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Title: Pneumocystis jirovecii pneumonia prophylaxis in non-HIV infected patients on immunosuppression; a regional cross-sectional study

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Body: Background: The risk of acquiring Pneumocystis jirovecii pneumonia (PCP) as an opportunistic infection is well described in HIV, haematological and solid organ transplant patients with clear published guidelines for antibiotic prophylaxis. Outside these groups there is no agreed guidance for patients on immunosuppressive drugs. In non-HIV patients, manifestation is acute and severe with high mortality (35-50% with and up to 100% without treatment). With widening use of these agents physicians need to be aware of the potentially serious risks Objectives: To quantify the perception of PCP risk and use of prophylaxis amongst clinicians who regularly prescribe immunosuppressant treatment Methods: An online questionnaire sampling respiratory, gastroenterology and rheumatology consultants in the Mersey Deanery, England Results: 42/104 consultants replied (21/42 Respiratory, 9/42 Gastroenterology and 11/42 Rheumatology), with 37/42 regularly starting patients on immunosuppressive agents for greater than 4 weeks duration. 17/42 felt that PCP was a significant issue and 16/42 had a patient under their care diagnosed with PCP in the last 2 years. Individual's practice varied significantly, with prophylaxis given to varying doses of steroids and other named specific treatment regimes. 34/42 (81%) felt there was insufficient guidance on the topic Conclusion: The majority of clinicians surveyed using immunosuppressive drugs felt there was insufficient guidance for PCP prophylaxis within their specialty. Further research needs to be carried out on patients receiving immunosuppressive agents to avoid preventable mortality and morbidity in these at-risk patient groups.