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Title: Community-acquired pneumonia with severe sepsis: Etiology and prognosis

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Body: Background: Community Acquired Pneumonia (CAP) is a serious respiratory infection that may cause severe sepsis in around 30% of patients, thus increasing severity and mortality. Objective: To characterize patients with CAP and severe sepsis at diagnosis. Results: A prospective multicentric cohort study was performed in 13 hospitals. Severe sepsis was diagnosed using Drenmsizov criteria (Chest 2006). 4,070 patients were included: 1,529 (37.6%) with severe sepsis. The number and the most frequent organ failures are shown in Figure 1.

Statistical differences between etiology and number of organ failure are depicted in Table 1.

Etiology and Number of organ failures (n)

Etiology	1 organ failure	2 organ failures	≥3 organ failures	p
S. pneumoniae	273 (25)	86 (26.5)	23 (31.9)	.023
Mixed etiology	36 (3.3)	12 (3.7)	8 (11.6)	0.008

n (%) : number-percentage; p: ≤ 0.05

Mortality significantly increases in those with more organ failures (1 organ (3.4%) vs ≥ 3 organs (22%)).

Conclusions: S. pneumoniae and mixed etiology are the main cause of severe sepsis in CAP. The higher number of organ failures the more complications and the poorer prognosis with greater mortality.