

European Respiratory Society Annual Congress 2012

Abstract Number: 3296

Publication Number: P1924

Abstract Group: 10.1. Respiratory Infections

Keyword 1: Hypoxia **Keyword 2:** Ventilation/NIV **Keyword 3:** Acute respiratory failure

Title: Predictor of outcome and length of hospital stay in acute viral pneumonia: 2009 H1N1 influenza A experience

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Body: Introduction:- H1N1 Influenza A virus spreads globally causing pneumonia and high mortality. Aim:- We studied clinical characteristics of patients admitted with influenza pneumonia in a tertiary care hospital of northern India over one year. Method:- We analyzed 77 patients with H1N1 influenza, confirmed with RT-PCR assay. Results:- Out of 77 patients, 33(43%) were female. Mean age was 41 +/- 13 years. Thirty eight patients (50%) had at least one comorbidity, Diabetes Mellitus was most frequent. Presenting symptoms were fever in 75 (97%), cough in 67(87%) and dyspnoea in 59 (76%) patients. Mean duration of dyspnoea at presentation was higher in expired group 6 +/- 3 Vs 4 +/- 3 days (P=0.02). Bilateral opacities on chest radiograph seen in 49 (55%) patients. Mean PaO₂/FiO₂ ratio on admission was 213 +/- 133 and 175 +/- 101 at 24 hours in discharge patients while expired patients it was 141 +/- 92 and 122 +/- 65 respectively. Mean PaCo₂ was higher in expired group 55 +/- 27 Vs 37 +/- 11 (P=0.002). Forty five patients (59 %) had one or more organ failure. Respiratory Failure was commonest (n=43, 56 %) requiring Invasive ventilation in 13(17%) patients and Non invasive ventilator in 23(30%) patients. Overall mortality was 13% (n=10). PaCo₂ on admission (odds ratio, 1.093; confidence interval, 1.133 to 1.193; P=0.044) and number of organ failure (odds ratio, 8.089; confidence interval, 1.133 to 57.77; P=0.037) were identified as independent risk factors for in hospital mortality. Conclusion:- Factors associated with poor outcome in acute viral pneumonia are long duration of dyspnoea, bilateral pneumonia, low PaO₂/FiO₂ ratio on admission and 24 hours later, high PaCo₂ & number of organ failure.