**Conclusion:** Characteristics of the patient population, geographic location, recent travel, possible vector exposures, predisposing medical conditions, and individual behaviors may be contributing factors in regards to the underlying etiologic organism(s) involved in each individual case of splenic abscess. This case study is especially rare in that the etiology of the splenic abscess was chronic eczematous cellulitis.

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#### 1551. Cat Scratch Disease as a Mimicker of Malignancy: Rare and Elusive Udit Dhal, MBBS<sup>1</sup>; Jeffery Tarrand, MD<sup>2</sup>; Dimitrios P. Kontoyiannis, MD<sup>3</sup>; <sup>1</sup>Baylor College of Medicine, Houston, Texas; <sup>2</sup>University of Texas MD Anderson Cancer Center, Houston, TX, Houston, Texas; <sup>3</sup>The University of Texas MD Anderson Cancer Center, Houston, TX

#### Session: P-70. Skin and Soft Tissue

**Background.** Cat scratch disease (CSD) mimicking malignancy has been the subject of scattered case reports. To that end, we reviewed patients (pts) with CSD at MD Anderson Cancer Center (MDACC), focusing on the clinical overlap of CSD presentation with that of malignancy.

**Methods.** We retrospectively reviewed all pts diagnosed with CSD at MDACC (11/2015-1/2020). CSD was diagnosed based on *Bartonella henselae* serology, animal exposure and biopsy findings consistent with the diagnosis. We collected data on CSD epidemiology, signs, symptoms, laboratory findings, histopathology, radiological studies, treatment used, outcome and the malignancy mimicked. We also reviewed the published cases of CSD mimicking malignancy (1952-2020).

**Results.** We identified 11 such pts; 1 (9%) was male and 5(45%) were  $\leq$  18 years old. No pt had a prior history of malignancy. All but 1 pt reported an exposure to cats. Only 2/11 (18%) had fever, and none of the pts had skin lesions or hepatosplenomegaly. All pts had lymphadenopathy; 2/11 (18%) had only inguinal lymphadenopathy. PET scan was performed for 3 pts and revealed only enlarged lymph nodes. Several malignancies were considered as initial diagnostic impressions, including sarcoma (n=3), lymphoma (n=2), breast cancer (n=2). Serum Bartonella IgG titer was  $\geq$  1:512 in 9/11(82%) pts with 3 pts (28%) positive for IgM. 8 pts had a biopsy and non-necrotizing granuloma was the most common finding, present in 4. Azithromycin was used in all 8 pts that were treated. Nearly all pts improved or had resolution of symptoms with one pt having persistent fever and lymphadenopathy. Literature search identified 33 cases of CSD that mimicked malignancy (10 for breast cancer, 10 for lymphoma, 6 for sarcoma with 1 each for lung, pancreatic, parotid and 4 others).

**Conclusion.** Although there was a probable referral bias in the CSD pts at MDACC, CSD should be included in the differential diagnosis of malignancy. Although publication biases are probable, literature review also supports the notion that atypical CSD rarely can simulate a variety of malignancies.

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## 1552. Clinical Outcomes and Healthcare Costs of Inpatients with Tetanus in Korea in 2011–2019

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### Session: P-70. Skin and Soft Tissue

**Background.** We aimed to investigate the recent trend of clinical outcomes and medical costs of inpatients with tetanus, which is a rare, vaccine-preventable but extremely grave disease, in Korea, in 2011–2019 for the first time.

*Methods.* From January 2011 to October 2019, this study examined 49 patients with tetanus admitted in 2 national university hospitals in Gwangju and Daegu of South Korea. Patients' medical records were retrospectively reviewed to determine the clinical factors and medical cost for tetanus management.

**Results.** The mean age was  $65.3 \pm 16.1$  years and 32 (65.3%) of them were female. All patients (100.0%) had generalized tetanus, and 5 (10.2%) died during admission. The median duration from symptom onset to hospital visit was 4 days. Trismus (85.7%) was the most common symptom, and wound of the lower extremities (24.5%) was the most frequent presumed entry site of toxin. Only 6 (15.0%) patients were operated for wound management. The median hospital stay was 39 (9; 49) days. Furthermore, 32 (65.3%) needed mechanical ventilation, and 20 (40.8%) patients developed aspiration pneumonia. The median total healthcare cost was 21,072 KRW(Korean Republic Won) (17,560 USD(United States Dollar); 1 USD = 1200 KRW) per person. After discharge, 35 (79.5%) patients fully recovered without any disability. **Conclusion.** Tetanus remains a grave disease that requires long duration of admission and huge medical cost in Korea. The completion rate of 3-time tetanus toxoid (Td) or tetanus toxoid, acellular pertussis and diphtheria vaccine (Tdap) vaccination was low; thus, the medical staff needs to establish more medical advice or policies to the general population of Korea

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# 1553. Efficacy and Safety of Dalbavancin and Oritavancin in the Treatment of Gram-Positive Infections

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### Session: P-70. Skin and Soft Tissue

**Background.** Lipoglycopeptides are approved for acute bacterial skin and skin structure infections (ABSSSI), but are often used in other infections, including osteo-myelitis (OM) and bloodstream infections (BSI).

