

may have had transient postprocedure bacteremias, clinically relevant sepsis is unlikely because none had fever or associated morbidity. Finally, although steps were taken to avoid and to assess potential information bias, exposure assessment depended on documentation in the medical record. Such documentation (for example, historical data) may have been more complete in those patients with complicated courses.

Patients undergoing urologic manipulation including ESWL should have preprocedure urine cultures and appropriate antimicrobial therapy if positive. As noted in this study, care must be taken not to neglect potentially significant low-level bacteriuria and delayed growth of *Candida* species. In addition to an abnormal urinalysis, the risk factors noted herein may help identify patients who remain at risk for urinary lithotripsy associated sepsis.

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Drinking Water a Source of *Mycobacterium avium* Complex Infection

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The incidence of *Mycobacterium avium* complex (MAC) was found to be particularly high in potable water samples in Los Angeles, including those from hospitals, suggesting that potable water may be a source of infection in patients with HIV infection. This finding was reported by Dr. T. Aronson and colleagues at the University of California, Los Angeles Medical Center, Sylmar, California, at the May

16-20, 1993, meeting of the American Society of Microbiology in Atlanta, Georgia.

Aronson sampled potable water from 13 reservoirs, 10 hospitals, and 40 homes in the Los Angeles area. Nontuberculous mycobacteria were found in all 10 of the hospital samples, 34 of the 40 home samples, and in 11 of the 13 reservoir samples. MAC organisms were isolated from nine of the 10 hospital samples, 11 of the 40 home samples, and five of the 13 reservoir samples. Aronson reported that two clinical isolates

of *M avium* from area AIDS patients had serotypes and multilocus enzyme electrophoresis types identical to those from three hospitals and two reservoirs.

The researchers concluded that these findings suggest that potable water may be a source of infection in AIDS patients and the high recovery rate of *M avium* in hospitals suggests the possibility of nosocomial infection. Further studies are in progress.