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Title: Clinical features, outcome and factors associated with mortality in patients with Nocardia pneumonia

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Body: Background: Nocardia pneumonia has emerged as an important cause of mortality and morbidity in both immunocompetent and immunocompromised hosts. In this study, risk factors, clinical features, outcomes and factors associated with mortality in nocardia pneumonia were reported. Materials and Methods: Clinical records of all cases diagnosed with nocardia pneumonia during 2001-2010 were reviewed. Identification of Nocardia species was based on positive Gram stain and positive modified acid-fast stain results, colonial morphology, and conventional biochemical reactions. Data was analyzed using SPSS version 17. Factors associated with mortality was assessed by univariate and multivariate analysis. Results: Fifty Five cases were identified. Fever, cough and dyspnea were the most common presentations. Most important risk factors were chronic steroid administration (69%) and an underlying malignancy (24%). Most common complications observed were respiratory failure (27%) and septicemia (27%). 19(34.5%) patients died. Factors associated with mortality were Smoking (p 0.01), decreased appetite (p 0.007), leukocytosis (p 0.006), mechanical ventilation (p <0.001) and septicemia (p <0.001). Septicemia (OR 20 [95% CI 3.13 -130] was found to be independent risk factor for mortality on multivariate analysis. Conclusion: We report underlying malignancy and chronic corticosteroid therapy as a risk factor for development of nocardiosis in our patients. High mortality rate in this cohort were observed. Septicemia was found to be independent risk factor for mortality. Clinicians should keep a high index of suspicion for early diagnosis and management to decrease mortality.