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Title: A study of incidence, outcome and antibiotic sensitivity pattern of ventilator associated pneumonia in icu of tertiary care hospital in Nepal

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Body: Background: Ventilator Associated pneumonia (VAP) is an important intensive care unit (ICU)-acquired infection in mechanically ventilated patients. Early and correct diagnosis of VAP is difficult but is an urgent challenge for an optimal antibiotic treatment. Objectives: To evaluate the incidence, microbiology and antibiotic sensitivity pattern of Ventilator Associated Pneumonia. Materials and Methods: A prospective, open, epidemiological clinical study was performed in ICU of TUTH, Maharajgunj. 100 patients admitted to ICU and Mechanically Ventilated were evaluated with regard to VAP. Clinical Pulmonary Infection Score (CPIS) was used as tools to diagnose VAP. Results: Among 60 long-term ventilated patients, 25 (41.6%) developed VAP. The incidence was 25 VAPs per 100 ventilated patients or 26 VAPs per 1000 ventilator days during the period of study. Days on ventilator and duration in ICU were higher in the VAP group. There was a trend towards increasing mortality in the VAP group (p value .06). The VAP was caused predominantly by Klebsiella pneumonia in 34.5% of cases, followed by Acinetobacter calcoaceticus baumannii in 27.6%, Acinetobacter wolffi and Pseudomonas aeruginosa in 13.8% each and Escheresia coli in 10.3%. The most sensitive antibiotics were Colistin, followed by Polymyxin B and Amikacin with sensitivity rates of 67%, 60% and 58% respectively. Conclusion: There exists a high rate of VAP in our ICU. Targeted strategies aimed at reducing VAP should be implemented to improve patient outcome and reduce length of ICU stay and costs.