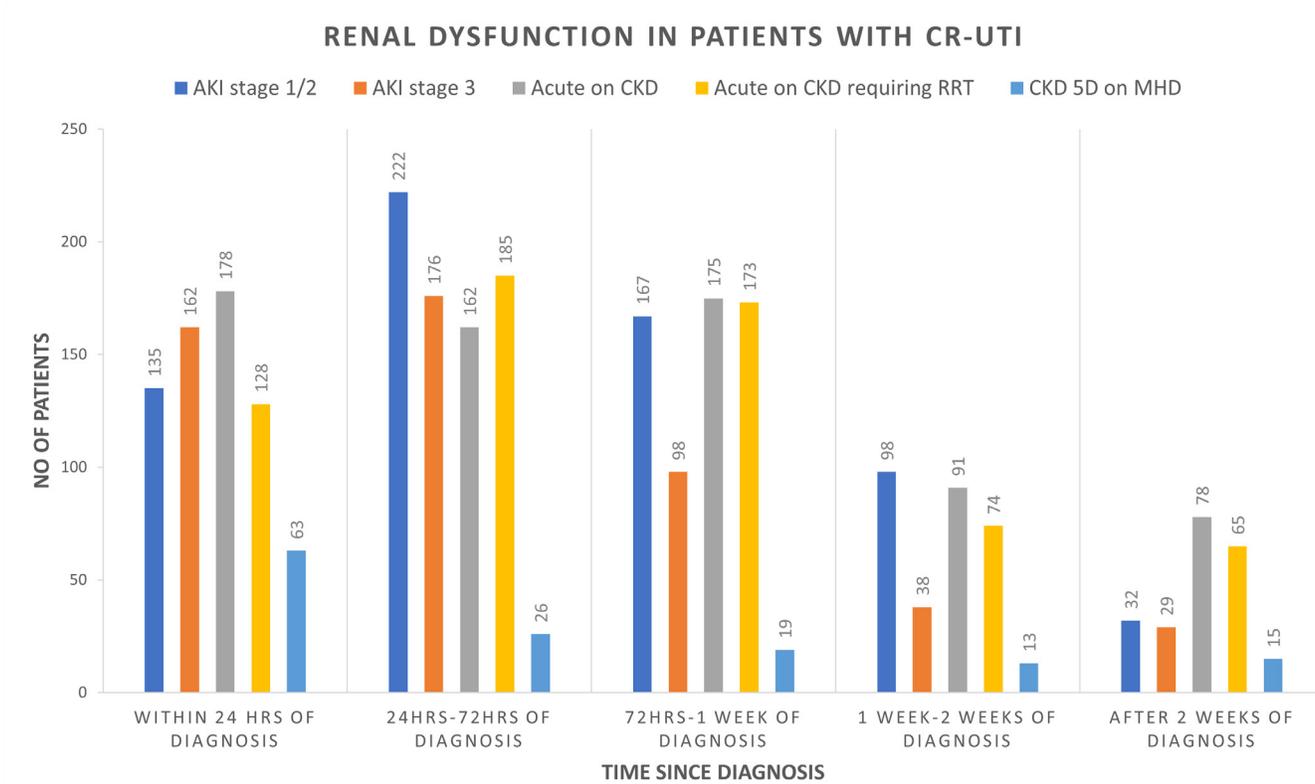


Figure S2: Patients with renal dysfunction according to the time of diagnosis of Carbapenem Resistant Urinary Tract Infection (CR-UTI). AKI - acute kidney injury, CKD - chronic kidney disease, RRT - renal replacement therapy, MHD - maintenance hemodialysis

