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Title: The incidence and risk factors of ventilator associated pneumonia on the mortality in patients with traumatic brain injury

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Body: Background and Goal of Study: Our objective was to describe the incidence, risk factors and evaluate the influence of Ventilator associated pneumonia (VAP) on the mortality and morbidity in patients with traumatic brain injury (TBI). Methods: During December 2008-January 2012, 133 patients with TBI requiring mechanical ventilation more than 48 hours and GCS \leq 8 were studied, 83 males and 50 females. The mean age was 36yrs. On admission to the intensive care unit (ICU) they had body mass index 23 \pm 7 kg/m² and APACHE II score 18 \pm 4. Out of 133 patients the 34 had co morbid medical illness. Results: VAP occurred in 40 out of 133 TBI patients There was no difference in predominance as far as gender was concerned. Incidence of VAP was significantly associated to patients requiring longer mechanical ventilation 14 days \pm 2 and longer sedation 10 days \pm 2. Patients with co morbid medical illness and VAP were associated with a significantly greater degree of nonneurological organ system dysfunction, though there was no difference in frequency of VAP development compared to the patients without co morbid medical illness. Although VAP was not associated with increased hospital mortality, patients who developed VAP had a longer duration of mechanical ventilation (24 versus 8 days, p < 0.0001) and longer ICU lengths of stay (28 versus 10 days, p < 0.0001. Conclusions & Discussion: The incidence of VAP in patients with TBI is high; however, its appearance does not affect the prognosis and does not seem to be associated with a significantly increased risk of mortality though increases the mechanical ventilation duration and the ICU length of stay.