*Methods.* This retrospective cohort study included VA St. Louis Health Care System patients aged ≥18 through ≤89 years treated for ABSSSI, BSI, or OM with lipoglycopeptides. Patients were excluded if they received ≥72 hours (ABSSSI, BSI) or ≥7 days (OM) of antibiotics prior to lipoglycopeptide administration or other intravenous antibiotics were administered for ≥48 hours after lipoglycopeptide. The primary efficacy outcome was clinical success in the lipoglycopeptide cohort, defined per infection. Secondary outcomes were a comparison of clinical success in the lipoglycopeptide cohort to historical controls of patients treated at the VA St. Louis for ABSSSI, BSI, or OM. A multivariate regression was also conducted to find factors in the lipoglycopeptide group independently associated with clinical success. Safety outcomes compared adverse drug reactions between single- and 2-dose regimens of lipoglycopeptide.

**Results.** A total of 36 patients were included in the analysis; no patients met inclusion for bloodstream infection. Twenty-nine patients were treated for ABSSSI and 7 patients met inclusion for OM treatment. Dalbavancin was the agent used most often for both OM (4/7) and ABSSSI (22/29). The primary outcome of clinical success occurred in 77.7% (28/36) of the lipoglycopeptide cohort. There was no difference in clinical success between the lipoglycopeptide cohort and historical controls for ABSSSI (86% [5/29] vs 84% [159/189], p >0.05) or OM (43% [3/7] vs 58% [83/143], p >0.05). No difference in adverse outcomes between single- and 2-dose regimens of lipoglycopeptide were observed.

**Conclusion.** Clinical success for patients treated with lipoglycopeptides for ABSSSI and OM in this small cohort were comparable to historical controls. No difference was identified in the safety between single- and 2-dose regimens of lipoglycopeptides.

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**1554. Epidemiology of Adult Bacterial Hand Infections at Two Urban Hospitals** Arsheena Yassin, PharmD<sup>1</sup>; Christine Stavropoulos, MD<sup>2</sup>; Krystina L. Woods, MD<sup>3</sup>; Jiashan Xu, PharmD<sup>4</sup>; Justin Carale, PharmD<sup>4</sup>; Elena Khachaturyan, PharmD<sup>4</sup>; Chris Taduran, PharmD<sup>4</sup>; Hendrik Sy, MD<sup>4</sup>; Andras Farkas, PharmD<sup>5</sup>; <sup>1</sup>Mount Sinai Morningside, New York, New York; <sup>2</sup>Icahn School of Medicine at Mount Sinai St Luke's and West Hospitals, new york, NY; <sup>3</sup>Mount Sinai West, NEW YORK, NY; <sup>4</sup>Mount Sinai Morningside and West Hospitals, New York, New York; <sup>5</sup>Mount Sinai West Hospital, New York, NY

### Session: P-70. Skin and Soft Tissue

**Background.** Hand infections represent a major source of morbidity, which can result in hand stiffness and amputation. Early appropriate empiric antibiotic regimen may reduce the associated morbidity, hence the importance to examine local epidemiology. The aim of this study was to define the current epidemiology of adult hand infections at two urban hospitals in New York City.

*Methods.* We performed a double center, retrospective study of adult patients hospitalized from March 2018 to May 2020. Patients with positive cultures associated with the hand infections were included. Retrospectively, 100 patients were reviewed. Data on baseline demographic, clinical, surgical, microbiology, and treatment parameters were collected.

**Results.** Of the 100 patients, 76% were male, with median age of 47.5 years (35, 58.25) and average C-reactive protein (CRP) of 50.66 mg/L ( $\pm$  64.64) on admission (see Table 1). Previous hospitalization within 1 year (38%), previous surgical procedures (39%) and recent IV medication use (26%) were common. 130 bacterial isolates were identified (see Table 2). The most frequent organisms were Gram-positive, with Methicillin susceptible *Staphylococcus aureus* (MSSA, 25.38%), *Streptococcus species* (20.08%), and Methicillin resistant *Staphylococcus aureus* (MRSA, 15.38%) being the most common. Gram-negative organisms were infrequent, with *Haemophilus parainfluenzae* (3.85%), *Enterobacter cloacae* (3.85) and *Pseudomonas aeruginosa* (3.08%) being the most prevalent. Of the 100 patients, 27% had polymicrobial infections, associated with trauma (6%), illicit IV use (6%) and unknown (7%) etiologies.