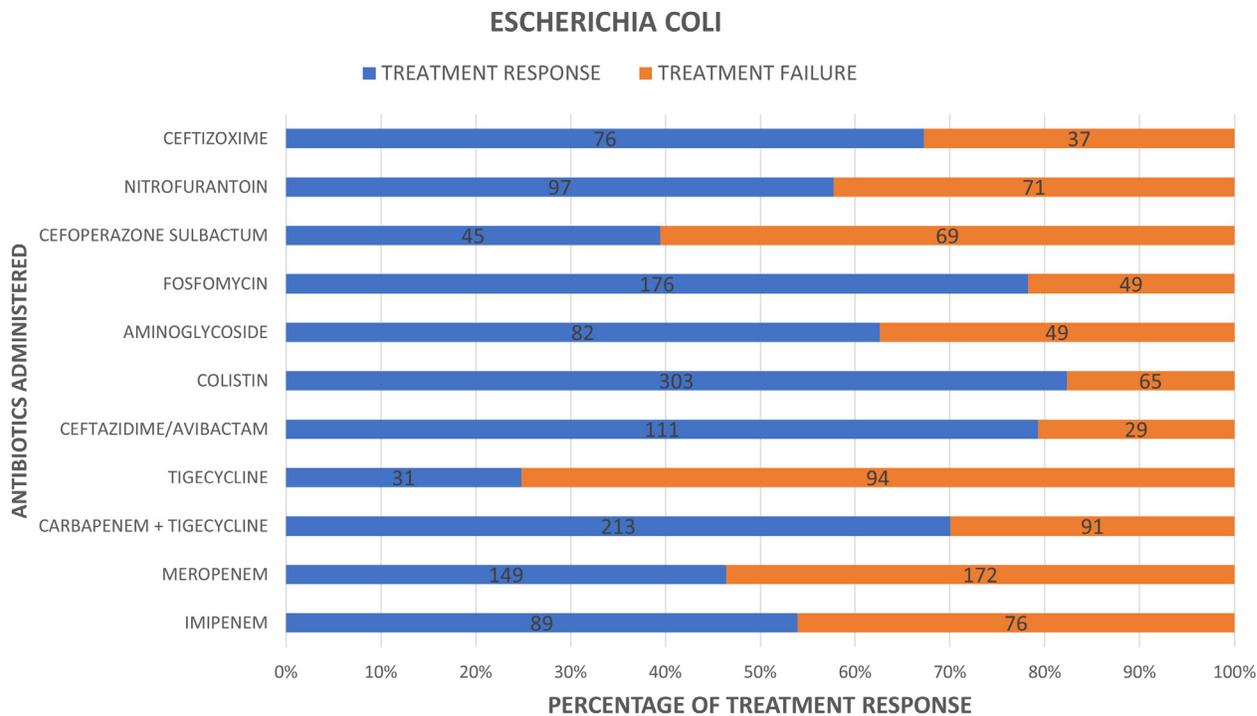


Figure S3: Antibiotic treatment response for Escherichia coli causing CR-UTI.

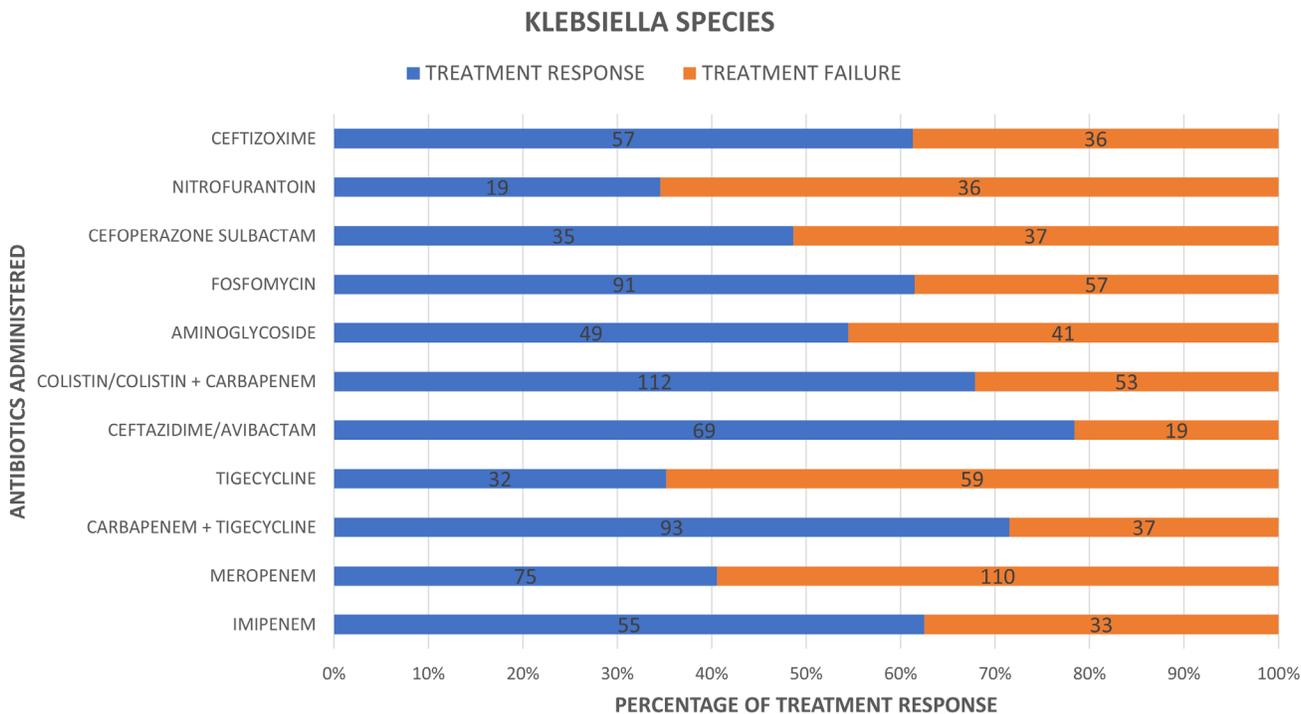


Figure S4: Antibiotic treatment response for Klebsiella species causing CR-UTI.

