# European Respiratory Society
# Annual Congress 2012

**Abstract Number:** 3996

**Publication Number:** P2550

**Abstract Group:** 10.1. Respiratory Infections

**Keyword 1:** Pneumonia **Keyword 2:** Viruses **Keyword 3:** No keyword

**Title:** Prevalence and risk factors for pneumonia in a cohort with clinical suspicion of influenza A (H1N1)

Dr. Mireia 23607 Serra MSERRAF@TAULI.CAT MD [1], Dr. Silvia 23608 Capilla Scapilla@tauli.cat MD [2], Dr. Gema 23609 Navarro Gnavarro@tauli.cat MD [3], Dr. Eduard 23610 Monsó Emonso@tauli.cat MD [1], Dr. Carles 23611 Grimau Cgrimauc@tauli.cat MD [1] and Dr. Miguel 24206 Gallego Mgallego@tauli.cat MD [1]. [1] Pneumology, Corporació Sanitària Parc Tauli, Sabadell, Barcelona, Spain ; [2] Microbiology, Corporació Sanitària Parc Tauli, Sabadell, Barcelona, Spain and [3] Epidemiology, Corporació Sanitària Parc Tauli, Sabadell, Barcelona, Spain .

**Body:** Due to the potentially life-threatening of H1N1 infection, mainly influenza pneumonia (IP), distinguishing IP from non-influenza pneumonia (NIP) is crucial to adequate the appropriate treatment. Aim: 1.- To determine the prevalence of IP and NIP in a cohort with suspected pandemic H1N1. 2.- To evaluate the presence of risk factors for pneumonia in both groups. Methods: Retrospective observational study undertaken in patients with clinically suspected influenza admitted to emergency room, from August to December of 2009. Nasopharyngeal swabs were obtained from patients and RT-PCR was performed. Episodes in patients under age 18, nosocomial acquisition and infections in health-care workers were excluded. Demographic variables, comorbidities, final diagnosis and administered treatment were recorded. Results: 326 episodes were evaluated (59.8% women). In 141 cases (43.2%) pandemic H1N1 was confirmed. IP was diagnosed in 33/326 (10.1%) and NIP in 86/326 (26.4%). 84.8% of IP episodes required hospital admission (27.3% in ICU). On the other hand, 79.1 % of NIP needed hospitalization (17.4% in ICU). 24% of IP were classified as PSI class IV/V vs. 44.2% of NIP (p=0. 045). Mortality in both groups was 9.1% vs. 10.5% respectively. Regarding to risk factors, statistical significant differences were found in age (47.5 ± 15.9 vs. 58.7 ±19.5, p=0.002), asthma (18.2 % vs. 5.8%, p=0.037) and COPD (9.1% vs. 30.2%, p=0.016). Obesity and pregnancy did not show significant differences. Conclusions: 1. - The overall prevalence of pneumonia was 36.5% (10.1% for H1N1). 2. - Older age and COPD were risk factors associated with non-influenza pneumonia while asthma was associated with influenza pneumonia.