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Title: Severity and outcome of community acquired pneumonia in asthmatic patients

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Body: Introduction : Despite the wide knowledge on viral exacerbations of asthma, limited information is available about bacterial infections. We investigated prevalence, clinic characteristics and aetiology of community-acquired pneumonia (CAP) in asthma. Methods :We prospectively studied 4107 CAP patients over a 12-years period; of these 167 were asthmatic. Results : Asthmatics showed younger age (59±19 vs 66±20), less males (31% vs 63%) and less active smokers (30% vs 57%). Moreover, they had less renal (asthma-CAP: 2% vs CAP: 6%) and neurological (12% vs. 19%) comorbidities but more frequent use of previous inhaled corticosteroid (54% vs 16%) and antibiotics (31% vs 24%)(p<0.05 each). In comparison with non asthma-CAP, asthmatics showed at admission more expectoration, dyspnea and pleuritic pain, higher leucocytes but a lower PSI. No differences were observed in the microbiology, being *S. pneumoniae* the most frequent isolate. Clinical course and outcomes were similar in both groups excepting the rates of hospitalization and renal failure, both less frequent in asthma.

Conclusion : Asthmatics were younger but more symptomatic. Despite lower PSI, likely due to age, asthmatics had similar outcomes to non-asthmatic patients. The potential benefit of younger age seems counterbalanced by more severe clinical presentation resulting in similar mortality.