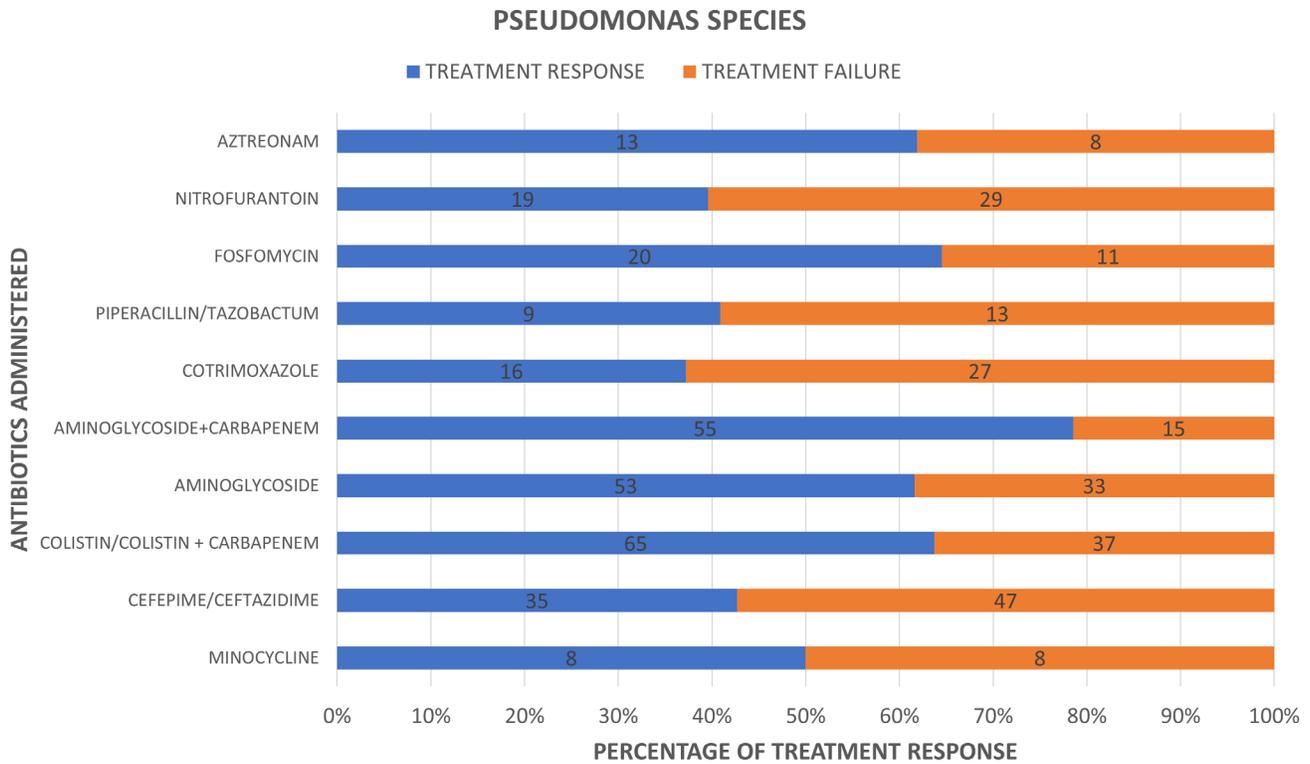


Figure S5: Antibiotic treatment response for Pseudomonas species causing CR-UTI.

