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Title: Common organisms causing community acquired pneumonia

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Body: INTRODUCTION: In developing countries like Pakistan pneumonia remains a leading cause of death among the very old, the very young and the chronically ill patients. We are conducting a study observing the organisms causing community acquired pneumonia. Our secondary outcome is the antibiotic response. METHODS: 110 patients have been registered from June 2012 to Dec 2012 ages between 20 to 90 years admitted only in Chest Medicine department were included in the study. 55 males with a mean age of 55 years, 40 females with a mean age of 65 years. 61% of the patients were hypertensive, 40% of the patients were diabetic, 38% had COPD and 25% were asthmatic. Other co morbidities include IHD, CVA, BPH and OA. RESULTS: Among the 110 patients 25 patients had sputum c/s negative, 20 patient had dry cough so sputum samples were not sent, 17 patient c/s grew Moraxella Catarrhalis, 15 patient c/s grew Klebsiella Pneumoniae, 11 patient c/s grew Haemophilus Influenza, 11 patients c/s grew Pseudomonas Auregenosa, 8 patient c/s grew Staph Aureus and only 3 patient c/s grew Strep Pneumonia 70% of patients responded to amoxicillin with clavulanic acid in combination with clarithromycin, 24% responded to cephalosporin, 6% that included pseudomonas auregenosa were required to switch antibiotic to piperacillin+tazobactam CONCLUSION: We observed that B-lactams are still the potent drugs for CAP. Co- morbidities and age can affect the common pathogen of CAP. We may observe Klebsiella Pneumonia and Pseudomonas auregenosa in CAP when the patients are immuno compromised and COPD. Different age group may respond differently to same pathogen.