penicillin G (PEN; from 30.3% in 2009 to 16.0% in 2015) and ceftiraxone (CRO; from 27.3% to 12.0%), as did PCV13 STs (from 34.5% to 16.0% and from 27.5% to 8.6%, respectively). ST 19F showed stable S patterns over time and 19A remained the less S ST with high NS rates for PEN (49.0%–76.5%), CRO (24.5%–64.8%), erythromycin (ERY; 76.9%–90.8%), and clindamycin (CLI; 51.0%–73.1%). These NS rates for 19A rose from 2009 to 2011–2012, decreasing in 2013–2016. NS rates for CLI and ERY against ST 3 increased to 19.6% and 23.9% in 2015, respectively. Non-vaccine STs showed stable NS rates for PEN, CRO, and CLI. However, an increasing trend for ERY NS (from 35.2% in 2009 to 45.0% in 2015) was noted, which was driven by increasing NS rates for 35B (from 42.3% in 2009 to 71.2% in 2015).

Conclusion. PCV13 ST exhibited decreasing trends for NS during the study period, except for ST 3, which showed stable S rates over time. Overall, implementation of PCV13 decreased considerably the NS rates in S. pneumoniae causing infections in the US adult population. Further surveillance will enhance understanding of future antimicrobial patterns in S. pneumoniae in the context of adult pneumococcal vaccination programs.

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1497. Changing Epidemiology of Invasive Pneumococcal Disease due to Conjugate Vaccine Serotypes in Toronto, Canada After Introduction of a Routine Pediatric PCV13 Program

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From 1/1995–5/2017, 9727 IPD cases have been identified. Among 910 IPD cases since 2015, 109 (12%) were aged <15y; 37 (41%) 15–64y and 425 (41%) aged ≥65y; 57 (7%) were due to serotypes (STs) included in PCV7, 188 (24%) due to STs in PCV13 but not PCV7, 228 (36%) due to STs in PPV23 but not PCVs, and 295 (38%) due to non-vaccine STs (142 isolates not available/not yet typed). The incidence of IPD in 2016 was 4.78/100000 in children and 5.68/100000 in adults (44% and 32% reduction since 2008/9 respectively). Since 1/2015, there has been no IPD due to PCV7 STs in children. In adults, 57 episodes occurred in 2016 (19 of ST4, 13 ST19F, 8 ST14, 7 ST6B, 5 STV, 3ST18c, and 2 ST23F). The median age of patients was 64.5y (range 28–98), 37 were male; 67% had an underlying illness. PCV7 ST7 cases were more likely to be associated with group housing than other cases (12/45, 21%, v 47/644, 7%,

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