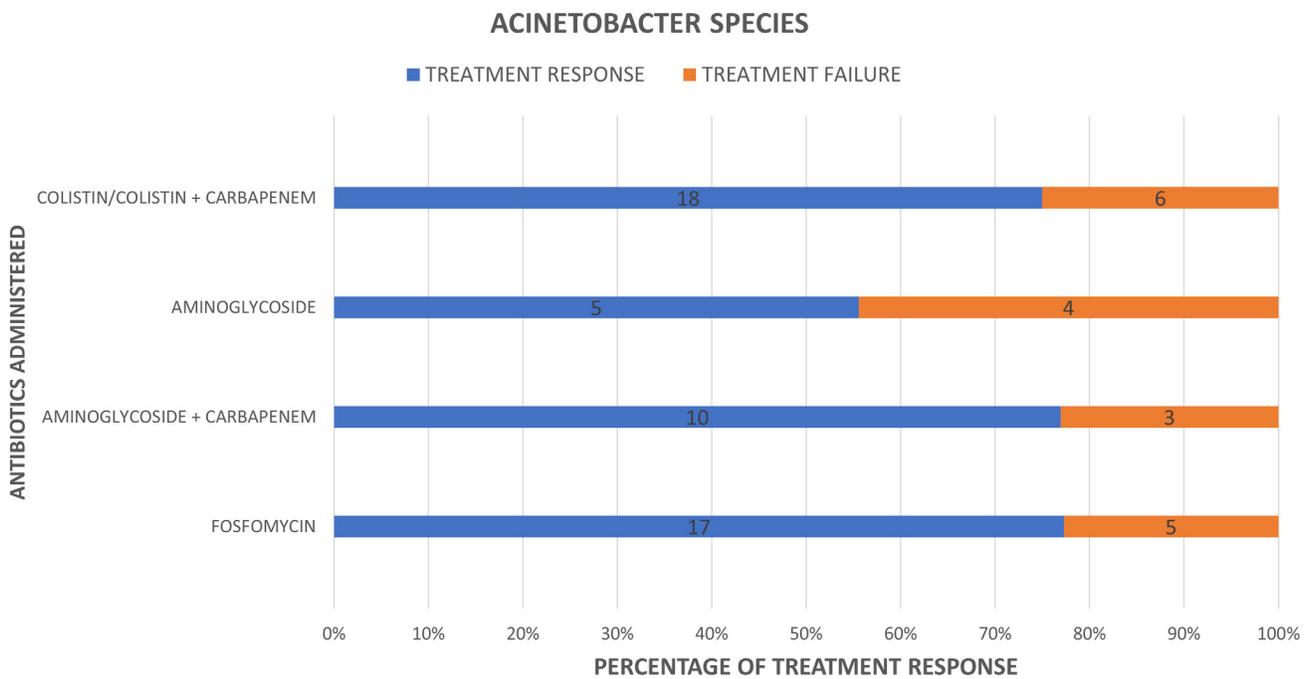


Figure S6: Antibiotic treatment response for Acinetobacter species causing CR-UTI.

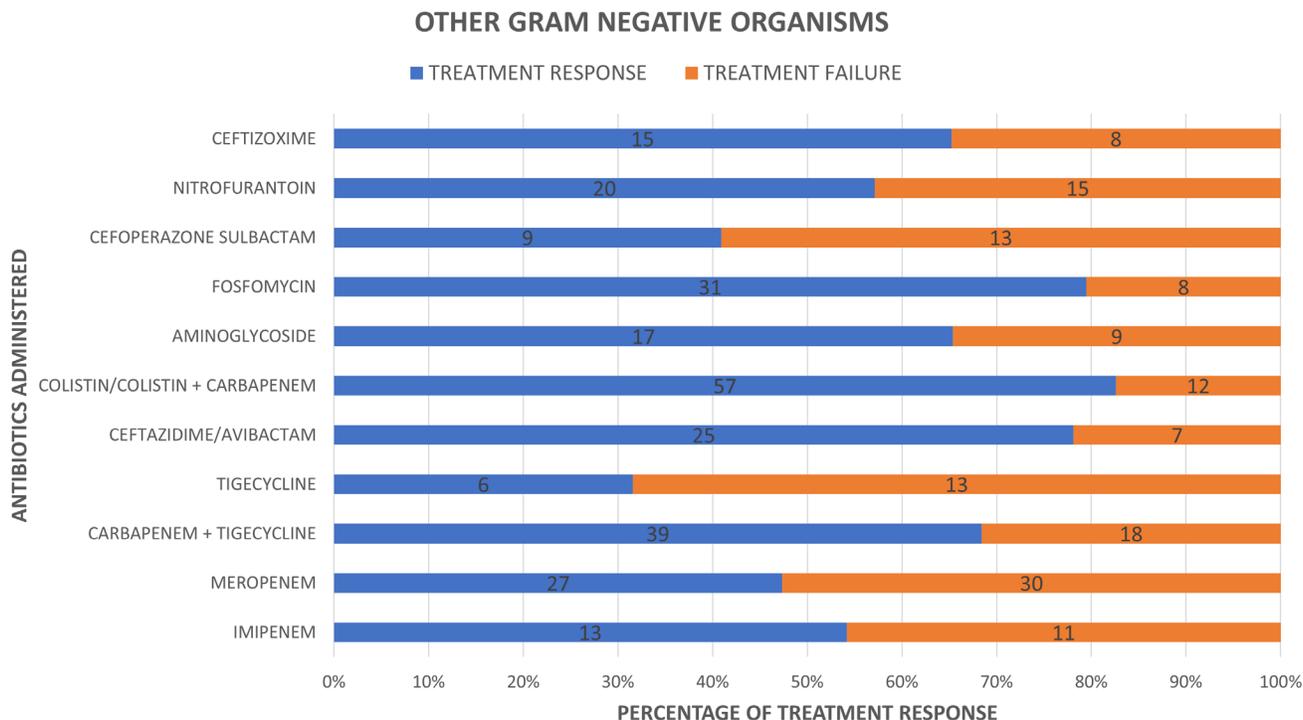


Figure S7: Antibiotic treatment response for other Gram-negative Enterobacteriaceae organisms causing CR-UTI.

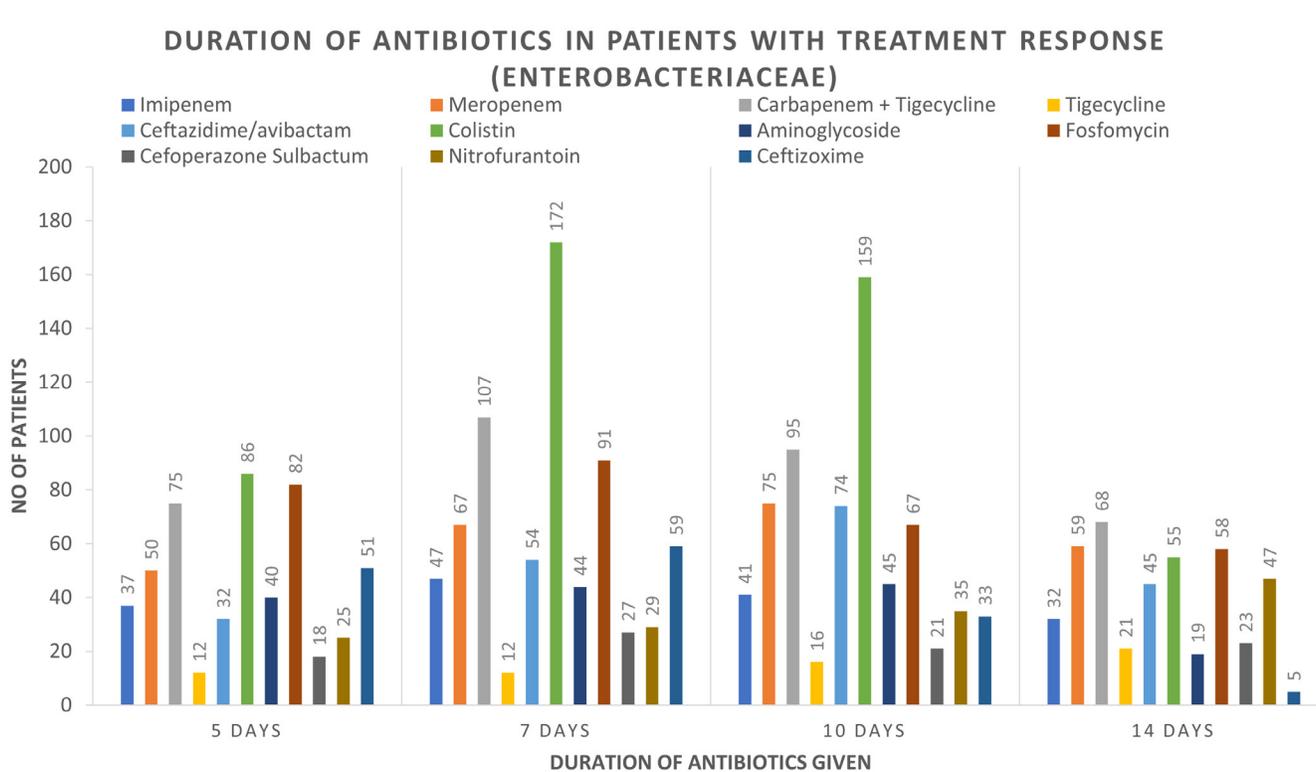


Figure S8: Duration of antibiotics administered in patients with treatment response (organisms of Enterobacteriaceae).

DURATION OF ANTIBIOTICS IN PATIENTS WITH TREATMENT RESPONSE (ACINETOBACTER, PSEUDOMONAS)

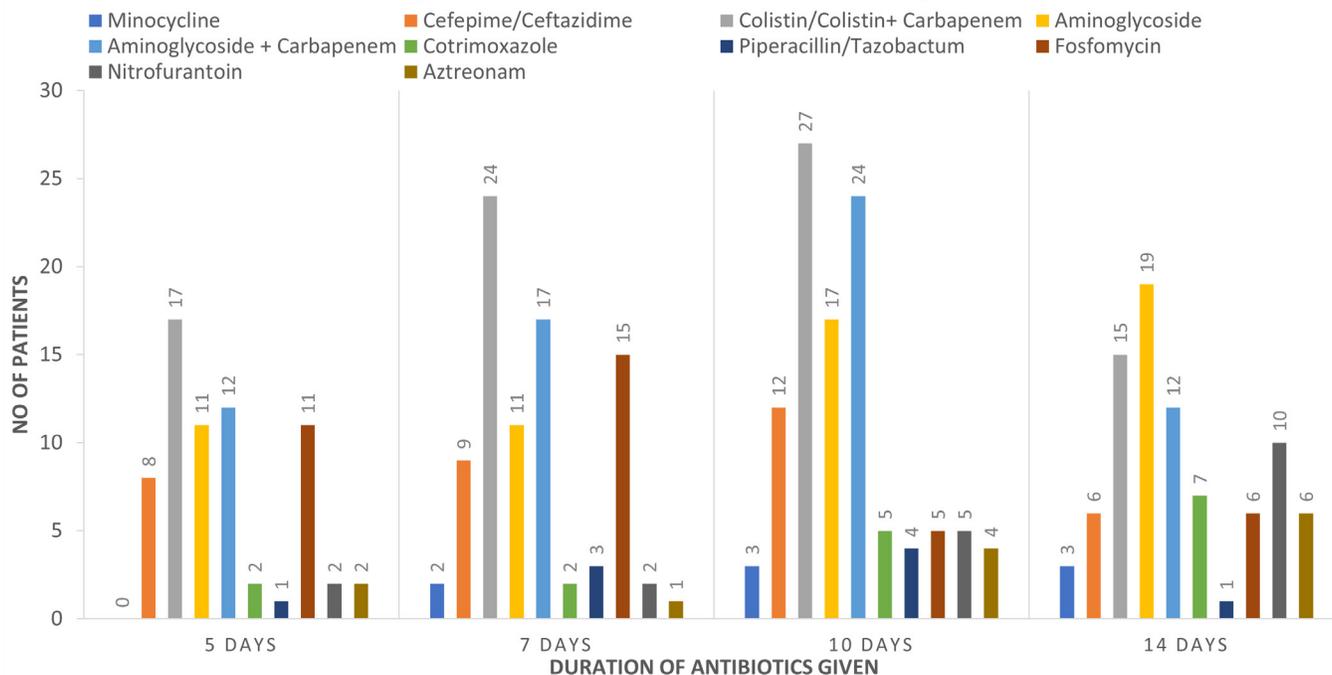


Figure S9: Duration of antibiotics administered in patients with treatment response (Acinetobacter and Pseudomonas organism species).

DEATH IN CASES WITH CR-UTI

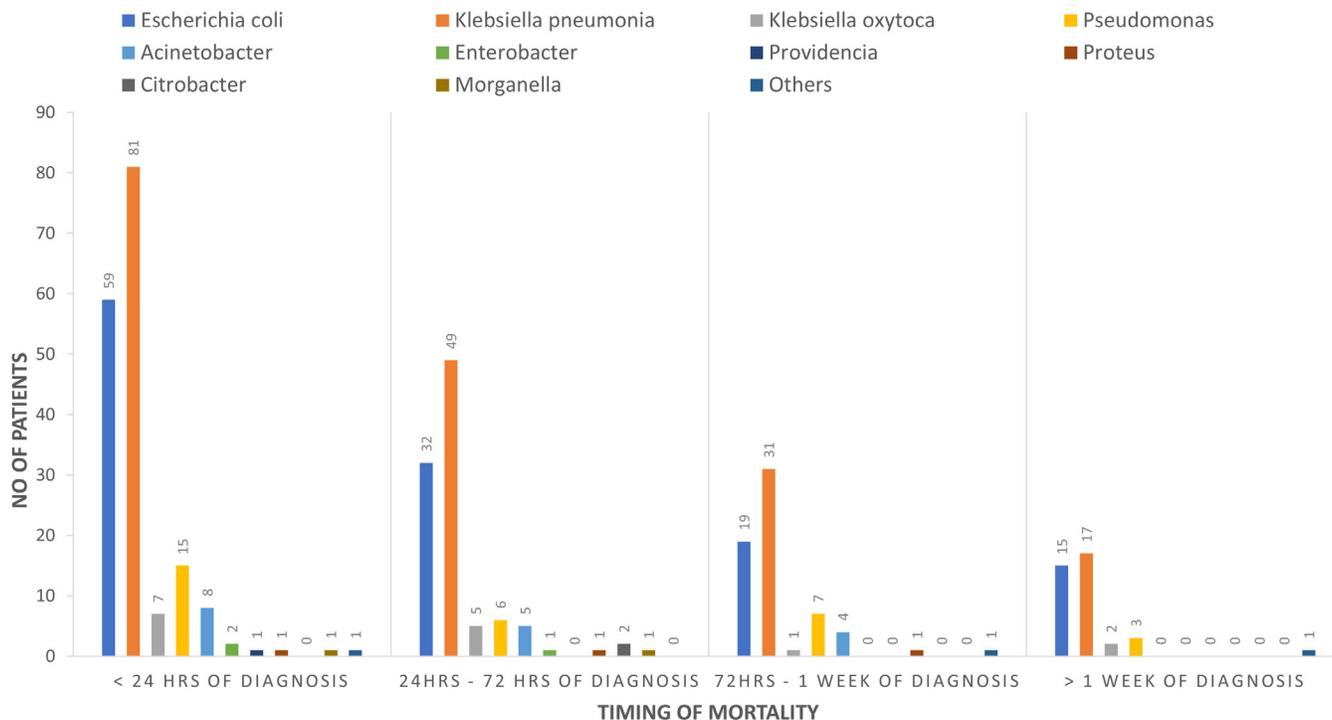


Figure S10: Mortality in cases with CR-UTI according to time of diagnosis.

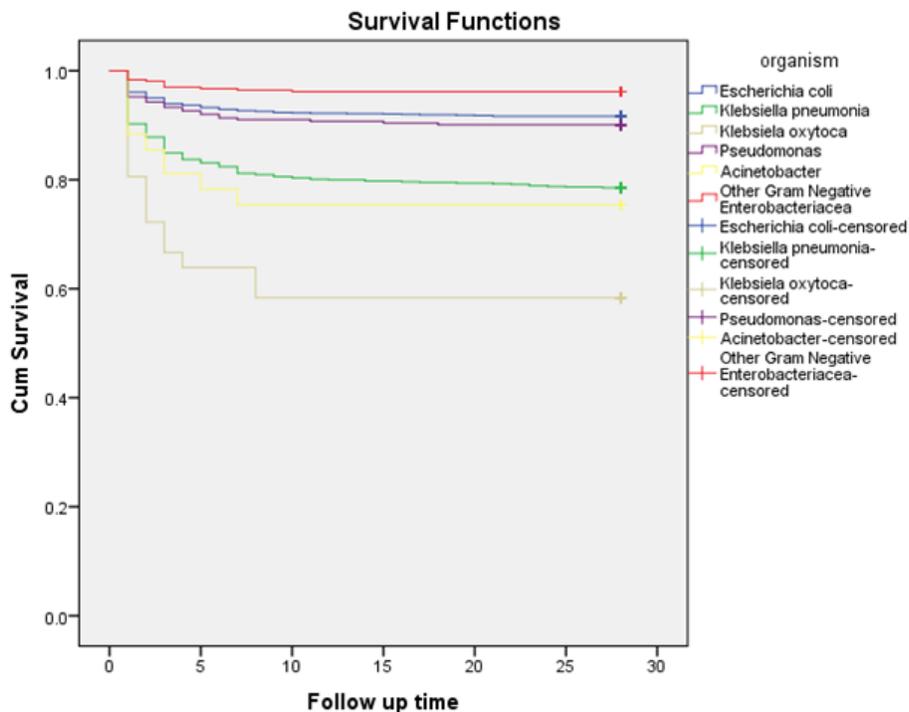


Figure S11: Kaplan–Meier survival analysis of patients with CR-UTI according to the organism.

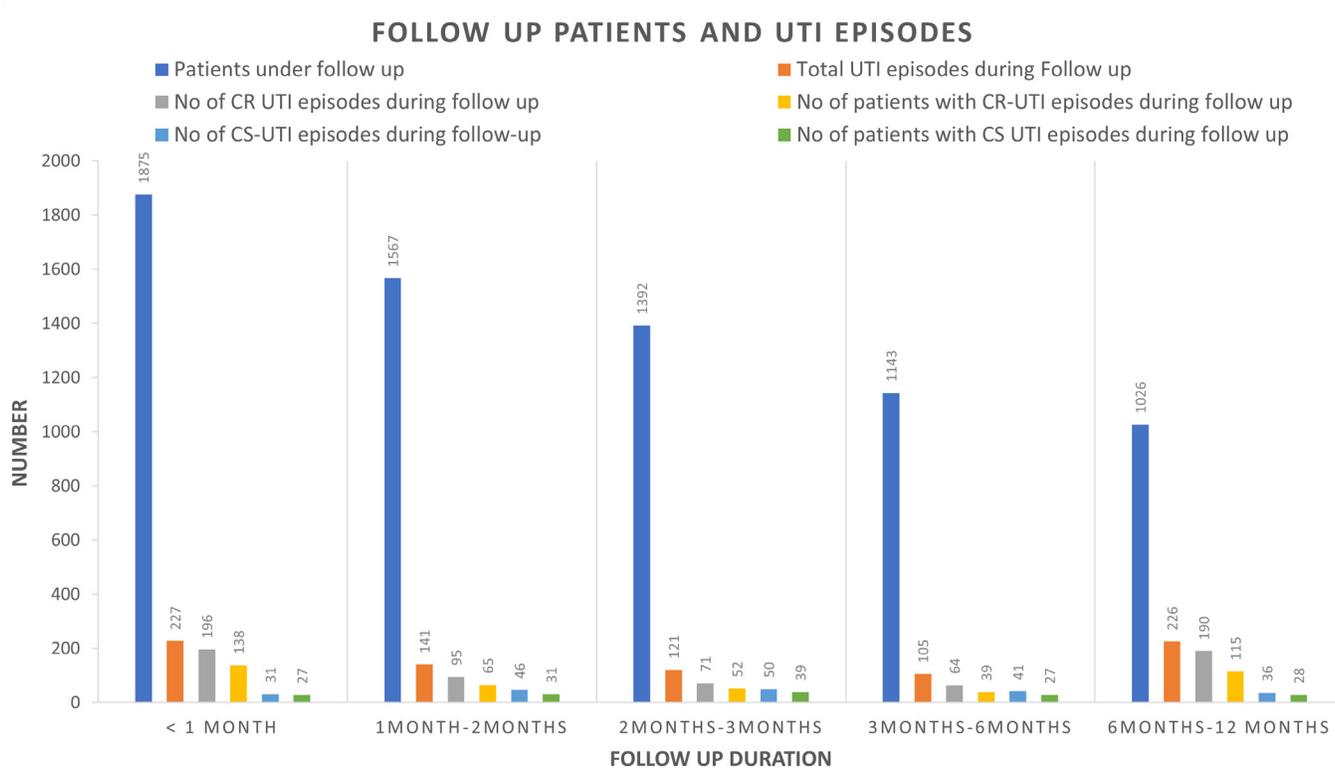


Figure S12: Number of follow-up patients and number of UTI episodes according to time of follow-up.

MICROBIOLOGICAL SPECTRUM OF CARBAPENEM-RESISTANT UTI DURING FOLLOW UP

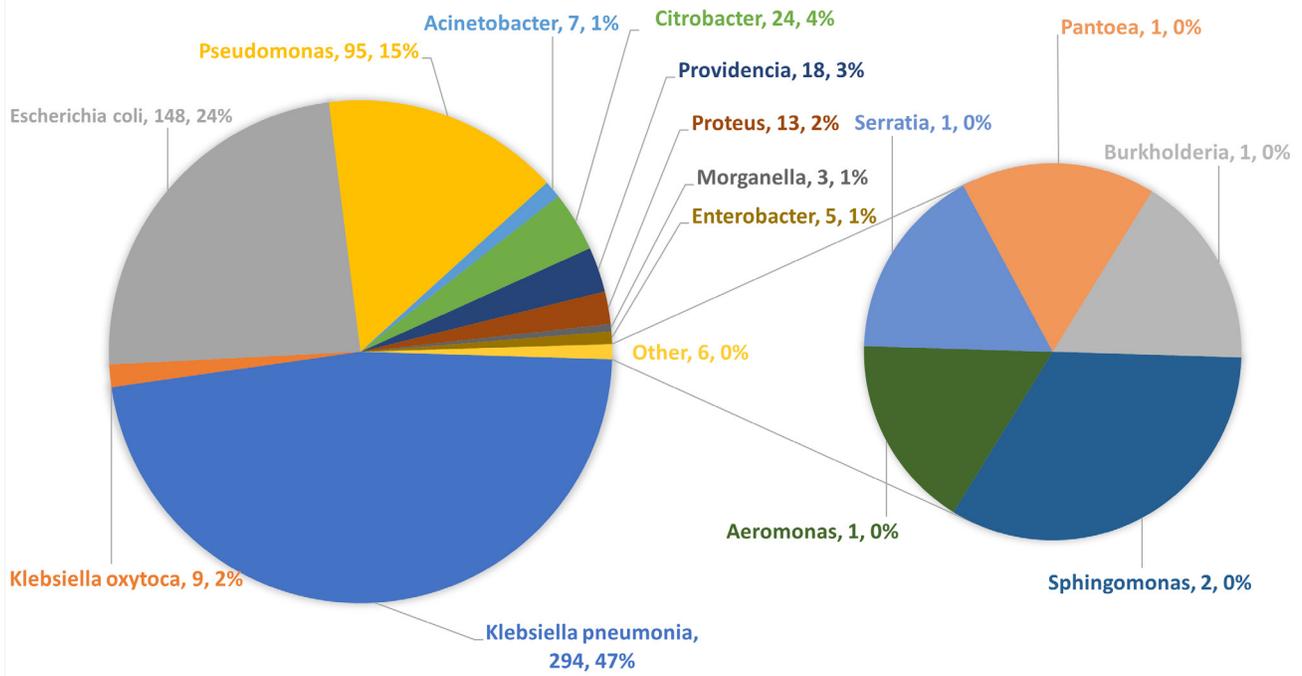


Figure S13: The microbiological spectrum of Carbapenem-resistant UTI reinfection episodes during follow-up.

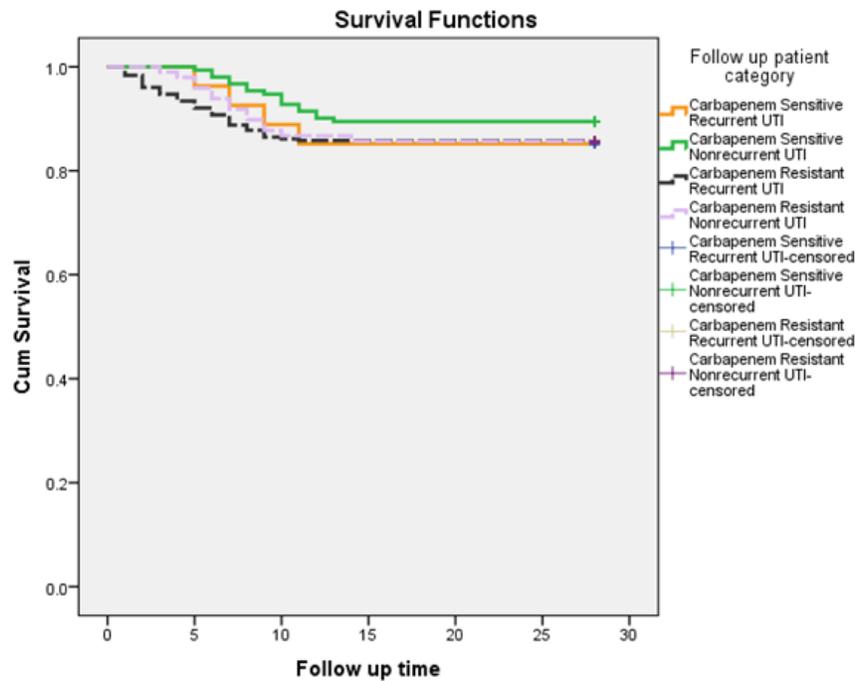


Figure S14: Kaplan-Meier survival analysis of patients with reinfection during follow-up.